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MENTAL HEALTH FOR FIRST RESPONDERS

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The National Police Association's free Law Enforcement education series is designed for home school, classroom, or independent learning. As part of our nonprofit educational mission, it prepares you for careers in public safety. This series is authored by <u>Chief Joel F.</u> <u>Shults, Ed.D</u>.

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Moral Injury and PTSD

Moral injury is a relatively newly recognized distress that can affect first responders and combat veterans. It is short of Post Traumatic Stress Disorder (PTSD) but can have long-term effects on emotional well-being. PTSD has entered the common vernacular so much that it is often self-diagnosed or labeled by others without a full understanding.

An important aspect of PTSD is that the condition is a distinctly biological process. This is why many prefer the term Psychological Traumatic Stress Injury, to emphasize the biochemical changes that result from the sensory processing of a traumatic event or cumulative trauma. When PTSD is considered to be a merely emotional reaction by someone who can't "handle" it, treatment and support are stymied. People don't choose PTSD nor suffer due to some character flaw. Trauma can create changes to the brain that just having a strong attitude does not repair.

A PTSD diagnosis is made based on standardized criteria after assessment by a qualified and licensed mental health practitioner. Not every trauma results in PTSD and lesser levels of impairment from anxiety disorders can be serious but not rise to the level of a PTSD diagnosis.

A recent poll of top concerns of police officers revealed that mental and physical wellness is in the top five, alongside surviving ambushes! Research indicates that a police officer will be exposed to an average of 178

critical incidents over a career (a conservative number), compared to the average person's experience of two to three such incidents in a lifetime. Law enforcement leaders and citizen supporters need to understand the range of services that our officers should have nonjudgmental access to manage a career filled with threatening experiences.

While some cynics might say if a person can't handle the job, then they shouldn't be doing it, smart leadership recognizes that better health, better job performance, and better retention of good officers make building and restoring resilience an economic necessity aside from the human decency of such efforts.

One of the mysteries of PTSD is that several officers can be at the same incident and not have the same negative effects. Each individual's background and experience determine how their brain processes the threat and stores it. While anywhere from 5-20% of police officers could qualify for a PTSD diagnosis, there are many more who don't consider themselves impaired by stressrelated conditions. There are also many, and perhaps most, who experience an uneasiness or distress that has been less easily defined.

Their distress may be what is being recognized as moral injury. This can occur when the moral guides of an individual come into conflict with the reality of what they experience and even in some of the actions and decisions they are called upon to make. Loosely defined, moral injury can occur when one's experiences conflict with expectations and ethics. Examples might be seeing an injustice done during the criminal justice process, exposure to innocent victims, having to make an unpleasant decision like arresting someone for whom there is great compassion, and especially being unable to achieve an outcome like reducing crime or failing in a rescue or resuscitation attempt. Being bothered by what one sees, what one had to do, or what one didn't do can be unsettling to one's identity.

The sense of helplessness, guilt, frustration, or failure can torment first responders and other helping professions where idealism and sense of purpose are high. Sometimes guilt or self-doubt can come when one seems to be unaffected by senseless tragedy and violence that should disturb an ordinary person. The idea that stuff just happens and you can only do what you can do is not sustainable protection against moral injury.

Especially in this era of hypercritical cynics, negative media narratives, and political cowardice, providing support and encouragement for our law enforcement officers has never been more critical to efficient policing and public safety.

Emotional Challenges for Humans that Happen to be Cops

Dealing with other humans is often stressful. That fact isn't unique to police officers. Anyone in retail, medicine, teaching or a host of other public contact jobs will have a story to tell. Police officers are almost always dealing with people who are not in their happiest moments. Nobody calls 911 to invite the precinct over for little Johnny's 12th birthday party, but they will invite the police when little Johnny didn't get the pony he wanted and is now on the roof shooting out windows with his BB gun.

Most police officers begin their careers with excitement about being able to help people in need. This idealism never dies, but it does take a beating. How do police officers survive emotionally under the constant barrage of other people's problems?

One way is to be aware of the God Syndrome. This is the feeling that one must solve everyone's problems and bear everyone's burdens. It is an ethos associated with all helping professions and many religious inclinations. It is also not possible and not healthy. Giving someone advice, resources, and allowing them to accept consequences for their own choices are things that helpers can do.

