

# Deliberative and Pre-decisional

## Chapter 4: Law Enforcement Health and Wellness

### Introduction

The health, wellness, and safety of law enforcement officers and their civilian colleagues is critical to the country's safety and security. These professionals are exposed on a daily basis to harsh realities, including job and organizational stress, traumatic incidents, and accumulated memories that could lead to post-traumatic stress disorder (PTSD).

**PULL QUOTE:** "Nothing is more important than the well-being—physically, mentally, and emotionally—of our men and women [in law enforcement]. They are the backbone of our department(s)." <sup>1</sup> - Commissioner William Gross, Boston Police Department

There is a strong correlation between physical and mental health, and the two should not be considered separate. Maintaining physical health helps law enforcement officers sustain long and difficult careers that are filled with stressors, which may take a toll on the individual. A recent study about the life expectancy of police officers in Buffalo, New York, revealed that, on average, officers live 21.9 fewer years than the general public. <sup>2</sup>

All necessary resources must be provided to today's law enforcement personnel to optimize officer safety, health, and wellness, which will allow them to serve and protect our nation.

### 4.1 Physical Health

#### Background

Numerous agencies provide physical fitness programs for officers. Still, the level of physical fitness is up to each individual. While officers who graduate from the training academy are typically in the best shape of their lives, fitness levels usually change as an officer's career evolves. Many elements contribute to a lesser fitness level, including shift work, poor sleeping patterns, operational and organizational stress, and improper nutrition.

#### Current State of the Issue

The International Association of Chiefs of Police (IACP), through a cooperative agreement with the Bureau of Justice Assistance (BJA), conducted a multi-department assessment of line-of-duty injuries. Eighteen different agencies tracked all reported injuries over the course of one year. The report found that 1,295 injuries resulted in 5,938 days missed, with an average of 4.5 days missed per incident and an average rehabilitation period of 3.5 days. The study found that officers who engaged in fitness training regimens were less likely to suffer an injury reportable to the Occupational Safety and Health Administration (OSHA) and defined as severe. <sup>3</sup>

#### Heart Disease

Law enforcement is a high-stress occupation that often leaves officers with an increasing prevalence and

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<sup>1</sup> *President's Commission on Law Enforcement and the Administration of Justice: Hearing on Law Enforcement Health and Wellness* (February 27, 2020) (written statement of William Gross, Commissioner, Boston Police Department, MA), <https://www.justice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>2</sup> John Violanti et al., "Life Expectancy in Police Officers: A Comparison with the U.S. General Population," Abstract, *International Journal of Emergency Mental Health*, 15, no. 4 (2013), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4734369/>.

<sup>3</sup> International Association of Chiefs of Police and Bureau of Justice Assistance, *Reducing Officer Injuries, Final Report: A Summary of Data Findings and Recommendations From a Multi-Agency Injury Tracking Study* (Alexandria, VA: International Association of Chiefs of Police, 2012), <https://www.theiacp.org/resources/document/reducing-officer-injuries-final-report>.

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incident of cardiovascular disease.<sup>4</sup> This prevalence is directly related to a number of standard risk factors, including high blood pressure, cigarette smoking, obesity, and a sedentary lifestyle.<sup>5</sup> Moreover, officers encounter occupation-specific risk factors, such as sudden physical exertion, psychological stress, and shift work.<sup>6</sup> This leads to an increased risk of a coronary event. One study reported that officers older than 40 had a higher risk of a coronary event within 10 years than the same segment of the broader population.<sup>7</sup> Despite well-known health issues facing law enforcement officers, exercise participation levels among officers remains low. A survey of Canadian police officers observed that a mere 17 percent of police officers engaged in regular physical activity a minimum of three times weekly.<sup>8</sup>

Jon Sheinberg, board-certified cardiologist police lieutenant for the Cedar Park, Texas, police department, recently noted in a podcast with Gilbert Moore from the Office of Community Oriented Policing (COPS), “Law enforcement has a very unique stress pattern. It's a pattern which is what we call 98: 97 percent boredom and . . . 2-3 percent of sheer terror. So, you have a situation in which the stress patterns are rapidly changing, and you add that to a population that experiences shift work, a population that is sedentary, a population that eats a diet of convenience.”<sup>9</sup>

### Substance Use

Stress in law enforcement shows up everywhere: physical health (increased risk of heart disease), mental health, and substance use. Officers may encounter any number of crises in the course of their job duties, including domestic violence calls, fights, shootings, homicides, child abuse, and fatal car accidents. In any given day, officers may be required to make multiple instant life and death decisions that are nearly always analyzed well after the fact.

Adding to this circumstance are difficult schedules with rotating or overtime shifts that leave officers sleep-deprived, which may negatively affect reaction times. While the attitude toward mitigating stress in law enforcement agencies is changing, many officers will not seek treatment because they believe it will cost them future promotions.<sup>10</sup> Instead, officers may opt to self-medicate through drug or alcohol use. Through his research, Dr. John Violanti, a 23-year veteran of the New York State Police and professor in the Department of Social and Preventive Medicine at the University at Buffalo, found that alcohol abuse among law enforcement officers in the United States is double that of the general population.<sup>11</sup>

### Sleep and Fatigue

Shift work interferes with normal sleep patterns. When officers work at different or unnatural times of day, they often suffer from sleep loss.<sup>12</sup> That kind of fatigue can degrade performance, reduce an officer's productivity, and put the officer's safety at risk. Dr. Violanti found that police officers were much more likely than the general public to have higher than recommended cholesterol levels, higher than average pulse rates

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<sup>4</sup> Franklin Zimmerman, “Cardiovascular Disease and Risk Factors in Law Enforcement Personnel: A Comprehensive Review,” *Cardiology in Review* 20, no. 4 (2012).

<sup>5</sup> Zimmerman, “Cardiovascular Disease.”

