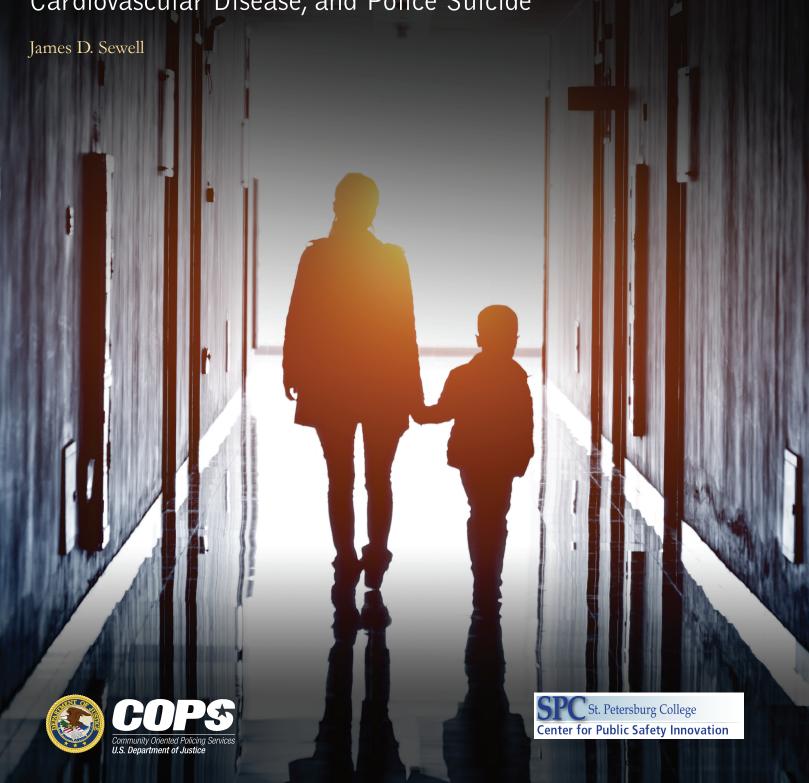
# Guide for Developing an Effective Stress Management Policy for Law Enforcement

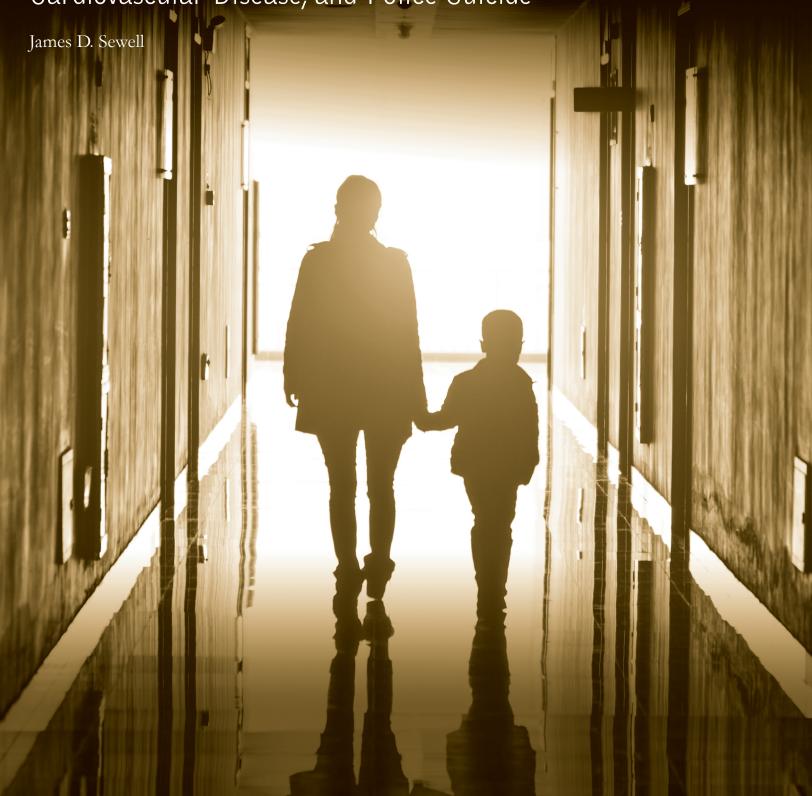
Psychological Support, Training of Agency Personnel, Cardiovascular Disease, and Police Suicide





## Guide for Developing an Effective Stress Management Policy for Law Enforcement

Psychological Support, Training of Agency Personnel, Cardiovascular Disease, and Police Suicide