Police officers also have to be careful not to take things personally. Many police officers have used the "not in my town" lecture. Responsibility for a shift, geographic boundary, and maintaining peace rests on the officers' shoulders, but ownership does not. A driver racing through the streets can be personally offensive to a police officer who cares about the safety of the community, but it is not an insult to the individual officer. Accepting stewardship of the grave responsibility of enforcing the law is different than accepting ownership of the law. Staying objective is a stabilizing influence

A challenge for police officers is dealing with stress. It would not be wise for a police officer to eliminate stress. It is essential for survival. The alertness required to be aware of threats protects officers. Short of paranoia, an officer realizes that they are always a potential target and that things can go from calm to chaos in a matter of seconds. Complacency is not acceptable even in the most mundane activities. This creates a set of biochemicals in the body that keep an officer in a state of readiness, but that chemistry must be diffused to reactivate at the appropriate time. That means rest, recreation, quiet reflection, and healthy relationships. Preventing stress is different than being resilient in a stressful world.

Officers also have to be able to accept failure and loss. The public expects a perfect ending to every situation, and so do the officers making critical decisions. But sometimes things simply don't work out. Officers may be gifted with intuition born of experience, but they are not gifted with the ability to foretell the future. A decision made based on facts known at a given moment is a good decision, even if the outcome is not a good one. Accepting that sometimes the bad guy gets away, an innocent person gets arrested, or not taking action ends

up leaving a person in a dangerous situation. Compare it to the medical field where not every patient gets the right treatment or survives the surgery. One can only do the best one can do.

Officers must delay emotional responses. Empathy has its place, but citizens expect their police to be compassionate without being overcome by their feelings. First responders are the ones who stay calm and stoic. Extreme sadness must wait. Anger must be suppressed. Frustration must be muted. Too often, these feelings don't merely wait to be expressed in a safe place but are simply pushed aside to collect for another day. Even worse, the officer may forget how to have many feelings at all.

Law enforcement officers must be diligent and intentional in maintaining their emotional equilibrium. The public can help by showing their support and appreciation. Hearing "thank you for your service" may sound trite, but it is a little ray of sunshine in an officer's day.

I need help! pssst - don't tell anybody! The police officer's choice - secrets or the job.

After <u>my article on recognizing signs of distress in a</u> <u>colleague</u> I received several emails, two of which made an impact on me.

A Tale of Two Officers

One officer related how his supervisor and friend began to recognize signs of depression in his behavior, speech, and work. His colleagues called him on it and offered support. After engaging in some therapy this officer was able to recover and remains a productive detective on his department.

Another officer, by contrast, wrote to tell of his struggle with prescription drug dependence. After a surgery, the officer discovered that he had become dependent on the pain killers. Although there was no effect on his work performance, he recognized his need to address the problem and sought help. He was able to get into a rehabilitation program which successfully got him back to his pre-surgery mental and physical fitness. Other than his time off for treatment, there was never any performance concerns from his department regarding his work.

Based on medical records from his department's medical providers, the department filed charges on some technical violations of failing to disclose his

prescription use. The case may result in the loss of his career.

Don't Ask Don't Tell

The officer who recognized his problem and solved it is being punished for his honesty. The obvious irony is that by confronting a health problem that could have affected his career in the long term may have short circuited it in the short term. The worst outcome of such a case is not just for this officer, but for the profession as a whole. The lesson may be to keep your struggles to yourself and hope you can avoid disaster since you can't trust your employer's health providers with confidentiality.

The law enforcement and corrections professions cannot afford to encourage its members to keep their problems secret. Mental health issues such as depression and substance dependency rarely resolve on their own – especially in the pressure cooker of this kind of work. Agencies and legislatures must protect these professionals from job loss for seeking care where no permanent threat to public safety exists.

Stress and Survival

Stress and other health and fitness issues must be elevated to more than a short block of instruction in the police academy. Along with Constitutional Law, EVOC, arrest control, and firearms, holistic health should be the fifth pillar of knowledge for every law enforcement officer. Health stresses, whether originating in the brain or the rest of the body, always ultimately impact the health of a department and, by extension, the community it serves. Prevention and treatment are the keys to preserving an agency's most vital asset – the well trained officer. Punishing the sick and losing decades of potential service by failing to preserve an employee is wasteful and cruel.