<sup>6</sup> Zimmerman, “Cardiovascular Disease.”

<sup>7</sup> Colleen Copple et al., *Law Enforcement Mental Health and Wellness Programs: Eleven Case Studies* (Washington, DC: Office of Community Oriented Policing Services, 2019), 24, <https://cops.usdoj.gov/RIC/Publications/cops-p371-pub.pdf>.

<sup>8</sup> Jason Williams and Vincent Ramsey, “The Need for Law Enforcement Wellness Interventions: A Critical Review,” *The Sport Journal*, September 5, 2017, <http://thesportjournal.org/article/the-need-for-law-enforcement-wellness-interventions/>.

<sup>9</sup> Office of Community Oriented Policing Services, “Mitigating the Risk of Heart Disease in Law Enforcement,” *The Beat* (podcast), December 2019, [https://cops.usdoj.gov/html/podcasts/the\\_beat/12-2019/Transcript\\_Sheinberg.pdf](https://cops.usdoj.gov/html/podcasts/the_beat/12-2019/Transcript_Sheinberg.pdf).

<sup>10</sup> Lewis Z. Schlosser and Gerard P. McAleer, “Opioid Use Disorders Among Police and Public Safety Personnel: What Law Enforcement Leaders Need to Know,” *Police Chief Magazine*, March 14, 2018, <https://www.policechiefmagazine.org/opioid-use-among-police-personnel/>.

<sup>11</sup> John M. Violanti, “Alcohol Abuse in Policing: Prevention Strategies,” *FBI Law Enforcement Bulletin* 68, no. 1 (1999), <https://www.thefreelibrary.com/Alcohol+abuse+in+policing%3a+prevention+strategies.-a054036506>.

<sup>12</sup> Bryan Vila and Charles Samuels, “Sleep Deprivation: What Does It Mean for Public Safety Officers,” *NIJ Journal*, no. 262 (2009), <https://www.ncjrs.gov/pdffiles1/nij/225762.pdf>.

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and diastolic blood pressure, and a higher prevalence of sleep disorders.<sup>13</sup>

Levels of sleep and fatigue are basic issues of survival for the human body. If these are not balanced, an already risky job becomes even more dangerous for law enforcement officers. “Researchers have shown that being awake for 19 hours produces impairments that are comparable to having a blood alcohol concentration (BAC) of .05 percent. Being awake for 24 hours is comparable to having a BAC of roughly .10 percent”.<sup>14</sup> Put differently, just five hours less sleep basically doubles the impact.<sup>15</sup> It should be noted that it is a crime to drive with a BAC of .08 percent or above. Experts suggest 6.5 hours as the minimum amount of sleep necessary to prevent sleep deprivation; however, “53 percent of law enforcement officers average less. . . . More than 90 percent of officers report being routinely fatigued, and 85 percent reported driving while drowsy.”<sup>16</sup> Sleep is critical for law enforcement officer safety and wellness.

### Diet and Nutrition

When there are no set times or places for officers to eat, maintaining a well-balanced diet becomes difficult. Nutritionists note that eating healthy on duty provides officers with stable energy levels throughout a shift and enables them to move faster in foot pursuits. A study that examines the relationship between officers’ diets and injury found that heavier officers are often injured more than those who are not.<sup>17</sup> Eating a well-balanced diet directly supports officer health and contributes to performance and fitness. Proper fitness is critical for officers to ensure excessive force is not used to compensate for their inability to use appropriate physical restraining methods.<sup>18</sup> Fitness and wellness are just as important as any other required training, as they help lessen the potential for use of excessive force in addition to the costly law suits that result from it.<sup>19</sup>

**PULL QUOTE:** “Recognizing the important link between nutrition and officer and family health and wellness can lead to better job performance, healthier individuals and families and safe communities.”<sup>20</sup> - International Association of Chiefs of Police, *Employee and Family Wellness Guide*

Specifically, officers should be aware of the linkage between stress and food. A study by British researchers showed that people with high levels of stress were more likely than people with low stress levels to snack in response to daily hassles in their regular lives.<sup>21</sup>

Law enforcement agencies should educate and encourage officers to avoid empty calories and eat nutrient-dense whole foods and avoid empty calories. The Boston, Massachusetts, police department instituted a culture of health, safety, and fitness by providing meal planning services to officer recruits to maintain a healthy lifestyle.<sup>22</sup>

**PULL QUOTE:** “As we courageously enforce the law, so too must we diligently enforce our health and well-

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<sup>13</sup> University at Buffalo, “Impact of Stress on Police Officers’ Physical and Mental Health,” Science Daily, September 29, 2008, <https://www.sciencedaily.com/releases/2008/09/080926105029.htm>.

<sup>14</sup> Drew Dawson and Kathryn Reid, “Fatigue, Alcohol and Performance Impairment,” *Nature* 388 (1997): 235, <https://www.nature.com/articles/40775.pdf>.

<sup>15</sup> Vila and Samuels, “Sleep Deprivation.”

<sup>16</sup> National Law Enforcement and Corrections Technology Center, “No Rest for the Weary,” *TECHBeat*, Winter 2008, <https://nij.ojp.gov/library/publications/no-rest-weary>.

<sup>17</sup> James E. Guffey et al., “Police Officer Fitness, Diet, Lifestyle and Its Relationship to Duty Performance and Injury,” *Journal of Legal Issues and Cases in Business*, no. 3 (2015), <https://www.aabri.com/manuscripts/131469.pdf>.

<sup>18</sup> Guffey, “Police Officer Fitness.”

<sup>19</sup> Guffey, “Police Officer Fitness.”

