

Officer Safety and Wellness Backgrounder

Overview

Officers face stressors on a daily basis that negatively affect their physical and mental wellbeing. Due to these stressors, police officers tend to have higher rates of cardiovascular disease (CVD), post-traumatic stress disorder (PTSD), depression, suicide, and die on average 21.7 years sooner compared to the general population. Repeated and chronic exposure to intense stressors produce dysfunctions within the stress response system, ultimately leading to a diseased state.¹

In addition to the personal impact of stress on officers, continual exposure to stressors without proper institutional support create an environment where officers face difficulty in fulfilling their duty, thus making officer safety and wellness a broader public interest. One frequently cited result of repeated stress is “Compassion Fatigue,” which is the emotional toll of repeated exposure to trauma and the feeling of futility that follows.

Policing stressors also impact the physical wellbeing of officers, resulting in officers developing poor health habits and long-term health challenges. Despite the physical requirements of regular police work, recent research suggests that obesity rates among officers is higher than that of the general public.² Moreover, officers are twice as likely to develop a sleep disorder compared to the general public.³ Compounding physical health issues alongside the mental challenges can result in severe fatigue that degrades officers' cognition, reaction time, alertness, and impairs their ability to protect themselves and the communities they serve.

The challenges and treatments of mental health issues must be viewed through the lens of policing culture, which often perpetuates a culture of silence around mental health issues resulting in officers not seeking treatment and counseling. A variety of procedural issues also stand in the way of mental health services for officers across the nation. Long standing procedures such as removing an officer's service weapon (known as “rubber gunning”), limited duty, suspension, and loss of benefits have established a culture of fear around seeking help for mental health challenges. Further, officers may fear speaking up on behalf of fellow officers who may be in need of assistance because of fear of harming their comrades' careers.⁴

Law Enforcement Mental Health and Wellness Act (LEMHWA)

LEMHWA was passed in Congress in 2017 and signed into law in January 2018. LEMHWA called for the U.S. Department of Justice (DOJ) to submit (1) a report to Congress on mental health practices and services in the U.S. Departments of Defense (DoD) and Veterans Affairs (VA) that could be adopted by federal, state, local, or tribal law enforcement agencies as

¹ Andrew, Michael E., John M. Violanti, Ja K. Gu, Desta Fekedulegn, Shengqiao Li, Tara A. Hartley, Luenda E. Charles, Anna Mnatsakanova, Diane B. Miller, and Cecil M. Burchfiel. 2017. “Police Work Stressors and Cardiac Vagal Control.” *American Journal of Human Biology* 29(5): e22996.

² Hartley TA, Burchfiel CM, Fekedulegn D, Andrew ME, Knox SS, Violanti JM. (2011) Associations between police officer stress and the metabolic syndrome. *Int J Emerg Ment Health* 13, 243–56.

³ Beth Pearsall, “Sleep Disorders, Work Shifts and Officer Wellness,” June 14, 2012, [nij.ojp.gov: http://nij.ojp.gov/topics/articles/sleep-disorders-work-shifts-and-officer-wellness](http://nij.ojp.gov/topics/articles/sleep-disorders-work-shifts-and-officer-wellness)

⁴ Strategic Applications International. 2018. *Officers' Physical and Mental Health and Safety: Emerging Issues and Recommendations*. Officer Safety and Wellness Group Meeting Summary. Washington, DC: Office of Community Oriented Policing Services.

well as (2) a report containing recommendations to Congress including the effectiveness of crisis lines for law enforcement officers (LEOs), the efficacy of annual mental health checks for LEOs, the expansion of peer monitoring programs, and ensuring private considerations for aforementioned programs.

Relevant Studies

A recent study revealed that the five most stressful events among law enforcement officers are the following:⁵ (1) exposure to battered or dead children, (2) killing someone in the line of duty, (3) fellow officer killed in the line of duty, (4) situations requiring use of force, and (5) physical attacks on one's person.