Rookies and Administrators

One of the ways that these issues slip through the cracks is that mid-career officers are the most vulnerable, both in health risk and to the risk of losing a career. Rookies tend to be healthier (not yet worn out), and less self-aware of the subtle corrosive effects of job related stress. They frequently lack the far sightedness to maintain self-care, including reporting and attending to injuries on the job.

Administrators may tend to forget what patrol and shift work does to a human body. They may also be so focused on liability and short term costs that they find it easier to rid the department of a "problem" than to address it and preserve a valuable asset.

Dollars and Sense

For an agency that hopes to retain an employee for 20 years, the cost of extended leave compared to a new hire is simple math. It costs money to recruit, train, and equip a new officer, in addition to the liability,

supervision costs, and low productivity of two or three rookie years. It makes much more sense to make efforts to restore an existing officer to health and productivity.

Sadly, the common presumption about things we classify as mental health issues is that they are chronic and permanent. With professional attention and peer support the things we worry about the most – PTSD, drug dependence, and depression – are all treatable with success. Members who have addressed and resolved these kinds of health issues must not bear the label of "defective", but as valuable overcomers.

Everything is Not Code 4

Radio codes vary from agency to agency, but most I've been around use Code 4 as "everything is OK". That doesn't really mean that everything is ok, it just means that for the moment, as far as the officer on the scene can tell, nobody is trying to kill anybody. For the men and women behind the radio consoles, seldom is everything Code 4.

I was slow getting educated on the effects of constant trauma exposure in emergency services. Maybe I was cold-hearted, maybe I have a strong constitution, maybe I didn't expect anything but trauma and therefore wasn't surprised by anything. Years ago I was knocked unconscious on a traffic stop. After leaving that agency I ran into the dispatcher that was on the night my partner radioed in "officer down". In the course of reminiscing, she mentioned that night, describing it as one of the worst nights of her career. I am ashamed to say I had never considered the effect of that event on my dispatcher.

There are several reasons why dispatchers have unique stresses. One reason is that they do not have the balance of vision to perceive what's going on at the other end of the telephone or microphone. They must interpret the scene with only the cues of noise, silence, and the tone of overheard conversation. Over time, their skills at understanding what their officers are or will be facing by the variance heard in voices is nothing short of amazing. This is especially true when it comes to knowing officers that they work with regularly. Some officers' voices reach a high pitch under stress, others actually speak more slowly under stress. A dispatcher may know the officer needs assistance before the officer knows.

Another reason is the vicarious stress that dispatchers hear constantly. Whether their calm voice reveals it or not, pulse and blood pressure rises in sympathy with an officer in hot pursuit, calling for help, or describing injuries for arriving medical units. They are not emotionally disengaged no matter how hard they try. They are often monitoring several agencies over several radio channels in order to maintain awareness about the availability of responders and what scenes might spill over to others. Each urgent piece of radio traffic signals their brains to get ready for trouble.

A third reason that stress is unique to the dispatcher is that they have limited control over their calls. While anticipating needs at the scene and following requests by officers present, the ultimate outcome is out of the dispatchers' hands. Dispatchers recognize their critical and life-saving role but realize that they will be miles from the event and rely on information relayed to them. A feeling of helplessness can be present during an event, even with the knowledge that they are being very active in the situation.

A fourth reason the dispatcher's stress is unique derives from their superpower of multi-tasking. This writer was cross-trained as a dispatcher and can testify to the barrage of responsibility facing each shift. I never mastered the speed and automatic reactions that dispatchers develop because I only sat behind the radio rarely to fill in for absences. On one of my first nights, one of my fellow officers was in pursuit of a motorcycle that ended in the cyclist's crash. This required an EMS response, a supervisor, and running the operator and motorcycle through multiple computer databases. At the same time, I got a call of a fire under the jurisdiction of our rural volunteer fire department. This meant setting off pager tones and answering multiple radio inquiries from volunteers not particularly skilled in radio discipline. At the same time, a call came over the CB (we were monitoring Citizen Band radio during that era) reporting a burglary in progress that the CB operator was narrating play-by-play to me. Please, God, put me back on patrol!