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#### Introduction

It is widely recognized that emotional and psychological stress takes its toll on law enforcement personnel, both sworn and civilian, in the United States. (Spence et al. 2019) Such stress can come from a variety of sources, including responsibilities inherent to the job (e.g., danger, job risk, and exposure to disturbing scenes) and administrative or operational issues (e.g., shift work, inadequate supervision or management, poor equipment, and excessive paperwork). Yet it is those inherent factors that have the highest potential for causing

temporary or lasting trauma—trauma that may manifest itself as more incident-based post-

traumatic stress or, perhaps more significant in light of the number of personnel making law enforcement a career, the build-up of years of trauma best characterized as cumulative career traumatic stress.

Since 2001, the Florida Regional Community Policing Institute at St. Petersburg College has been actively involved in providing educational seminars, training sessions, and electronic material on issues relating to the emotional survival of U.S. law enforcement officers. With a special emphasis on preparing peer support personnel, acclimating returning veterans, and training personnel in suicide prevention and intervention, faculty in these programs have had a broad exposure to sworn and civilian personnel and the opportunity to hear their comments, concerns, and suggestions about policy needs and gaps in this important area. This guide reflects those lessons learned in that time and, in particular, suggestions to fill gaps in current agency policies.

This guide itself is divided into four primary components that should be incorporated in an effective stress management policy in a law enforcement agency:

- 1. Psychological support, recommending the psychological support resources appropriate for a comprehensive stress management program
- 2. Training of agency personnel, offering a career-based approach to stress management training and suggesting training elements
- 3. Cardiovascular disease, recognizing the impact of physical illness on officers and suggesting a presumption of the relationship between an officer's heart attack and their job

4. Police suicide, prompting discussions about suicide within the agency and recommending funeral and support protocols for officers who die by suicide, their families, and other officers

Each of these sections is accompanied by a commentary to support the basic information contained in the guide and to encourage discussion and communication within a law enforcement agency. The guide is designed to supplement existing policies, procedures, and protocols used in many agencies today.

## **Guide on Stress Management**

Occupational stress has severe detrimental effects on the health and well-being of law enforcement personnel and their families. This guide will provide an outline of an agency's effective response to the issue of psychological and emotional stress in the law enforcement profession, including recognition of the particular impact of major medical conditions such as cardiovascular disease, hypertension, and diabetes, as well as job-related suicide.

Setting a baseline for agency action, an agency's formal policy statement should clearly outline the focus of the policy and succeeding implementing procedures. For instance:

It is the policy of this agency to engage in practices that support the health and well-being of personnel; provide education and training in awareness, management, and mitigation of stress and its effects; identify times of individual and collective crises; and provide appropriate response to stress-related issues. As part of its comprehensive program of stress management, the agency is committed to hiring only those personnel who—by an assessment of their background, attitude, and emotional and psychological condition—are suited to a career in law enforcement.

## Policy component 1. Psychological support

#### Key policy elements

- Recognizing the need for psychological and emotional support of agency personnel by the nature of their employment, an agency should include the following elements in its comprehensive stress management program:
  - Critical incident stress management (CISM)
  - Response to line-of-duty death and serious injury
  - Peer support program
  - Employee Assistance Program (EAP)
  - Organized chaplain program

- Professional psychological services
- These psychological support elements may be offered either directly by on-staff
  or contractual personnel or in conjunction with the efforts of another agency.
- 2. The agency should make every effort to ensure that psychological support is available to spouses and families of its personnel during critical incidents.
- 3. In addition, the agency could encourage its members to take advantage of a voluntary wellness check-in as well as to meet annually with a peer support member, chaplain, or staff psychologist to discuss any emotional issues.
- 4. Additional procedures and protocols for access to and use of psychological elements of the agency's stress management program should be detailed in appropriate general orders of the agency.
- 5. The agency should ensure that appropriate protocols are in place to protect the confidentiality of personnel accessing and receiving such psychological services, including peer support. The agency should further ensure that such protocols are adequately disseminated to and enforced among its personnel.

