

Officer Wellness: The Silent Killers

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Abstract

This capstone project addresses an issue seldom discussed within law enforcement agencies, the overall wellness of a law enforcement officer. It discusses different factors of physical and mental health including the effects of shift work, physical fitness, family issues, divorce, substance abuse and addiction, and officer suicide. Nearly every law enforcement agency in the United States provides its officers with the necessary training to perform their duties. In the academy, law enforcement officers receive training on defensive tactics, driving, and shooting. In addition to the physical training they receive, they also receive academic training in topics such as legal aspects, drugs and drug law, and interview and interrogation. Although these topics are necessary for officers to do their jobs effectively, law enforcement officers are rarely taught how the profession affects their mental and physical wellbeing. Across the United States, law enforcement officers succumb to their demise more often not by gunshot wounds, but from health conditions, substance abuse, vehicle crashes, and suicide. Most law enforcement agencies do not provide training on mental and health issues, nor do they have any programs in place to help officers deal with stress, address their mental health, or promote physical wellness. This capstone will address the need for law enforcement agencies to promote health and wellness to their officers. It will provide an overview of studies as well as a plan of action for agencies to address this important issue by using the leadership skills discussed during the National Command & Staff College.

Officer Wellness: The Silent Killers

Every officer's well-being is important to their survival in the face of adversity. Officers always have to change and adapt to different situations. This capstone has been a collective effort from four different law enforcement agencies across the state of Louisiana. Our combined efforts concentrate on the human factors associated with law enforcement officers, which often leads to mental instability and sometimes, even death. The importance of this research is to help develop proper tools and training to combat this ongoing problem in law enforcement and to ensure that officers live long, fulfilling lives past the retirement age. If an officer does not take into consideration the human factors, over time, this can lead to mental anguish or death.

We will first discuss the effects of shiftwork and how it can affect the officer both mentally and physically. Secondly, we will present the effects of the lack of physical fitness. The third concept will discuss substance abuse and addiction and how it correlates with law enforcement. In the fourth concept, we will show how the officer's home life is affected, which will eventually lead to divorce. Next, we will discuss the issue of officer suicide and how law enforcement officers are at a higher risk for suicide as opposed to the general public. Finally, we will discuss the roles of leadership and how law enforcement leaders need to do more within their respective agencies to help officers with their overall wellbeing.

We will conclude with a brief discussion of a possible program designed to help officers maintain their physical and mental health so they can become more productive and avoid the pitfalls of law enforcement.

Literature Review

Effects of Shiftwork

By its nature, law enforcement is a dynamic and demanding career path and due to the needs placed upon us by the community that we serve it requires us to be on duty, 24 hours a day, 7 days a week. Unfortunately, this need for shift rotation coverage places significant demands on the health and wellbeing of officers with disastrous effects, some of which do not become apparent until much later in the officer's career.

The primary schedule related factor that is detrimental to the health of officers is the disruption of the circadian rhythm. The regulation of the circadian rhythm in humans is in part controlled by exposure to light, which if the person is working an overnight shift, does not allow for adequate natural control of sleep cycles, leading to fatigue and cognitive performance reduction. This fatigue is cumulative as working an overnight shift results in a decrease in neurocognitive performance that worsens with each successive shift (Caruso, 2014). Continual work on overnight shifts can also lead to a reduction in quality of sleep even when the officer is not currently in a work cycle, with notable increases in insomnia and a decrease in the quality and duration of sleep (Costa, 2010). These negative results of overnight shift work can be partially reduced by either carefully rotating or shifting start times to allow for more normal sleeping patterns.

While the loss of sleep and dietary issues are concerning enough, the most insidious effect of working overnight can take years or even decades to develop. Multiple studies have shown that working overnight shifts for extended periods can result in a significantly higher risk of developing prostate cancer in men and breast cancer in women. For instance, a 2007 study by the World Health Organization announced that

circadian rhythm disruption itself is a possible carcinogen (Straif et al., 2017) and a 2005 analysis of 13 different studies indicates that the rate of breast cancer increased by 48% for overnight shift workers (Megdal, Kroenke, Laden, Pukkala, & Schernhammer, 2005). The aforementioned study even went so far as to recommend that women with previous or current breast cancer be advised not to work night shifts because of strong experimental evidence demonstrating accelerated tumor growth by suppression of melatonin secretion. Further health issues affecting female overnight shift workers is a noted increase in reproductive issues, including difficulty in conception and difficulty carrying the child to term (Harrington, 2001).