Another stressor to be noted is the sedentary nature of the job. While other first responders can burn off their adrenaline by working a scene and being very physical, the stress experienced by the dispatcher has no outlet and no on-duty opportunity to regain normal blood chemistry. Working long shifts with limited break time (if they're lucky) is not conducive to a healthy diet either.

There are plenty of other risks to dispatchers in terms of their mental and physical health. They are often left out of services that are afforded to other emergency workers after a traumatic event. If a dispatcher works a call with a death involved, they feel the loss but are sometimes left out of the inner circle of care that the other men and women in uniform are provided even though they may have listened to a dying person's last breath. Dispatchers are truly the lifeline between a frantic caller and help that is on the way. They deserve all of the professional respect, compensation, training, and care that they can get.

Cops Under the Specter of PTSD

Among the tragic after-effects of the anti-police movement is an increase in PTSD in police officers. The number of Minnesota police officers applying for PTSD disability had tripled over the past fiscal year. Observers will cite changes in the state's laws as a cause, but there can be no denying that hostile working conditions are a major ingredient.

The typical understanding of post traumatic stress disorder, known as PTSD, is that it derives from a single overwhelming event. The diagnostic manual used by mental health professionals to diagnose PTSD requires some kind of exposure to trauma (an event that shakes one's sense of order, identity, or personal safety), intrusive symptoms such as nightmares and flashbacks, avoidance behavior, negative thinking or moods, and heightened arousal. This is a simplified description with many additional factors.

Traumatic events touch the lives of 50%-85% of Americans in their lifetime. Some will experience multiple traumatic events, whether being the victim of a violent crime, a car crash, or natural disaster. Ninety percent of police officers report trauma exposure and witness or are directly involved in multiple traumatic events over their career, and often within any given shift.

Among the effects of PTSD, including lesser stressinduced diagnoses, are impaired cognitive function, suicidal thoughts, and declining health. If these untreated and unmanaged symptoms are left to the officer alone, their ability to perform can become so impaired that they must leave their jobs.

It is important to fully understand that PTSD is not merely an emotional state. Words that describe emotion are usually part of how we discuss the issue, but the basis of this injury is a real as a visible injury. In simple terms, when the body experiences, through its senses, a life-threatening event, there are neurological and physiological changes that occur. In normal threats to our safety, we experience blood chemistry changes that are often expressed as the fight or flight response. The way our body operates under stress moves away from our normal state and prepares us for battle. The way we breathe, the way the body uses nutrition, and the way our blood circulates shift into high gear that is sustainable only for a little window of time for us to deal with the threat. It takes time for the body to re-set itself and return to normal.

Some threats are so intense that the danger-sensing part of the brain can't forget. It says to the body "I'll never let this happen to you again!" and keeps up the emergency mode that the brain and the rest of the body cannot sustain over time. It's like a car with a stuck accelerator. Of course, not everyone experiencing trauma, or even repeated trauma, will develop PTSD. Research is ongoing to determine why several persons can survive the same trauma and respond differently.

A partial answer to that is what kind of support an individual gets before, during, and after the trauma. Police leaders bear a responsibility to educate themselves and their officers on stress symptoms and strategies. With cumulative stress, the symptoms may appear slowly and escape notice until severe. Many police agencies have a debriefing protocol after highprofile events but many others do not. Most have the availability of employee assistance programs, but these are often not trusted by officers who fear a lack of confidentiality could subject them to mistrust by peers and potential loss of promotion and special assignments. Leaders must understand the barriers to mental health support which may include their own attitude. Positive affirmation of mental health care is important for ongoing support.

In Minnesota, particularly the Minneapolis area, the mixed messages from political leaders about the value of police officers, the constant barrage of criticism, and the growing resistance to routine police contacts are enemies of police officers' health and ability to continue to serve well long term. Personnel shortages, shift changes, and long overtime hours have created not only a gap in the safety of Minneapolis citizens but to the health and productivity of its police officers.