#### Policy commentary

Psychological support of law enforcement personnel, both sworn and civilian, is a critical element in any comprehensive stress management program. Meeting the needs of individual employees requires a variety of services. Every law enforcement agency should have CISM capabilities and be able to deal with the impact of incidents such as line-of-duty deaths, mass casualties, horrendous violent crime scenes, and other critical incidents. Such CISM capabilities can be supported by the use of peer support personnel, i.e., sworn and civilian employees trained in the ability to listen to their colleagues during times of personal and collective crises, assess the issues, and refer for appropriate assistance. An organized chaplain program offers the assistance of clergy to those many members of the law enforcement profession who seek spiritual assistance. Finally, in situations involving severe psychological or emotional distress, the use of professionals in the field of psychology—whether psychiatrists, psychologists, or other degreed or licensed mental health professionals—offers a depth of treatment during the most difficult times law enforcement personnel face.

Depending on the size of the law enforcement agency, many of these services, especially peer support personnel, may be provided in-house by agency personnel. In others, such assistance, especially an employee assistance program or professional

psychological services, may be obtained by contract. Still other agencies may find it useful to combine with other agencies to generate sufficient resources to provide such support to their personnel.

Especially during times of crisis and critical incidents, such as when the officer-spouse is involved in a shooting or is injured in the line of duty, the need for psychological or emotional support is felt not just by law enforcement personnel but also by their spouses and families. The provision of such services would allow an important component of officers' lives to receive needed assistance.

The use of a wellness check-in has been successfully implemented in a number of agencies as a means to encourage agency personnel to treat their mental health as they do their physical health: kept under control by their own affirmative actions and subject to periodic confirmation by a competent practitioner.

Because seeking psychological or emotional help is considered by many officers to be a potentially stigmatizing event, particularly if their colleagues became aware, confidentiality is a critical issue. There is an inherent fear in law enforcement about seeking emotional or psychological assistance. Officers frequently believe, with some element of truth, that their action will be perceived as a sign of weakness and that their colleagues will lose faith and trust in someone who "can't handle the stress of the job." They are afraid that, if word leaks out, they will be denied promotion and other career opportunities because of this perceived weakness.

While communication with professionals in psychology and members of the clergy may be privileged, conversations with paraprofessional peer support personnel may not. In a number of states, state law grants such protection to those who provide peer support to first responders. Where such legal protection is not automatic, chief executives need to ensure that confidentiality of communication is inviolate and consistently enforced throughout the chain of command, subject to certain limitations (e.g., an officer whose communication indicates a threat to him or herself or to others; who admits to a criminal felony; or who admits to other enumerated crimes, such as child or elder abuse, which are not considered protected in other fields).

While this guide is focused on identifying the elements in a comprehensive agency policy and program of stress management, it may be complemented by other policies or general orders that address specific and detailed procedures and protocols for such issues as line-of-duty deaths, CISM, peer support, and fitness-for-duty reviews.

## Policy component 2. Training of agency personnel

#### Key policy elements

- The Training Unit should ensure an active and ongoing training program of stress awareness, management, and mitigation for sworn and nonsworn personnel. Such training should include formal classes and in-service and roll-call training.
- 2. Such formal and informal training should be developed to ensure access to stress management practices throughout an officer's career and should include:
  - Academy inoculation
  - Orientation of nonsworn personnel, especially dispatchers and other civilian personnel who may be exposed to disturbing situations
  - Ongoing stress throughout an officer's career
  - Stress inherent to unique assignments
  - Stress related to supervisory, management, and administrative positions and responsibilities
  - Pre- and post-retirement stress
- 3. It is important that the Training Unit include in its comprehensive program of training such topics as the following:
  - Access to and use of psychological services
  - Cumulative career traumatic stress
  - Departmental intervention protocols
  - Diet and nutrition
  - Identification of at-risk personnel
  - Impact of the job on an officer's family
  - Officer wellness
  - Other mechanisms of self-care

- Physical and psychological manifestations of stress
- Physical fitness and health
- Post-traumatic stress
- Recognition of early warning signs of suicide
- Recognition of warning signs of trauma-related and chronic stress
- Suicide prevention and intervention
- 4. It is recommended that the Training Unit develop and present ongoing training for law enforcement spouses, significant others, and families. Such training should include recognition of warnings signs of trauma-related and chronic stress and methods of seeking assistance from agency resources.
- 5. The Training Unit should regularly promulgate supplemental educational material related to stress management, suicide prevention, and psychological resources and should use the agency's internal social media outlets as appropriate.

#### Policy commentary

In dealing with law enforcement stress, the need for an effective program of training cannot be overstated. Such training can occur in the formal classroom setting, during in-service sessions or unit roll-calls, or through agency electronic training mechanisms. This training should be supplemented through the use of the agency's internal social media outlets and through the promulgation of electronic and published information.