Shift work has detrimental social effects on workers as it can be difficult to participate in normal household activities when one spouse is absent or sleeping. With a rotating schedule, more than likely holidays and other important social events will be missed. Female employees are also disparately affected by social issues as women traditionally fulfill the primary homemaker role, there could be additional friction in domestic life when a female spouse has to work overnight shifts and the other spouse may have to take on more domestic responsibility (Costa, 2010).

Physical Fitness

In most agencies, when a person is hired for a position in law enforcement, they have to meet certain physical standards. They typically go through some type of physical fitness assessment during the pre-hire process to ascertain if they meet certain physical fitness standards set forth by a particular agency. The next time a law enforcement officer is exposed or required to engage in physical fitness is usually in the academy. However, after the academy, many agencies do not require nor offer any type of

incentives for an officer to continue pursuing their physical fitness and overall physical health. Remsberg (1980), stated, "Let's face an unfortunate truth; most officers are in terrible shape. The longer they've been away from the academy, the worse condition they're likely to be in. In most departments, physical training is strictly voluntary, and little is said about poor condition." (pp. 390). Law enforcement leaders tend to forget the human factors that can affect the overall performance of an officer. At times, an officer may think they are invulnerable and can lose sight of their vulnerability (Harrington, 2020).

A study done by the Federal Bureau of Investigations revealed that 80 percent of law enforcement officers are classified as overweight (Shell, 2005). Why is this? Despite the run and gun stigma on law enforcement, the work is mostly sedentary. Patrol officers working 12-hour shifts will sit in their unit most of that time. Investigators and administrators typically sit behind the desk for nearly the entire 8 hours they are at work.

A study was conducted in session #009 of the 43 students in the National Staff and Command College regarding issues concerning officer wellness, hereinafter referred to as "The Command College Survey." One aspect of that survey revealed that 33 percent of participants consider themselves overweight or obese. Psychological issues are often prompted by one's self-image. If that self-image, is they are overweight it can lead to a host of mental health issues. Having a negative self-image and the problems associated with it will affect an officer's happiness and satisfaction in life. This can have a tremendous effect on the officer's attitude while at work and when dealing with the public.

In addition to being overweight, lack of physical exercise can lead to a host of physical medical issues. It is well known that law enforcement officers are at a higher risk of potential injury due to their job duties. Officers who engage in some type of exercise routine are at a much lower risk of being susceptible to both musculoskeletal injury and cardiovascular problems. It is commonly known in the medical profession that sustained exercise and a healthy lifestyle can drastically decrease the chances of diabetes, high blood pressure, high cholesterol, and a host of other potential medical issues. In an article published by John Hopkins University, exercise, maintaining a normal weight, proper diet, and not smoking can reduce the overall change of death caused by a cardiovascular issue by 80% ("7 Heart Benefits," n.d.).

Substance Abuse and Addiction

Throughout a law enforcement officer's career, they face numerous pitfalls, some of which are job-related (i.e., calls for service) and some which are self-inflicted. A number of these issues stem from one another. Many officers begin their careers with the thought that they are going to "make a difference" or "change the world." Then reality sets in, and these once motivated and enthusiastic people become disingenuous and cynical. To help them cope with the disappointment many officers begin to 'self-medicate' by drinking alcoholic beverages to numb their pain and some turn to consuming drugs to return to a euphoric state. The effects on their lives are continuously changed when they start down this path; a journey that appears as an indoctrination into the police sub-culture. For our general purposes, we will now discuss addiction in the policing culture, ways to personally combat these problems, and roles supervisors play in ensuring officer wellness.