Respect and trust of our first responders are still high across the country but often overshadowed by the loud voices of critics. Support for police officers is not a mere sentiment, it is a necessary component of public safety and high performance of law enforcement officers.

Mindfulness for First Responders: Not a Magic Pill

Perhaps it is the ultimate irony that at a time when law enforcement officers are facing more stressors than ever before, the profession is finally recognizing that mental wellness is an essential component of managing a police force.

We can safely say that policing is more stressful today than ever, and it was always stressful. The types of calls that police officers deal with have not changed, so why more stress in today's environment? For one thing, the ambiguity of support or outright hostility from both the public and the judicial and political systems at large is palpable to officers on the street. One aspect of coping is having a supportive community. When that support and validation are absent, the toll of stress increases. A classic example is the difference between the soldier returning as a hero from WWII combat, and the soldier returning from Vietnam to hostility and derision.

Another factor is the increasing lack of recovery time. Because stress is a matter of body chemistry changes, it takes time for the body to return to a restful state. Shift work, mandatory overtime, and erratic schedules for court appearances and training can deprive officers of the time their bodies need to recover. As manpower shortages require more from each officer, time off is a precious commodity and vacations are seldom long enough. Increases in non-compliance along with restrictions on gaining lawful compliance create a dangerous conflict between the duties officers are mandated to do and the means available to perform those duties. Beyond being a danger to the officer with fewer tools and more conflicted decision-making, the mental strain and anticipation of conflict take a toll. Having every moment recorded, although now routine, can be unnerving and create even more stressful hypervigilance.

Along with other mental health resources (still too rare and underutilized), is the widely reported success of mindfulness – defined by the Oxford online dictionary as "a mental state achieved by focusing one's awareness on the present moment, while calmly acknowledging and accepting one's feelings, thoughts, and bodily sensations, used as a therapeutic technique." As with most developing concepts, definitions and implementtations vary. A recent National Institute of Justice analysis suggests that there are benefits to mindfulness practice related to reducing depression, anxiety, and burnout but no benefit for better rest and sleep.

Research on the technique isn't all rosy and some cautions are making their way to the surface in addition to all the praise heaped on mindfulness practice. It is possible that an agency interested in improving officers' wellness can implement the technique with the idea that it is the solution to officer stress. The box gets checked, the agency head can boast about the services to their officers, and they're off to the next issue. A comprehensive approach must acknowledge the potential downsides of mindfulness. According to psychologist Jason Linder, a mindfulness advocate, the practice is over-hyped, oversold, and misunderstood. Cases of meditative crisis resulting in the need for additional treatment or medical intervention are overlooked. Treatment guidelines are few and don't often reveal potential downsides. The National Institutes of Health states "Meditation could cause or worsen certain psychiatric problems".

Among the potential risks of mindfulness meditation are suicidality, depression, negative emotions, and flashbacks during meditation for individuals with trauma histories. Focusing on feelings at a given moment is designed to provide awareness and grounding, but if the feelings of the moment are chaotic and traumatic, mindfulness may not only fail to exorcise them but may magnify them. In a 2021 article in Psychology Today magazine entitled The Potential Dangers of Mindfulness, Linder, again an advocate of the practice, states "Every experienced mindfulness practitioner has had the experience of feeling worse after having practiced. Mindfulness tends to evoke or reinforce what is already going on in your mind and body. If you're worried about something that will happen in the future, or can't stop thinking about an event from the past, mindfulness may amplify your worrying, confusion, or suffering around this."

Mindfulness meditation remains a potentially valuable tool in the overall management of mental health for first responders. It should not be the sole solution or the only tool that police leadership puts in the stress management toolbox.

The Things That Haunt Heroes

It was a quiet morning as I sat at the breakfast table visiting with my brother who had stopped by on his travels. The small farming town was going through its routine when I heard a muffled whoomp not far from our house. Of course, nothing was far from our house, but this seemed too close. I jumped into the patrol car in the driveway – the car and I were the sum total of the police department – and immediately saw smoke as I turned the first corner. A storage shed across from the hardware store was already in flames.