<sup>20</sup> International Association of Chiefs of Police, *Employee and Family Wellness Guide* (Alexandria, VA: International Association of Chiefs of Police, 2018), [https://www.theiacp.org/sites/default/files/2020-02/239619\\_IACP\\_FamilySupportGuide\\_IA\\_p8%20%281%29.pdf](https://www.theiacp.org/sites/default/files/2020-02/239619_IACP_FamilySupportGuide_IA_p8%20%281%29.pdf).

<sup>21</sup> “How Stress Can Make Us Overeat,” *Healthbeat*, September 2019, <https://www.health.harvard.edu/healthbeat/how-stress-can-make-us-overeat>.

<sup>22</sup> Michael Hamrock, *Promoting a Culture of Health, Safety and Fitness for the Boston Police Department and EMS* (Brighton, MA: St Elizabeth’s Medical Center, n.d.).

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being.”<sup>23</sup> - Chief Ernest Finley, Montgomery, Alabama, police department

### Workload

A study on stress levels related to workloads showed that for officers with low workloads, the sources of stress are most often interpersonal relationships with peers, the community, or supervisors.<sup>24</sup> For officers with high workloads, the sources of stress are directly related to stress-producing events in their general lives and to dealing with crime and related matters.<sup>25</sup>

As detailed in *Practices in Modern Police, Officer Safety and Wellness*, “the lack of sleep can affect and officers’ moods, causing irritability and impaired judgment. These mood changes may cause officers to respond incorrectly to community members and colleagues, leading to complaints about officer behavior and even inappropriate use of force.”<sup>26</sup>

### Law Enforcement Stress and Trauma

Stress and trauma have a negative impact on the health and well-being of law enforcement officers. Law enforcement officers are exposed to potentially traumatic incidents and extreme stress over the course of their career, which may average 30 to 35 years.<sup>27</sup> A uniformed police psychologist with the New York City Police Department (NYPD) estimated that police officers might be exposed to at least 900 potentially traumatic incidents over the course of their career.<sup>28</sup> Prolonged exposure to potentially traumatic incidents may come with the cost of law enforcement officer’s health and well-being.<sup>29</sup>

## **[CROSS-REFERENCE RECRUITMENT AND TRAINING CHAPTER]**

### **4.1.1 Law enforcement agencies should establish a department-wide health and fitness program with both financial and non-financial incentives.**

Beyond standard fitness education, agencies should conduct regular education on stress management, sleep, hygiene, nutrition, substance use prevention, and positive lifestyle choices. An incentive-based voluntary program would cultivate more positive attitudes about the implementation than a mandatory approach. Both financial and non-financial incentives (e.g. health insurance discounts, monetary fitness bonuses, and on-duty fitness time) can be used to promote a program. Additionally, agencies should work with athletic trainers or training facilities within the community as partners in a health and fitness program to minimize costs to staff.

## **[CROSS-REFERENCE BUSINESS AND COMMUNITY DEVELOPMENT]**

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The Bend, Oregon, police department allows officers to participate in team exercise activities, like hiking or running, two working days each week.<sup>30</sup>

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<sup>23</sup> Ernest Finley, Chief of Police, Montgomery Police Department, AL, email communication with Matthew Varisco, Federal Program Manager, Law Enforcement Health and Wellness Working Group, May 7, 2020.

<sup>24</sup> Ezra Stotland and Michael Pendleton, “Workload, Stress, and Strain among Police Officers,” *Behavioral Medicine* 15, no. 1 (1989), <https://doi.org/10.1080/08964289.1989.9935146>.

<sup>25</sup> Stotland and Pendleton, “Workload, Stress, and Strain.”

<sup>26</sup> International Association of Chiefs of Police, *Practices in Modern Policing: Officer Safety and Wellness* (Alexandria, VA: International Association of Chiefs of Police, 2018), <https://www.theiacp.org/resources/practices-in-modern-policing-officer-safety-and-wellness>.

<sup>27</sup> Konstantinos Papazoglou and Brooke McQuerrey Tuttle, “Fighting Police Trauma: Practical Approaches to Addressing Psychological Needs of Officers,” *SAGE Open* 8, no. 3 (2018), <https://doi.org/10.1177/2158244018794794>.

<sup>28</sup> Daniel Rudofossi, *A Cop Doc’s Guide to Public-Safety Complex Trauma Syndrome: Using Five Police Personality Styles* (Amityville, NY: Baywood Publishing Company, 2009), <http://site.ebrary.com/id/10615011>.

<sup>29</sup> Papazoglou and Tuttle, “Fighting Police Trauma.”

<sup>30</sup> Copple et al., *Law Enforcement Mental Health*.

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### 4.2 Mental Wellness

#### Background

Law enforcement is an extremely challenging and dangerous career. Officers routinely encounter high-stress situations, exposure to crime, human suffering, and death.

**PULL QUOTE:** "Serving our communities can affect officers in a myriad of ways, and we owe it to each and every officer to prioritize their health and well-being for the good of our departments and our cities."<sup>31</sup> - Commissioner Frederick Frazier, Councilman At-Large, McKinney City Council, TX

Staying healthy is not enough, and these officers must receive psychological support to enable them to continue to perform their duties; however, not everyone seeks such support.<sup>32</sup> Law enforcement executives should promote the continued development of minds and bodies to make them stronger and more resilient. Policies and programs that support health and wellness are essential in building a balanced and prosperous agency. Officers who have a holistic support system serve their communities better than those who do not. Moreover, agencies can lower costs related to workman's compensation claims if they invest in their officers through a health and wellness program. A patchwork of laws across the states recognize PTSD disability claims.<sup>33</sup> Recently, an officer who worked to collect bodies of patrons who were killed in the Pulse nightclub shooting was awarded 80 percent of his salary for life after being deemed unable to work because of PTSD.<sup>34</sup>

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Approximately 100,000 active police officers in the United States suffer from PTSD, and many also live with the comorbidities of depression, anxiety, and suicidal ideation.<sup>35</sup>

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Many law enforcement agencies recognize the need for health and wellness programs. However, the majority of departments focus on one issue: the physical readiness of the employee.