Most addictions start as abuse of a given substance. When examining any vice, one must understand there is a significant difference between abuse and addiction and how the previous leads to the latter. Abuse can be defined as the continued use of a substance despite recurrent social, interpersonal, and legal problems as a result of continued use. This also implies that either causes physical or mental damage (Law Enforcement Today, 2012). On the other hand, addiction is defined as a state of being enslaved to a habit or practice or something is psychologically or physically habit-forming to such an extent that its cessation causes severe trauma (Law Enforcement Today, 2012). According to Dr. Indra Cidambi (2018),

addiction within the law enforcement community across America is a widespread and serious problem. One out of every four police officers...has an alcohol or drug abuse issue [possibly due] to repeated exposure to high-stress, life-threatening situations coupled with long hours and an insular culture appear to turn police officers toward alcohol and drugs to relax and cope (para. 1-2).

In a term coined by the United States Army War College, police officers are in a constant state of VUCA (volatility, uncertainty, complexity, and ambiguity) (Mack, et al, 2015), therefore are more susceptible to the consequences of mental health issues and addiction problems.

Because most officers spend many hours together either at work or socially, usually in situations where alcoholic beverages are being consumed, rookie officers become involved as they may be looking for acceptance into the policing culture. These officers may not have been drinkers before this but are consumed by the notion that if they want to fit in, they must drink. The older officers may chastise the new officers for not consuming enough alcohol and/or consuming that alcohol quickly enough. This is

likened to becoming part of a college or campus fraternity. It is a hazing process that is not as widely spread. Eventually, the repeated socialization pays off and the new officers become part of the group. Additionally, they have developed an alcohol dependence habit. These officers begin to face not only issues at work but at home and with their health. They begin to leave behind their "non-cop" friends and develop an "us-versus-them" mentality which becomes cyclical, and the slope becomes steeper.

Family and Divorce

Several factors can lead to stress in law enforcement which ultimately affects the officer's home life. It is commonly known amongst law enforcement that the police officer starts his/her career with a particular outlook on life and a belief of how the world is. Most law enforcement officers will agree that officers start as an idealistic rookie then eventually become a cynical veteran. This transformation begins in the academy when the officer starts to bond with other officers. They begin to abandon old friendships and, as time passes, those friendships fade away completely. This leaves the officer with only friends in law enforcement which has now become part of the law enforcement subculture. As that officer grows in their career they begin to see the world in a different light. Officers get called to rapes, assaults, murders, suicides, car crash fatalities, and see far more disturbing and traumatizing images than the average citizen. When these officers arrive on the scene, the citizens lean on that officer for leadership and support amid the most chaotic event of their lives. Officers must learn to keep their emotions in check to get the job done (Gilmartin, 2002).

Suppressing these emotions over time can lead to mental health issues that follow that officer into the home, which can then lead to domestic issues and divorce. Research

indicates the rookie officer that began their career from a position of enthusiasm, motivation, and idealism has experienced changes. The idealism has become cynicism, optimistic and enthusiasm has become pessimism and the easy-going young recruit has become the angry, old, negative veteran officer (Gilmartin, 2002).

Several factors can lead the rookie officer to become an angry veteran. They can include but are not limited to traumatizing images, risky situations, organizational stress, and shift work. These factors cause hypervigilance and have an effect on the officer's mental health in the form of things such as depression, PTSD, anxiety, and self-medicating. These emotional changes eventually lead to physical changes in that officer's life in the form of obesity and health issues.

From the first day of the academy, through the entire career of police work, officers have learned to perceive the world as potentially hazardous to survive the streets (Gilmartin, 2002). During the hypervigilance state, the brain turns on the functions that are required for physical survival like increased peripheral vision, improve hearing, elevated heart rate, and a sense of energy to meet and overcome any threat challenging the body's survival. Officers operate in this state well above the normal range of risk for up to hours at a time. Unfortunately, every action has an equal and opposite reaction, so when that officer finishes their shift, they fall below the normal range of risk. They can become tired, detached, and isolated when returning from a shift and want to find that "magic chair" to sit in and not be bothered. That officer who was so energetic and full of energy has now become the 'couch potato'. This officer is experiencing a hypervigilance roller coaster. While on duty they are alert, alive, quick thinking, with a good sense of humor but off duty they are tired, isolated detached, apathetic, and angry (Gilmartin,

2002). These two extremes can exist every day in an officer's life and if gone unchecked it can seem as though the officer has two lives. This has a gradual effect on the marriage with fewer conversations, spending less time together, and can lead to depression, which is the leading cause of disability in the United States among people 15-44 years of age (National Network of Depression Centers, 2018). Depression not only influences the officer's health but also their family and job performance in the form of missed work and decreased productivity. The everyday stress of the job, organizational stress at the office, and pressure to be promoted can all lead to depression.