Inoculation should begin in the recruit academy for sworn personnel and in agency orientation sessions for civilian personnel, recognizing that both will be exposed to disturbing scenes and material during the course of their career with an agency. Such training must follow an officer throughout his or her career, knowing that the impact of stressful events varies with age, time on the job, and type of assignment. Training for supervisory and management personnel must focus not only on the stress they experience but also on identifying and effectively responding to the stress of the personnel under their command. Pre-retirement training should focus on the emotional differences between active and retired status and should prepare retiring officers for the fiscal changes they will undergo; post-retirement retreats allow for continued camaraderie with officers and a forum for exchange of information with other retirees.

It is crucial that any effective training program dealing with police stress and its negative implications involve and include spouses, significant others, and other family members. Many spouses initially became involved with a civilian, who then joined the force. Often left out of the police subculture, the spouse must now understand what the cop-spouse's new role entails. With misunderstanding and a frequent lack of communication, the stress an officer must deal with now includes two fronts: (1) the job and (2) home. It is necessary that an agency work to reduce the stress on both fronts to give the spouse, significant other, and family the tools they need to make an officer successful; to identify warning signs of stress in their officer; and to know where and how to obtain help.

Research indicates that up to 80 percent of all individuals who attempt suicide give some indication of their intentions. This figure affirms the need to ensure that personnel are trained on warning signs that would be displayed by an officer in crisis. It has been the experience of the author, a career law enforcement officer and administrator, that three individuals are often the first line of defense to protect an officer in crisis:

- (1) his or her spouse or significant other, (2) his or her law enforcement partner, and
- (3) his or her first-line supervisor. The core of any effective training curriculum should focus on giving these individuals the tools to be successful in protecting their officers.

In implementing the recommendations of this guide through effective training and emotional support, it is imperative that an agency's and practice combine to reflect the notion that, in the macho culture of policing, it is acceptable for officers experiencing emotional issues to seek help. Practice throughout the agency must recognize that seeking assistance during times of crisis is and should be viewed as a sign of strength rather than a sign of weakness, as has historically been the case.

## Policy component 3. Cardiovascular disease

#### Key policy elements

1. Cardiovascular disease, along with suicide, remains a leading killer of law enforcement officers (Hartley et al. 2011; Violanti et al. 2013), and the efforts of any agency should concentrate on support of the elements of a healthy lifestyle that reduces the likelihood of such disease. Each agency should include a wellness program and other efforts to encourage the health and fitness of our sworn and civilian personnel.

- 2. The agency must recognize that stress experienced by police officers is chronic and cumulative and that its manifestations build up over an officer's years of service. It should be the position of an agency that, unless refuted by other medical evidence, the disability or death of an officer due to heart disease or hypertension is presumed to be caused by his or her employment as a law enforcement officer.
- 3. Protocols used during the funeral for any other line-of-duty deaths should be available following the death of an officer to heart disease.

#### Policy commentary

Research has long indicated the relationship between psychological or emotional stress and the onset of certain diseases such as cardiovascular disease, hypertension, late onset diabetes, shingles, ulcers and other digestive disturbances, and even colds and influenza (Komaroff 2013, 61–64). Of these, heart disease and hypertension pose some of the greatest danger, and many researchers attribute more deaths of law enforcement officers annually to cardiovascular disease than to deaths at the hands of criminals. As Quire and Blount (1990) noted in their early study of the impact of cardiovascular disease on police officers, "the most deadly enemy stalking police officers may be one that is unseen and silent: coronary heart disease . . . the leading cause of death or retirement among police officers."

To that end, it is of vital importance that an agency face the potential dangers to the physical health of its employees by implementing an agency-wide wellness program, encouraging sworn and civilian personnel to engage in organized and individual efforts that mitigate the onset of physical illnesses.

Regardless of an officer's pre-employment physical, employment as an LEO exacerbates physical health issues. In a number of states, such as Florida (Fla. Stat. § 112.18 (2019)), as well as in federal law (34 U.S.C. §§ 10281–10308), current law recognizes the relationship between the law enforcement "job" and the onset of cardiovascular disease and hypertension. In several of these states, such recognition has resulted in the legal presumption that, absent other medical evidence, heart disease and hypertension that materialize in the death or disability of the officer are caused by such employment. The recognition of the ultimate impact of cardiovascular disease and hypertension as work-related diseases also necessitates its recognition as the basis for line of duty death protocol and benefits.