In recent years, agencies have realized that mental wellness should complement the physical component. Agencies often lack the resources and the critical guidance to start or improve a program that accounts for their officers' mental health and wellness. Mental Health First Aid programs are important tools that teach the signs of mental illness and substance use issues and the skills to respond.<sup>36</sup>

**PULL QUOTE:** "We take care of others. Who takes care of us?"<sup>37</sup> - Commissioner James Clemmons, Jr., Sherriff of Richmond County Sheriff's Office, NC.

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#### Mental Health and Criminal Justice System Professionals

While law enforcement officer wellness is important, those who serve within the greater criminal justice

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<sup>31</sup> Frederick Frazier, Member, McKinney City Council, TX, text communication with Matthew Varisco, Federal Program Manager, Law Enforcement Health and Wellness Working Group, May 1, 2020.

<sup>32</sup> Frazier, text communication, May 1, 2020.

<sup>33</sup> "Workers' Compensation for PTSD: Which States Offer Benefits?," Gerber and Holder Law, December 2019, <https://www.gerberholderlaw.com/workers-comp-ptsd-by-state/>.

<sup>34</sup> David Harris, "Pension Board Approves Early Retirement for Orlando Police Officer with PTSD after Pulse," *Orlando Sentinel*, July 13, 2017, <https://www.orlandosentinel.com/news/breaking-news/os-gerry-realin-pension-20170713-story.html>.

<sup>35</sup> Gerber and Holder Law, "Workers' Compensation for PTSD."

<sup>36</sup> "Mental Health First Aid," National Council for Behavioral Health, accessed July 31, 2020, <https://www.mentalhealthfirstaid.org/>.

<sup>37</sup> James Clemmons, Jr., Sheriff, Richmond County Sheriff's Office, NC, in discussion with Law Enforcement Health and Wellness Working Group, meeting, February 26, 2020.

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system must also be considered.<sup>38</sup> The number of law enforcement wellness programs continues to increase, and agency heads strive to make improvements. However, not all criminal justice system agencies (e.g., prosecutorial offices) have the same resources to cope with the cumulative physical, emotional, and psychological effects of continuous exposure to trauma and distress.

It is extremely challenging for criminal justice professionals to bear witness to others' experiences of trauma and not be negatively affected. If the demands of working to help communities outweigh the resources for self-care, those serving in the criminal justice system may face symptoms similar to PTSD, such as exhaustion; sleep disturbance; generalized fear, anger, and anxiety; hypervigilance; depression; intrusive thoughts; dissociation; a sense of isolation; cynicism; and burnout. Individuals and communities depend upon prosecutors and other professionals serving in the criminal justice system to achieve safety and justice, and they must be provided the resources to maintain physical, emotional, and psychological wellness.<sup>39</sup>

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### Current State of the Issue

Law enforcement culture continues to stigmatize self-care, including seeking professional mental health services. Law enforcement officers fear losing everything they have worked for if they admit they are struggling. These issues are fueled by cultural expectations, often valued by both the military and law enforcement professions (e.g., pride, toughness, and peer pressure) and a perceived lack of support from the command staff. Officers are not always aware of the available mental health program services and resources. In addition, they are hesitant to use available services unless they know leadership approves of their use.

Accessing mental health resources can be particularly challenging for men, who are the predominate workforce in law enforcement. In general, men pursue preventive screenings, maintain a regular source of care, and get timely medical interventions much less often than women.<sup>40</sup> This is not because men are somehow programmed to avoid seeking help; however, some research suggests that "men who score higher on measures assessing dimensions of masculinity norms generally have less favorable help-seeking attitude, seek help for psychological problems less often, and in some cases fail to obtain routine health examinations."<sup>41</sup> While the reasons behind this gender difference are not fully understood, research indicates that men who more strongly identify with masculine norms tend to show poorer mental health and are less likely to seek psychological help.<sup>42</sup> In addition, studies show that the need for help and perceived weakness do not correspond with society's definition of masculinity.

While men may not seek medical interventions as often as their female counterparts, the health and well-being of female officers cannot be overlooked. Data shows that 23 percent of male officers reported more

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<sup>38</sup> *President's Commission on Law Enforcement and the Administration of Justice: Hearing on Law Enforcement Health and Wellness* (February 27, 2020) (written statement of Jeffrey Jensen, U.S. Attorney, Eastern District of MO), <https://www.justice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>39</sup> Jensen, *President's Commission on Law*, February 27, 2020.

<sup>40</sup> Donald K. Cherry, David A. Woodwell, and Elizabeth A. Rechtsteiner, "National Ambulatory Medical Care Survey: 2005 Summary," *Advance Data from Vital and Health Statistics*, no. 387 (2007), <https://www.cdc.gov/nchs/data/ad/ad387.pdf>; David Sandman, Elisabeth Simantov, and Christina An, *Out of Touch: American Men and the Health Care System* (New York: Commonwealth Fund, 2000), <https://www.commonwealthfund.org/publications/fund-reports/2000/mar/out-touch-american-men-and-health-care-system>; Anthony J. Viera, Joshua M. Thorpe, and Joanne M. Garrett, "Effects of Sex, Age, and Visits on Receipt of Preventive Healthcare Services: A Secondary Analysis of National Data," Abstract, *BMC Health Services Research* 6, no. 1 (2006), <https://bmchealthservres.biomedcentral.com/articles/10.1186/1472-6963-6-15>; Jeannine S. Schiller et al., "Summary Health Statistics for U.S. Adults: National Health Interview Survey, 2010," *Vital and Health Statistics* 10, no. 252 (2012), [https://www.cdc.gov/nchs/data/series/sr\\_10/sr10\\_252.pdf](https://www.cdc.gov/nchs/data/series/sr_10/sr10_252.pdf).