A National Institute of Health (NIH) study in 2014 found a disparity between small and large departments when looking at suicide rates among officers. Smaller police departments had a significantly higher suicide rate than large departments. Possible reasons include lack of availability for mental health assistance, increased workload and danger, and community visibility.⁶

Solutions and Best Practices from the Field

Law Enforcement Mental Health and Wellness Programs: 11 Case Studies - 21CP Solutions was selected by the U.S. Department of Justice, Office of Community Oriented Policing Services (COPS) to discover successful officer mental health and wellness programs using a case study format as directed by the Law Enforcement Mental Health and Wellness Act (LEMWHA). The 21CP team selected 11 case studies that exhibited innovative and replicable methods in addressing officer health and wellness. The case studies included departments from across the country and creative solutions such as police hotlines for officers in crisis (Cop2Cop in New Jersey), behavioral health programs (PASS in Nashville), and several different peer support programs.⁷

Rank and File: Reflection on Emerging Issues in Law Enforcement – On August 16, 2017, the Office of Community Oriented Policing Services (COPS Office), a component of the U.S. Department of Justice (DOJ), invited 40 rank-and-file officers to engage in meaningful dialogue on numerous contemporary policing issues, share their insight and firsthand experiences as front-line officers, and discuss challenges they face in protecting their communities and reducing crime. One of the core issues discussed was officer safety and wellness. Officers discussed in both small and large groups solutions they have enacted and pitfalls they have encountered when confronting the physical and mental challenges of policing.⁸

Using U.S. Department of Veterans' Affairs (VA) as a model - Military personnel and police officers often face similar mental health challenges as a result of job-related stressors. The

⁵ Violanti, John M., Desta Fekedulegn, Tara Hartley, Leuenda Charles, Michael Andrew, Claudia Ma, and Cecil Burchfield. 2016. "Highly Rated and Most Frequent Stressors among Police Officers: Gender Differences." *American Journal of Criminal Justice* 41(4): 645–662

⁶ Violanti, John M et al. "Police suicide in small departments: a comparative analysis." *International journal of emergency mental health* vol. 14,3 (2012): 157-62.

⁷ Copple, Colleen, James Copple, Jessica Drake, Nola Joyce, Mary-Jo Robinson, Sean Smoot, Darrel Stephens, and Roberto Villaseñor. 2019. *Law Enforcement Mental Health and Wellness Programs: Eleven Case Studies*. Washington, DC: Office of Community Oriented Policing Services.

⁸ Robinson, Mary-Jo, and Christopher Smith. 2018. *Rank and File: Reflections on Emerging Issues in Law Enforcement*. Washington, DC: Office of Community Oriented Policing Services.

VA has enacted several procedures and programs, as well as veteran centers, that can be replicated by law enforcement locally or nationwide.

Cop2Cop (C2C) - Cop2Cop is a 24/7 peer response hotline in New Jersey that offers officers peer support, clinical assessments, provider networks, crisis interventions, and other mental health services. C2C is largely staffed by retired officers and uses the Reciprocal Peer Support (RPS) model that draws on shared living experiences. Replication would require a modification of the sustainability systems that have been set up in New Jersey to perpetuate C2C. New Jersey supports C2C through legislatively designated asset forfeiture funds, providing it a guaranteed funding source that not all states may be able to replicate.

Milwaukee Resilience Training - Understanding that officer resiliency is crucial to on-the-job success and personal well-being, the Milwaukee Police Department Academy has incorporated resiliency training as a foundational part to their new recruit training. In order to determine the efficacy of the training, the Academy follows-up with recruits after graduation. In a recent Milwaukee Police Department academy class of 42 cadets ranging in ages from 21 to 53 years, greater job satisfaction of police officers three months after their graduation from the academy was statistically significantly associated with lower emotional stress and lower perceived stress.⁹

⁹ Office of Community Oriented Policing Services, 2019. BOLO Project Bulletin #8: Development and Validation of a Resilience Training Model at the Academy