I radioed county dispatch for our volunteer fire department to respond and heard the tones go out. As much as I love volunteer firefighters, the one thing they lack compared to full-time fire stations is response time. Forget the image of firefighters jumping into their boots and sliding down the pole to hope in their trucks. Our volunteer heroes had to get out of their fields and shops and drive to the station when they heard their pagers beep, getting their bunker gear on as they headed to the call. So, I was alone with the fire and the growing circle of looky-loos for a while. Not long after the fire department got there I was informed by dispatch that our bank had been robbed.

Our little town didn't have the wherewithal to merit a town square, but we did have a block of what comprised the Main street. The hardware store occupied one corner to the alley, then our branch of a county bank staked out the rest of the small block. On the other side of the street were a grocery store, a café, the post office, and a mostly abandoned grocery market that was kept open by the presence of a handful of old men around a pot-bellied stove.

While I was dutifully doing an amazing arson investigation at the fire scene, the president of the bank had been held up, handcuffed and marched across the street at gunpoint, kidnapped, and dropped off five miles from town. I was exactly where the robber wanted me to be – at the commotion of the explosion and fire.

I spoke to a renowned police psychologist who told me that officers most regret the things they didn't do, rather than things they did. Failures haunt us. That 35year-old unsolved bank robbery three blocks from my house still sometimes keeps me awake at night.

There was the first time I did CPR, breathing into the hollow lungs of a man who remained dead despite my best efforts. Nobody could blame me, I did everything I was supposed to. But it still counted against my conscience as a failure.

A snowy crash with a child in the back seat watching his severely injured mother being extricated from the car, shouting her pain as she was placed on the stretcher. I scooped him up to comfort and warm him. Only later did I find out that he had a fractured pelvis and I should have immobilized him instead of carrying him away. It didn't contribute to his injury, but I had let my compassion interfere with my training. It counted against my conscience as a failure. I was lucky enough to spot the car described by a witness as the vehicle involved in a drive-by shooting. I searched and searched that car and did not find a weapon. I learned later from an informant that the gun used in the shooting was pushed up under the dashboard. I'd looked there, but not thoroughly enough. Things happen, no one's perfect. But still, a failure to get important evidence that was inches away.

There was the burglar alarm that seemed to go off every time it rained or the wind blew. I sauntered in with my partner to take a cursory look around. In my mind, I was handling a false alarm, not a burglary. It wasn't until I almost literally stumbled across the burglar hunkered down in the sporting good section trying to unchain and load a shotgun that I realized it was no false alarm. No excuse for that one. Happy ending, but lousy work. A failure.

I can console myself with killers I've arrested, the burning buildings I ran into, the drunk drivers I took off of the highways, the times I ran toward the sound of gunfire, and all of the daily drama that cops endure that makes their jobs fulfilling. But none of those things keep me awake. It is the things I failed at that intrude.

Rational Fear in Policing Saves Lives

As a regular writer on police matters, I am in the crosshairs of many critics. Reactions to any pro-police piece on social media range from personal threats to insults to proud displays of the critic's ignorance. One such comment claimed, "to shoot somebody all an officer has to do is say they were scared". Versions of that claim are repeated, often along with the lament over what the critic thinks a "warrior mindset" is that creates aggression and paranoia among police officers.

Being afraid is never a justification for force or aggression. A fear that is rational, defensible, and articulable is a lawful and valid reason for the caution shown by officers.

My first "man with a gun" call sent a cold chill through my body. I was with my training officer. I don't even remember what came of the call, I just remember how it affected me physically. I looked over at my trainer who hadn't let me even drive the patrol car yet. He was as cool as a cucumber as he hit the lights and siren.

Of all the things I had to learn during my training as a rookie, dealing with fear was probably the most important thing. I had to learn the difference between courage and fearlessness. Good judgment does not come with fearlessness. I once had a college intern riding with me. On the first night of his ride-along, we responded to a burglary alarm at a small manufacturing facility. As I positioned my patrol car strategically to observe the south and west sides of a fenced enclosure around the facility to wait for a second unit to cover the other sides of the building, my intern spontaneously jumped out of the passenger seat, ran across the parking lot, and jumped over the fence, presumably to catch a burglar. Was he fearless? Yes. Was he stupid? Yes.

Courage only exists in the face of fear otherwise it is merely fearlessness which is cluelessness at its best and suicidal at its worst. What then is the role of fear in policing and when does it operate? The simple answer to the question of when is: always.