<sup>41</sup> Wizdom Powell et al., "Masculinity and Race-Related Factors as Barriers to Health Help-Seeking Among African American Men," *Behavioral Medicine* 42, no. 3 (2016): 3, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4979354/>.

<sup>42</sup> Y. Joel Wong et al., "Meta-Analyses of the Relationship between Conformity to Masculine Norms and Mental Health-Related Outcomes," *Journal of Counseling Psychology* 64, no. 1 (2017), <https://www.apa.org/pubs/journals/releases/cou-cou0000176.pdf>.

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suicidal thoughts than the general population (13.5 percent).<sup>43</sup> For women, that number was determined to be 25 percent. Therefore, it is critical for all law enforcement officers to seek the care they need.

According to the U.S. Census Bureau, “just 6 percent of the population at large has served in the military, but 19 percent of police officers are veterans.”<sup>44</sup> according to Dr. Matthew Miller, Acting Director for Suicide Prevention, Department of Veterans Affairs, “Specifically from 2005 to 2017 there was a 43.6 percent increase in the number of suicide deaths in the general American population. . . . Across the same time period, there was a 6.1 percent increase in the number of suicide deaths in the veteran population.”<sup>45</sup>

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First responders and police officers may experience the following risk factors for suicide:

- occupational hazards and exposures
- access to firearms or other lethal weapons
- erratic work schedules resulting in sleep disturbances and disrupted family life
- personal and professional stigma related to accessing mental health services<sup>46</sup>

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Law enforcement must develop a national strategy to address mental wellness and suicide prevention that complements the physical wellness programs many agencies already employ. This strategy should account for all stages of a law enforcement officer’s career: recruitment, field work, and retirement.

Currently, “nearly one in four officers experience thoughts of suicide at some point in their lives. At least 228 officers took their own lives in 2019—a 44 percent increase from the previous year. Not only is that higher than the number of line-of-duty deaths, it reflects a steady increase in officer suicides over the past several years.”<sup>47</sup> Additionally, the risk of suicide among law enforcement officers is 54 percent higher than the general population.<sup>48</sup>

**PULL QUOTE:** “Wellness programs are on the rise in law enforcement agencies but still lag behind other industries.”<sup>49</sup> - Dr. John Violanti, University at Buffalo School of Public Health and Health Professions

### Post-Traumatic Stress Disorder

PTSD is an often-unrecognized psychological injury that can be just as debilitating as any physical injury. Undiagnosed or unaddressed PTSD negatively affects performance and quality of life. Coupled with depression and substance use issues, the burden of mental and psychological issues may lead to suicide. Veteran and law enforcement communities struggle to address the high rates of suicide. One of the most

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<sup>43</sup> Lois Baker, “Researchers Investigate Impact of Stress on Police Officers’ Physical and Mental Health,” University of Buffalo, September 25, 2008, <http://www.buffalo.edu/news/releases/2008/09/9660.html>.

<sup>44</sup> Simone Weichselbaum and Beth Schwartzapfel, “When Warriors Put on the Badge,” The Marshall Project, March 30, 2017, <https://www.themarshallproject.org/2017/03/30/when-warriors-put-on-the-badge>.

<sup>45</sup> *President’s Commission on Law Enforcement and the Administration of Justice: Hearing on Social Problems Impacting Public Safety* (April 1, 2020) (statement of Matthew Miller, Acting Director, Suicide Prevention, U.S. Department of Veterans Affairs), <https://www.justice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>46</sup> Ian H. Stanley, Melanie A. Hom, and Thomas E. Joiner, “A Systematic Review of Suicidal Thoughts and Behaviors among Police Officers, Firefighters, EMTs, and Paramedics,” *Clinical Psychology Review* 44 (2016), <https://doi.org/10.1016/j.cpr.2015.12.002>.

<sup>47</sup> William P. Barr, U.S. Attorney General, “Remarks as Prepared for Delivery,” presented at the International Association of Chiefs of Police Officer Safety and Wellness Symposium, Miami, FL, February 20, 2020, <https://www.justice.gov/opa/video/attorney-general-barr-speaks-iacp-officer-safety-and-wellness-symposium>.

<sup>48</sup> Police Executive Research Forum, *An Occupational Risk: What Every Police Agency Should Do To Prevent Suicide Among Its Officers* (Washington, DC: Police Executive Research Forum, 2019), <https://www.policeforum.org/assets/PreventOfficerSuicide.pdf>.

<sup>49</sup> John Violanti, Research Professor, University at Buffalo, in discussion with Law Enforcement Health and Wellness Working Group, virtual meeting, March 24, 2020.

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effective mitigation factors is early and aggressive intervention using peer or professional counseling.

There are many signs that an officer is experiencing trauma (e.g., flashbacks, memory gaps, fear, and anger), all of which could be misinterpreted. For instance, an officer might perceive an action as not cooperative or aggressive.<sup>50</sup> Alternatively, an officer may disengage, which could lead others to interpret that they have not experienced trauma because their behavior seems “normal.”

Intense mental trauma experienced in the field are not always based off a single incident. Instead, they often accumulate over a career. One in every five officers is subject to PTSD, which can lead to deteriorated heart health, hormonal imbalances, and depression or thoughts of suicide.<sup>51</sup> While there is no central repository for officer suicides, the number of officers who die by suicide each year exceeds the number who are killed feloniously and accidentally.<sup>52</sup>

### Crisis Lines

Telephone crisis services or hotlines have been effective in preventing suicide. Based on a survey of eight U.S. call centers, individuals who called a crisis support line were less likely to feel suicidal during the course of the telephone session, and they generally did not experience heightened levels of hopelessness or psychological pain in the following weeks. In 2019, the Federal Communication Commission designated 988 as the National Suicide Prevention Hotline.<sup>53</sup> This three-digit number, like 911, will help to increase awareness, normalize calling for help, and aid those experiencing a mental health crisis.