## Policy component 4. Police suicide

#### Key policy elements

- 1. The individual law enforcement agency should recognize that the suicide of a law enforcement officer or other member of this agency is the most serious manifestation of the impact of job-related stress inherent to the profession. To this end, and recognizing the deeply held beliefs of many members of law enforcement agencies concerning suicide—especially of a law enforcement officer—an agency should ensure adequate discussion about the issues relating to police suicide and training on suicide prevention for all agency personnel, beginning at the recruit academy level.
- 2. After discussions among its personnel, an agency should articulate in policy circumstances under which the suicide of an officer may be considered service-related and appropriate for line-of-duty funeral protocols.
- 3. The agency's Training Unit should develop a program of suicide prevention that includes the following:
  - · Discussion of the causes of suicide among law enforcement officers
  - · Recognition of signs warning of suicidal intentions
  - Recognition of the impact of post-traumatic and chronic career stress on the potential for suicide
  - Strategies and protocols for intervention with officers in crisis, including self-awareness
- 4. In the event of the suicide of an officer or civilian employee, the agency should make every effort to ensure that notification of next of kin and other close family members is done by personal contact and, when possible, before public release of information.
- 5. The funeral protocols regarding an officer who has died by service-related suicide as determined by the agency should comply with and complement the protocols for other line-of-duty deaths as enumerated in appropriate agency policies, including the following:
  - Allowance for attendance of on-duty personnel in uniform
  - Appropriate posthumous recognition of the individual officer

- Assignment of departmental services coordinator
- Assistance to the family in funeral arrangements
- Dealing with and responding to media inquiries
- Designation of a departmental benefits coordinator
- Designation of a departmental liaison to work with the family
- Funeral with law enforcement honors, including vehicle procession and honor guard
- Notification and debriefing of agency personnel
- 6. Following the death of an officer or a nonsworn agency member by suicide, the agency should involve the family in planning for the officer's funeral. In addition, the agency should ensure proper psychological follow-up to and ongoing emotional support of the family, especially in circumstances involving surviving children, as well as all members of the agency and their families.

#### Policy commentary

The suicide of a law enforcement officer or other member of this agency is the most serious and, sadly, frequent manifestation of the impact of job-related stress inherent to our profession. At the same time, suicide is the most emotionally charged and divisive issue in virtually any law enforcement agency.

It is not uncommon for there to be a major split within a police agency when a suicide occurs. For every officer who dies by suicide, a significant number of surviving law enforcement personnel will grieve for their actions and call for the officer to be remembered for who they were and for their service to the community. At the same time, another significant number will bring their personal standards to bear and call that dead officer a coward and accuse him or her of weakness and taking the "easy way out."

For that reason, it is critical that the leadership of an agency have extensive discussions with the agency's personnel *before* an event ever occurs. Such discussions should occur after training is provided for agency personnel on police suicide and its issues as well as implementation of the proper steps that should be taken to identify and prevent suicide by law enforcement officers and support personnel.

Such discussions may result in the partial implementation of the recommendations identified in this guide. An agency, for instance, may decide that it is appropriate to provide a liaison to the family, to allow personnel to attend the funeral in uniform and on duty, and to designate a benefits coordinator, while at the same time electing not to provide a formal vehicular procession and only limited graveside honors. Again, the timing of such discussions and decisions is vital to the success of such a guide and for the well-being of the agency.

These intradepartment discussions may allow for the development of a commonly accepted working definition of service-related suicide within the agency, such as this:

Absent clear and convincing evidence to the contrary (e.g., filing criminal charges; active criminal investigation, an investigation sustaining domestic violence; or internal investigative affairs involving moral turpitude), a suicide by an active-duty law enforcement officer of the agency shall be considered to be to be service-related.

This or any similar definition, especially, should be discussed with personnel within an agency to ascertain the degree of acceptance and agreement with its language and whether the definition is broad enough to meet situations with which they are familiar.

To afford police honors to an officer who dies by suicide is a controversial suggestion. Yet for many officers, the physiological and psychological impact of untreated depression, a leading cause of suicide, is overwhelming (SPC 2015, 36), and suicide appears to them to be the only viable option. Rendering of law enforcement honors to officers with an otherwise unblemished record is simply recognition of the way they lived, not the way they chose to die.