The hectic lifestyle of law enforcement with the night shift, day shift, and call-outs has its toll on the officer's family. Cynicism and hypervigilance can lead to negative emotions and too many negative emotions are not good for the relationship and/or marriage. When the department becomes the third-party in the marriage, intimacy starts to suffer. The officer feels like only other officers understand them and what they deal with. They begin to spend more time with coworkers. These officers have been through life and death situations together and created a bond of trust at the top of the "Hypervigilance Rollercoaster." These relationships are superficially initiated and based only on the time spent together at the top of the rollercoaster. When this happens, emotional bonds are created and that's when an officer can face numerous opportunities for infidelity. The officer spends more time with coworkers in this subculture and less time with their spouse and family. The spouses can begin to have feelings of jealousy and resentment. The lack of communication will also lead to the destruction of the marriage.

In National Command and Staff College Session #009, Team Lions consisted of officers from four agencies. A study of the command staffs of each agency was

conducted which resulted in an average of 60% (Lafourche at 60%, St. Charles at 62%, Tulane University at 80%, and Bossier at 40%) of the command staff had been divorced within their law enforcement career and/or remarried. In The Command College Study, the survey showed 42% of the class had been divorced during their law enforcement career.

Officer Suicide

In 2019, a record number of 228 officers took their own lives through suicide. As of July 14, 2020, the number of police officer suicides stands at 93 (Blue H.E.L.P., 2020). In The Command College Study, the survey found that 18% of the officers in the class had thoughts of committing suicide at some point during their law enforcement career.

Law enforcement officers working in the field will encounter tragic events that will have some degree of effects on their mental health. The United States of America has more than 800,000 sworn officers amongst their ranks. According to some studies, it is estimated that 19 to 34% of officers suffer from PTSD compared to 3.5% of the general public. Police officers suffer from cumulative PTSD. As opposed to the traditional definition of post-traumatic stress disorder, cumulative PTSD is caused by prolonged and repeated exposure to trauma and extreme stress rather than one particular incident, such as a shooting. The effects, however, are no less devastating for the officers affected (National Police Support Fund, 2019). The effects of PTSD, depression, substance abuse, etc. result from the officers' continuous living in the mind-set of volatility, uncertainty, complexity, and ambiguity (V.U.C.A.). As a result, of antifragility, a highly centralized, rigid, and fragile system can fracture when exposed to a

"black swan" situation in the realm of law enforcement (Taleb, 2020). According to Hillard (2019),

Police officers are at a higher risk of suicide than any other profession. Suicide is so prevalent in the profession that the number of police officers who died by suicide is more than triple that of officers who were fatally injured in the line of duty. Researchers are attributing these statistics to the unique combination of easy access to deadly weapons, intense stress, and human devastation that police are exposed to daily (para. 1).

As an officer begins to experience an increase in depression, they become more isolated and develop higher levels of helplessness and hopelessness, which radiates into their work and home environments. As this occurs, the officer enters into a dark place, feeling hopeless, unable to reverse the current situation, and begins contemplating suicide. This along with any mixture of alcohol abuse, drug abuse, mental illness, family issues, and physical pain can place the officer in a position that seems as though they are over the edge. Leaders must recognize the warning signs such as a change in behavior, attitude, and/or performance and act appropriately.

Roles of Leadership

As we have learned so far, the need for leadership to step up and combat deputy well-being is becoming more prevalent in the law enforcement career. So, as a leader, with many tools and practices at your disposal, what is your role?

A MAGNUS leader is a combination of many attributes that is the core of greatness. Within that core is authentic, adaptable, and credible leadership qualities that help in combatting officer wellness. Each of these types of leaders builds trust in the workplace and in essence creating a unified culture to be resilient in dealing with any mental or physical adversity that may arise. If you create a work area with a unified

culture it creates many positive variables to include an environment of trust (Therwagner, 2020). Trust helps build you as a credible leader that fosters being approachable for any stressors that may exist within the work area.