**PULL QUOTE WITH 988 SUPERIMPOSED:** “The effort comes at a time when counseling experts say there is a deepening national mental health crisis and there has been a spate of suicides among veterans, police officers and high-profile figures.”<sup>54</sup> - Neil Vigdor, Reporter, *New York Times*

### **[CROSS-REFERENCE SOCIAL ISSUES AFFECTING LAW ENFORCEMENT]**

As 988 builds in awareness and use, Congress should monitor need and assure additional resources are provided to the Substance Abuse and Mental Health Services Administration (SAMHSA) and the U.S. Veterans Affairs (VA), two agencies that provide call support services. As SAMHSA and the VA may also need to provide additional funding to increase the capacity of the local call centers and train hotline operators.

Similar to law enforcement, firefighting is a physically and emotionally demanding profession. Supported by the National Volunteer Council, the fire service has established a crisis line for firefighters and emergency technicians.<sup>55</sup> The Fire/EMS Helpline offers free 24-hour assistance with issues such as stress, depression, addiction, and PTSD.<sup>56</sup> Based on the similarities between law enforcement and the fire service, a designated national crisis line would benefit the law enforcement community. Additionally, data related to firefighter and Emergency Medical Technician suicide are collected by the Firefighter Behavioral Health Alliance.<sup>57</sup>

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Located on the Rutgers University Behavioral Health Management Campus, Cop2Cop (C2C) is a part of the

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<sup>50</sup> Elizabeth Wexler, “Trauma-Informed Policing: A Special Set of Tools for Law Enforcement,” Behavioral Health System-Baltimore, accessed July 8, 2020, <https://bha.health.maryland.gov/Documents/Trauma-Informed%20Policing%20-%20Betsy%20Wexler.pdf>.

<sup>51</sup> “Ruderman White Paper on Mental Health and Suicide of First Responders,” Ruderman Family Foundation, April 2018, [https://rudermanfoundation.org/white\\_papers/police-officers-and-firefighters-are-more-likely-to-die-by-suicide-than-in-line-of-duty](https://rudermanfoundation.org/white_papers/police-officers-and-firefighters-are-more-likely-to-die-by-suicide-than-in-line-of-duty).

<sup>52</sup> Police Executive Research Forum, *An Occupational Risk*.

<sup>53</sup> Federal Communications Commission, “FCC Proposes Designating 988 as National Suicide Prevention and Mental Health Hotline,” December 12, 2019, <https://docs.fcc.gov/public/attachments/DOC-361337A1.pdf>.

<sup>54</sup> Neil Vigdor, “New Idea for Suicide Prevention Hotline: Just Dial 988,” *New York Times*, accessed May 27, 2020, <https://www.nytimes.com/2019/08/15/us/suicide-prevention-hotline-988.html>.

<sup>55</sup> “Share the Load Program,” National Volunteer Fire Council, accessed June 29, 2020, <https://www.nvfc.org/programs/share-the-load-program/>.

<sup>56</sup> National Volunteer Fire Council, “Share the Load Program.”

<sup>57</sup> “Saving Those Who Save Others,” Firefighter Behavioral Health Alliance, accessed July 31, 2020, <http://ffbha.org/>.

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Rutgers Behavioral Health Management System.<sup>58</sup> C2C a successful state legislated peer crisis response hotline. C2C offers peer support, clinical assessments, provider networks, crisis intervention, and other critical mental health services to law enforcement families 24/7 in New Jersey.<sup>59</sup>

[END TEXT BOX]

### Family Stressors

The toll that the law enforcement profession takes on companions and loved ones can also be exacting. "Spouses, partners, children and companions of law enforcement officers play a significant role in [the] officer's health and wellness and serve as an essential support system for their loved ones."<sup>60</sup> The health, wellness, and safety of law enforcement officers must be a collective approach between law enforcement organizations and their families. Line officers have identified that programs aimed at financial literacy, improving interpersonal relationship, and support services and benefits are critically important to their well-being and professional success. In response, the COPS Office has provided funding to the Fraternal Order of Police to develop a standardized and nationally available training curriculum in law enforcement peer support, *Power in Peers*.<sup>61</sup>

[CROSS-REFERENCE TRAINING AND RETENTION CHAPTER]

"Law enforcement officers are society's problem solvers each and every day they come to work, and often times when they are off duty as well. Just as citizens expect assistance and service from law enforcement officers, our officers must also expect the same level of service and resources when they reach out for help. It is our hope that our law enforcement culture comes to 'normalize' requesting help from our members in need and in doing so, we can protect those whose life's calling has been to protect others."<sup>62</sup> - Colonel Patrick Callahan, New Jersey State Police

### Resiliency

Resilience refers to a person's ability to recover from stressful situations.<sup>63</sup> While there are ways to identify and hire candidates who are resilient by examining their background to determine how they have faced challenges in the past and might in the future, resiliency can also be developed.<sup>64</sup> The VALOR Initiative for resilience training is a joint effort of BJA, the IACP, and the University of Pennsylvania's Positive Psychology Center.<sup>65</sup> The program has trained more than 50,000 law enforcement and highway patrol officers around the country on three areas for individual growth in resiliency: thinking positively and actively in stressful situations, managing energy day-to-day and long-term, and improving relationships at work and home.

[BEGIN TEXT BOX]

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<sup>58</sup> Copple et al., *Law Enforcement Mental Health*.