There are a number of elements of a line-of-duty death protocol that remain applicable whether or not full police honors are offered. The agency's support of the officer's family, interaction with the media, and authorized attendance at the funeral can be assumed to parallel what an agency does for line-of-duty deaths. Similarly, the guide recognizes the need for post-suicide support of survivors of law enforcement officer suicide, i.e., both the family of the officer and his or her police family, the officers and support personnel left behind. The trauma, grief, and guilt following such an event takes a tremendous toll and must be directly addressed in every situation.

## **Conclusion**

In conclusion, then, as we acknowledge the impact of job-related stress on sworn and civilian law enforcement personnel, it is critically important that we also recognize methods by which such stress can be reduced or mitigated. To that end, the development of a policy or written directive covering key elements of stress management and defining methods by which assistance may be both offered and accessed is vital to the protection of an agency's personnel. Such an established policy—perhaps fashioned after this model guide of key points and commentary—offers a step forward in ensuring the mental, physical, and emotional health of our men and women in law enforcement.

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### **About the Author**

James D. Sewell was appointed Assistant Commissioner of the Florida Department of Law Enforcement (FLDE) on May 23, 2003, and retired from that agency on January 27, 2005. During his tenure with the FDLE, he held a variety of leadership positions including Deputy Commissioner, Regional Director of its Tampa Bay Regional Operations Center, Director of the Division of Criminal Justice Information Systems, and Director of the Florida Criminal Justice Executive Institute. He also served as Chief of Police for the City of Gulfport, Florida, for nearly five years. In addition, he held positions with the Florida Department of Highway Safety and Motor Vehicles and the Florida State University Department of Public Safety, where he began his law enforcement career in 1973.

Dr. Sewell holds a BS, MS and PhD in Criminology from the Florida State University. He has published two textbooks and more than 40 articles—principally on law enforcement management and law enforcement stress issues—in academic and professional journals and is a graduate of the Florida Criminal Justice Executive Institute Chief Executive Seminar (eighth class) and Federal Bureau of Investigation National Academy (114th session).

### About the COPS Office

The Office of Community Oriented Policing Services (COPS Office) is the component of the U.S. Department of Justice responsible for advancing the practice of community policing by the nation's state, local, territorial, and tribal law enforcement agencies through information and grant resources.

Community policing begins with a commitment to building trust and mutual respect between police and communities. It supports public safety by encouraging all stakeholders to work together to address our nation's crime challenges. When police and communities collaborate, they more effectively address underlying issues, change negative behavioral patterns, and allocate resources.

Rather than simply responding to crime, community policing focuses on preventing it through strategic problem-solving approaches based on collaboration. The COPS Office awards grants to hire community policing officers and support the development and testing of innovative policing strategies. COPS Office funding also provides training and technical assistance to community members and local government leaders, as well as all levels of law enforcement.

Since 1994, the COPS Office has invested more than \$14 billion to add community policing officers to the nation's streets, enhance crime fighting technology, support crime prevention initiatives, and provide training and technical assistance to help advance community policing. Other achievements include the following:

- To date, the COPS Office has funded the hiring of approximately 130,000 additional officers by more than 13,000 of the nation's 18,000 law enforcement agencies in both small and large jurisdictions.
- Nearly 700,000 law enforcement personnel, community members, and government leaders have been trained through COPS Office—funded training organizations.
- Almost 500 agencies have received customized advice and peer-led technical assistance through the COPS Office Collaborative Reform Initiative Technical Assistance Center.
- To date, the COPS Office has distributed more than eight million topic-specific publications, training curricula, white papers, and resource CDs and flash drives.
- The COPS Office also sponsors conferences, round tables, and other forums focused on issues critical to law enforcement.

COPS Office information resources, covering a wide range of community policing topics such as school and campus safety, violent crime, and officer safety and wellness, can be downloaded via the COPS Office's home page, <a href="https://cops.usdoj.gov">https://cops.usdoj.gov</a>.



This comprehensive project focused on strengthening programs that help families support officers in mental or emotional crises or considering suicide. The suite of six publications includes four reports documenting innovative interventions currently being used around the country, one protocol for agencies on how to address an officer suicide, and a resources abstract. This publication, *Guide for Developing an Effective Stress Management Policy for Law Enforcement*, provides suggestions to fill gaps in current agency policies that deal with psychological support, training of agency personnel, cardiovascular disease, and police suicide. Each of these sections is accompanied by a commentary to support the basic information contained in the model policy and to encourage discussion and communication within a law enforcement agency. The policy is also designed to supplement existing policies, procedures, and protocols used in many agencies today.



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