Another role of leadership when dealing with officer wellness is being authentic and adaptable to the situation at hand. Using effective communication and sincerity by listening first is key when talking with an individual. The most basic and powerful way to connect to another is just to listen (Anderson, 2020). Staying grounded and centered are key when being an active listener and using emotional intelligence to be authentic when listening to someone that may come to you with any issues. When addressing the issue, be brave, consistent, and always follow up. However, dealing with too many stressors yourself, you should never forget about your wellness. Dr. Sven Hansen (2019) states, "As we deal with more distress in the workplace, leaders need to step up to and take much better care of their own physical, emotional and cognitive resilience. Implementing a daily routine to support and sustain resilience is essential."

The roles of leadership identifying and acting on officer wellness do not stop there. Never get overconfident in addressing an issue with someone and utilize the resources that are available to assist you. The issue may need further guidance from professional services or programs offered within your agency.

Conclusion

To mitigate the issue of officer wellness, law enforcement leaders need to implement programs and training that will improve the physical and mental health of our officers. These programs must address current trends in law enforcement including the issue of shift work, physical fitness, and overall mental health.

A program our group designed to combat these issues was coined the L.O.W. Risk Program (Lions Officer Wellness Risk Program). This program addresses most issues law enforcement officers face. It promotes physical and mental health while also addressing issues that law enforcement leaders can change from an operational standpoint. The only way this program will be effective is if law enforcement leaders are credible and have a moral compass to guide them in their decisions affecting their personnel. Credible leaders are those perceived by followers posing enduring qualities of trust and expertise (Snyder, 2020).

The LOW-Risk Program combats the issue of shiftwork by suggesting law enforcement leaders design shifts to lessen stress and limit effects on health. This can be accomplished by limiting overnight work to the extent that the department can continue operations efficiently and to ensure that the night shifts that are required are rotated rapidly through employees to attempt to limit consecutive night shifts as much as possible (Costa, 2010). We can never fully remove the hazards of overnight shift work from law enforcement, but with careful planning and execution of staffing, the risks can be minimized for better overall health and wellness.

The LOW-Risk Program suggests agencies promote physical fitness by offering benefits such as paying for gym memberships, group exercise classes, and/or providing an exercise facility for officers. Agencies can also provide officers with an hour during a shift to exercise, thereby not taking away from their home life. Agencies can promote healthy eating habits by limiting the types of snacks and beverages in machines placed throughout the agency. Addressing the issue of physical fitness will result in a decrease in health insurance costs. A study quoted in an article published by the Harvard Business

Review showed that after analyzing 10 years of data, a wellness program resulted in an 86% decrease in hard healthcare costs (Purcell, 2016). This decrease can save the agency money that can be used to purchase equipment, training, and/or fund pay increases. This in turn will also contribute to an increase in morale, thus increasing an employee's overall workplace satisfaction.

To address the issues of mental health, law enforcement leaders need to emphasize the need for cognitive, or emotional intelligence. Emotional intelligence is the ability to identify, access, and control the emotions of oneself, or others and groups (Robinson, 2020). Just like most agencies require officers to qualify with their service weapon once a year, an agency can also require officers to speak with a mental health professional at least once per year no matter if they were involved in a critical incident or not. This will allow the officer to discuss any issue(s) they are potentially having so that a treatment plan can be formulated.

For officers to have buy-in to this program they must believe and have trust that the agency has their best interest in mind. The leaders implementing this program must be authentic and have interpersonal skills when dealing with their employees. The authentic leader is transparent, morally grounded, and responsive to people's needs and values (Normore, 2020). In all, leadership is key to promoting officer wellness and those leaders must have the R.I.G.H.T. Leadership. The R.I.G.H.T. Leadership is a theory based on valuing people through relationships, maintaining integrity in circumstances, showing genuineness to yourself and others, displaying humility, regardless of title or status, and remaining teachable to produce positive individual, collaborative, and organizational results (Rhodes, 2020). This is the type of leader that can effect change,

specifically by implementing officer wellness programs, which would not only benefit the officer and agency but the community that the officer serves.

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