<sup>59</sup> *President's Commission on Law Enforcement and the Administration of Justice: Hearing on Law Enforcement Health and Wellness* (February 27, 2020) (written statement of Cherie Castellano, Peer Support Program Director, Rutgers National Call Center and Cop 2 Cop Program), <https://www.justice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>60</sup> "Employee and Family Wellness Guide," International Association of Chiefs of Police, February 1, 2018, <https://www.theiacp.org/resources/document/employee-and-family-wellness-guide>.

<sup>61</sup> *President's Commission on Law Enforcement and the Administration of Justice: Hearing on Law Enforcement Health and Wellness* (February 27, 2020) (written statement of Sherri Martin, National Director of Wellness Services, Fraternal Order of Police), <https://www.justice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>62</sup> *President's Commission on Law Enforcement and the Administration of Justice: Hearing on Law Enforcement Health and Wellness* (February 27, 2020) (written statement of Patrick Callahan, Colonel, New Jersey State Police), <https://www.justice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>63</sup> Heather Craig, "Resilience in the Workplace: How to Be More Resilient at Work," *Positive Psychology* (blog), January 16, 2019, <https://positivepsychology.com/resilience-in-the-workplace/>.

<sup>64</sup> Andrew Shatté and Jan Bruce, *The Science Behind Resilience* (n.p.: New Life Solutions, Inc., 2015), <https://www.mequilibrium.com/wp-content/uploads/2016/01/The-Science-Behind-Resilience-12-22.pdf>.

<sup>65</sup> "BJA's VALOR Officer Safety And Wellness Program Trains Over 50,000 Officers," Bureau of Justice Assistance, November 20, 2018, <https://bia.ojp.gov/feature/bias-valor-officer-safety-and-wellness-program-trains-over-50000-officers>.

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Wellness opportunities that can build resiliency

- on-site or departmental confidential psychological services
- employee assistance programs (EAP)
- 24-hour hotline for public safety employees
- peer support and addiction recovery programs
- embedded unit chaplain programs
- family support programs
- organizational consultant programs
- critical incident response management and response debriefing services
- suicide prevention hotlines
- training in how to enhance resiliency building skills based upon scientific research and evidence

[END TEXT BOX]

### 4.2.1 Law enforcement agencies should build a culture of resiliency within their respective organizations.

Creating a culture of resiliency helps organizations maintain an effective workforce. Resiliency is key to the health of our law enforcement and the longevity of their careers.<sup>66</sup> Organizations that teach resiliency skills to help foster individual resilience will see results in performance and quality of life. For example, the Sedgwick County Sheriff's Office in Kansas developed and is implementing the components of their comprehensive wellness program to create a culture of resiliency.<sup>67</sup>

#### Messaging and Education

Law enforcement leaders should clearly communicate the programs and resources available to officers on mental health and suicide prevention. If leadership shows that it values mental health and wellness, officers are more encouraged to seek help. Additionally, current policies should improve transparency and clarify policies that relate to confidentiality and access to service. These messages will inform, allow, and support staff to help themselves and each other.

"It is critical that all necessary resources be provided to today's law enforcement personnel to optimize officer safety, health, and wellness to enhance their performance in today's ever changing and increasing complex threat environment so that the American public will be best served and protected today and well into the future."<sup>68</sup> - Chief Robert S. Biehl, Director of Public Safety and Chief of Police, Dayton, Ohio

#### Service Providers

While some service providers are highly effective, some deliver services that do not meet the needs of law enforcement agencies. Funding levels also affect the delivery of services.

The Indianapolis Metropolitan Police Department's (IMPD) Office of Professional Development and Wellness (OPDW) has established a comprehensive program that includes

- mentoring for new officers

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<sup>66</sup> Violanti, in discussion with Law Enforcement Health and Wellness, March 24, 2020.

<sup>67</sup> *President's Commission on Law Enforcement and the Administration of Justice: Hearing on Law Enforcement Health and Wellness* (February 27, 2020) (written statement of Wendy Hummell, Health Wellness Coordinator, Sedgwick County Sheriff's Office, KS), <https://www.iustice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>68</sup> Robert S. Biehl, Chief of Police, Dayton Police Department, OH, email communication with Matthew Varisco, Federal Program Manager, Law Enforcement Health and Wellness Working Group, May 1, 2020.

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- training on resiliency skills in the basic academy and throughout officers' career
- a critical incident stress debriefing team
- counseling services from culturally competent vetted resources
- mental health and resiliency services
- suicide prevention
- physical health care
- financial health counseling
- a military transition support system
- family support
- therapy canine
- close partnership with chaplains<sup>69</sup>

Upon request, IMPD will share their wellness resources with other law enforcement agencies throughout the country. IMPD has also helped organizations, such as the Nashville Police Department, create a culture of resiliency within their own department. As a testament to their department, OPDW members have been intimately involved in assisting dozens of agencies implement successful wellness programs.<sup>70</sup>

### Recruitment and Training Deficits

#### **[CROSS-REFERENCE TO RECRUITMENT AND TRAINING CHAPTER]**

Improvements to recruitment and training (both academy and continuing education) will improve staff health, wellness, and resiliency. Agencies that receive guidance and direction to make and offer such improvements will have a positive impact on staff, families, and the community.

**4.2.2 Law enforcement agencies should require mental health training for its personnel. Specifically, all law enforcement officers should receive mental health training during their initial academy training. In addition, all agency personnel should receive annual continuing education or in-service training related to mental health.**

#### **[CROSS-REFERENCE RECRUITMENT AND TRAINING CHAPTER]**

Providing mental health training to new recruits not only reinforces it as a priority of the agency, but it helps to establish a foundation for wellness. Training topics should help law enforcement officers respond to calls for services and successfully maintain their career. Training should include

- the major categories of mental illness
- the signs and symptoms of a mental health crisis
- methods to de-escalate those experiencing a mental health crisis
- state and any locally relevant laws regarding the ability of an officer to forcibly detain a subject who is in a mental health crisis
- how to refer and methods of referring individuals for mental health services

Similarly, training topics related to a successful career as a first responder should include

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<sup>69</sup> Nicole Juday, Officer, Indianapolis Police Department, IN, email communications and discussions with Law Enforcement Health and Wellness Working Group, February 27–May 13, 2020.