Although we think of fear as an emotion, it is a complex change in body chemistry triggered by the brain's perception of a threat. That perception is based on experiences in life gleaned from living and learning. Those experiences are so embedded in the memory that all kinds of cues to that memory can trigger the body's fear response. An amazing array of body chemistry alterations happen in response to a perceived threat.

The threat doesn't have to be an exact replication of a previous dangerous experience. A parental lecture about the hazards of driving in the rain can create a lifelong fear response in a driver on a rainy day. Even a precursor to rain such as a darkened sky, gust of wind, or a change in air pressure can cause the brain to alert the body to the threat of wet pavement. The response could be extra caution, slower speeds, a heightened awareness of other traffic, or even a decision not to drive at all. That is the value of fear.

A police officer's training and experience will result in multiple fear alerts resulting in a constant high level of

threat awareness. They know that officers have been assaulted by all kinds of people in all kinds of situations. Officers have been attacked and killed stopping to help a stranded motorist, checking on someone's well-being, and on the most minor of calls from jay-walking to shoplifting. Critics have no understanding of the variety of situations that pose a threat to law enforcement officers. Officers know that they will be assaulted at some point and want to avoid the delay that surprise creates in taking defensive action. Imagine that you have been given the job of cleaning out several hundred old gym lockers. In the process, you come across one occupied by a rattlesnake! Now imagine the same assignment with the information that one of those lockers has a rattlesnake in it.

To an onlooker, the locker cleaner might look foolish as they approach each metal door slowly and carefully, wondering if this is the one with the snake. But to the person checking each of those units, that caution is quite sensible and might save their life! Likewise, an observer might question why an officer approaches with a hand on their weapon, or stays behind cover making verbal commands, or chooses to gather a few facts before rushing into a building. It is a prudent response to training and experience that protects the officer, the public, and even a suspect.

This is the courage that police officers must have. Not fearlessly charging into a situation, but courageously facing dangers known and unknown every day.

Celebrating Alive Day

When I first served as a chaplain for a wounded officer and spouse retreat at a Montana ranch, I heard a term for the first time. Officers were talking about their "alive day". It was the day they could have died but somehow survived, borrowed from military combat survivors.

For some, it was getting shot, for others a crash. It could be an assault in the cell block or a bar fight. It could be getting slashed with a knife, or intentionally hit by a car. The day may be a sad memory if a colleague did not survive the same event, or if the day of survival was also the end of a career and life as it once was.

Some families celebrate the day, others make note of it, and some avoid thinking about it. KH, the spouse of a wounded officer still fighting for benefits after years of paperwork, says "The first year we had a party. But after that, he didn't want to recognize it anymore. So from that point going forward we planned something fun like a trip or something to overlap that day."

BD, the survivor of an intense and close gun battle relates that "Usually, my friends and family recognize as if it were a birthday. No party just recognition texts or calls. Most of the time my wife would plan a trip to get away for both of us. I survived so if it reminds me of surviving one of the worst and tragic days of my life cool!! I survived! Better than posthumously."

TS, an injured officer says "I know I'm fortunate to be doing much better than the Drs ever thought I would

but this day is always so difficult. I don't sleep well for a few nights surrounding this date (ok, I never really sleep well but it's worse than usual). On this day I tend to think more about what I've lost and how much things have changed." She asked a support group if the anniversaries get any easier. GB, who retired with PTSD after a shooting answered "Yes they do. I just had my twenty-first and I hardly even thought about it. Be patient with yourself, you'll get there." RM answered "Coming up on 3 yr anniversary of my husband's shooting in Feb. Any day can affect us both, out of the blue. Just when you think you have a handle on it- BAM."

AG, stabbed and slashed on a domestic violence call makes his Alive Day a time of giving thanks "3 years ago our lives were changed forever. I became a Wounded Warrior on the street. God saw fit to save me and I am here today to serve and worship Him." SF, whose husband was shot in the back. leaving him confined to a wheelchair, expressed a similar sentiment "Rather than be sad about the day that he got shot, we think it's important to celebrate his life. God saved him. And that's a reason to celebrate." Many severely wounded officers fight back to recover and rejoin their agency as active officers while many simply cannot. They not only have an anniversary date on the calendar, or etched in their memory, they have the nightmares, the crippling disability, the chronic pain, and the medical bills to remind them.

A significant percentage of police officers have been in positions where their lives were at high risk, but don't count those escapes as an Alive Day. In a weird way merely getting knocked unconscious, shot at but missed, threatened by a person with a knife or gun who didn't follow through, or struck by a vehicle with just a broken bone can be passed off as just another day at the office. No purple heart, no news coverage, just a pull up your bootstraps and dust yourself off and carry on kind of thing. Contemplating all the times you really could have been left dead or permanently injured is a good officer safety review, but not a sustainable line of thinking, or else no one would get out of bed to put that badge back on. With special respect to those who struggle with life-long pain, PTSD, and disability, for the rest of the officers, every day they get to go home and take off their own shoes is another Alive Day.

Policing Toward Healthy Relationships

Every patrol officer has spent time dealing with victims of abuse who are entangled in love/hate relationships. Officers walk away from their sidewalk counseling or arrest and wonder why people stay together under those circumstances. Here are 12 common characteristics of abusive relationships:

Being told that you never do anything right

Being insulted, demeaned, and shamed in front of other people

Being prevented from making your own decisions

Intimidation through threatening looks, or while near or holding weapons

Destroying your belongings

Insulting or threatening your extended family

Forces unwanted physical contact

Controlling your use of money and resources

Lies to you often enough that you can't trust them

You want to leave the relationship but feel that you can't

Makes you feel you deserve to be treated poorly

Constantly does surveillance on you because they think you're cheating.

Police officers should find this familiar, not because they may be involved in a bad domestic relationship, but because their relationship with the public bears a disturbing similarity to patterns of abuse.

Obviously, the overwhelming majority of citizens are respectful and thankful for their police officers. The kind of abuse that police officers are exposed to is from interactions with those who are not happy with an officer's actions or even their very existence. The antipolice segment of the population treats the profession and individual officers just like an abuser in a domestic relationship. Cops never do anything right. They must be controlled. They must be surveilled constantly because they can't be trusted. They deserve to be called names and threatened in public and take no action against the slanderer. The officers' families and homes are threatened.

Politicians control their resources, create punitive laws, and restrict the decisions that officers must make in unique and fast-moving situations. Prosecutors look the other way when uniforms are torn, officers are assaulted, and police cars are torched and vandalized.

Just like abused spouses, police officers often feel they cannot leave the relationship. Just like some stay for the sake of keeping a family together or keeping up appearances, officers want to make things right and keep things afloat no matter what. Some partners stay in abusive relationships for finances, just as some police officers stay hoping to retire with some financial security if they survive. Just as some abused spouses hope for change and stay in a marriage because they believe in the institution, police officers have the same hope and same regard for law and order.

What could change so that officers would not feel that they are walking into another day of abuse every time they begin their shift? What would help reduce their anxiety and expectation of being harshly criticized no matter what they do? That they are not free to make their own professional judgments? That they are deprived of the resources they need to operate most effectively?

A list of characteristics of healthy relationships might be a good guide. Healthy relationships bring out the best in each other. They allow individuals to be themselves while encouraging mutual growth. Healthy partners are open to change and self-examination. They feel free to be honest about what they need without being angry, resentful, and threatening. They accept long-term commitment to work through conflict. They celebrate the network of other persons and organizations that support their partner without jealousy.

Most importantly, as marriage therapists will testify, a partner must be willing to accept the observations of others and be willing to change where change is needed. Also critical is finding support from others that is not full of criticism but realistic cheerleading and encouragement for the best for everyone. Organizations like the National Police Association provides a venue and information for those who genuinely want the best in the relationship between the police and the public they serve. Those who are habitually and harshly critical may never change, but our police officers can withstand their hostility with the support of those who care.

(Although this article was not about actual domestic abuse, if you are in an abusive relationship, please call 1-800-799-SAFE for help).

About The Author



This series is authored by <u>Chief Joel F. Shults, Ed.D</u>. Joel is a retired police chief. He is an award-winning writer, college professor, trainer, and first responder chaplain.