<sup>70</sup> Juday, email communications and discussions with Law Enforcement, February 27–May 13, 2020.

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- executive support for those who access mental health services
- how to manage the signs and symptoms of cumulative stress
- signs and symptoms of PTSD<sup>71</sup>
- how compassion fatigue is related to law enforcement encounters
- depression and suicide prevention
- how the position affects home life
- resiliency skills

### [BEGIN TEXT BOX]

The Las Vegas Metropolitan Police Department's Police Employee Assistance Program (PEAP) begins training recruits in the academy on how to self-assess and support themselves for stable mental and physical health throughout their careers. This training includes lectures on topics related to post-shooting trauma, death, and grief. Additionally, PEAP staff teach the recruits how to mitigate lasting trauma and the physical impacts from job stress.

### [END TEXT BOX]

#### **4.2.3 Law enforcement agencies should have a wellness function attached to executive management, separate from human resources, and whose commander reports directly to the agency's executive.**

A wellness function provides staff with a central place to find resources and seek assistance. The exact staffing of the unit and physical location should depend on the size of the agency and other factors; sworn and civilian employees should have easy access to the unit and its services.

Chief Michael Kehoe (Ret.) of the Newtown Police Department, CT, stressed the importance of starting early with integrating and educating officer's family members on wellness: "They are the ones who know the officer best. The family will be the first to notice when things aren't right."<sup>72</sup>

Agency executives can use opportunities like swearing-in ceremonies, recruit graduations, or awards presentations to engage family members and enlighten them on the importance employee health, wellness, and safety.<sup>73</sup>

#### **4.2.4 Law enforcement agencies should ensure that mental health resources and services are easily accessible, cost effective, and confidential.**

Resources that are easily accessible help to improve use. Agencies increase awareness and potential implementation when they use internal webpage, apps, and searchable tags to clearly message about and search for wellness services. In addition, staff may be more willing to locate resources if they do not have to engage an agency representative. Staff will also be more likely to use the services if they can confidentially seek mental health services related to a work-related experience while on duty without being required to share the details directly to their supervisor.

#### **4.2.5 Law enforcement agencies should establish policies that mandate an annual mental health check for all sworn law enforcement officers and relevant civilian staff. Similarly, mandatory mental health checks should be required after a critical incident or traumatic incident.**

This recommendation has been widely discussed within the field of law enforcement; however, it has yet to be implemented across all law enforcement agencies. Law enforcement officers and other criminal justice

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<sup>71</sup> Copple et al., *Law Enforcement Mental Health*.

<sup>72</sup> Michael Kehoe, Chief of Police (Retired), Newtown Police Department, CT, "Law Enforcement Health and Wellness and the Effects School Shootings/Mass Shootings Have on Officers" (presentation, Law Enforcement Health and Wellness Working Group, April 7, 2020).

<sup>73</sup> Kehoe, "Law Enforcement Health," April 7, 2020.

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personnel (e.g., prosecutors, civilian investigators, forensic examiners, dispatchers, evidence collection specialists, and victim witness staff) are regularly exposed to traumatic situations that negatively affect their resiliency. A mental health check is a narrowly defined non-diagnostic meeting that is conducted on agency time with a designated agency wellness representative (i.e., peer support officer) or mental health clinician. This type of mental health check should be used to inform law enforcement officers and other relevant criminal justice professionals about available wellness resources. The mental health check should also educate the officer about signs of and risk factors associated with psychological distress or impairment.

An annual mental health check is not a fitness-for-duty evaluation; it should remain mutually exclusive and separate. A person who has conducted the fitness-for-duty evaluation of a specific employee should not conduct annual mental health checks for the agency of that employee.<sup>74</sup> Additionally, there should be clearly defined policies related to what the annual mental health check involves and the responsibilities of those who conduct them.

### **4.2.6 States should provide funding for peer support training and set certification standards for peer support members and training.**

Law enforcement agencies widely use peer-led critical incident stress debriefing after traumatic incidents; however, peer support training is not standard. As noted by Corey Nooner, Master Sergeant of the Oklahoma City Police Department, Oklahoma, "Deployment of trained peer support is an unmatched resource for law enforcement."<sup>75</sup> Standardizing this training through a curriculum and certification process will help peer support members understand their responsibilities and limitations.

### **4.2.7 Congress should initiate legislation that protects the authority or commission that an officer has when they request assistance for mental health issues.**

Based on self-reports of law enforcement personnel, staff do not seek mental health services because they fear losing their jobs, and therefore their ability to provide for themselves and their families. Legislation that protects law enforcement officers who asks for mental health assistance will provide more security and improve the use of mental health services. The legislation should ensure that a law enforcement officer's request for assistance will not be used as the sole basis for the removal of the officer's authority. This legislation would not eliminate the consequences of conviction for a criminal act and would not apply to those who are a danger to self and others.

### **4.2.8 Congress, in partnership with the Department of Justice, should strengthen Health Insurance Portability and Accountability Act provisions regarding medical records and treatment notes of first responders.**

Law enforcement officers have encountered situations where treatment notes have been provided to agency representatives because the agency is paying for the treatment of the officer. A provision is needed in Health Insurance Portability and Accountability Act (HIPPA) that clarifies that treatment notes are confidential regardless of who pays for the treatment.

### **4.2.9 Congress should provide funding to organizations that provide intensive post-critical incident programs.<sup>76</sup>**

Intensive post-critical incident programs are a combination of psychoeducational information, group debriefings, Eye Movement Desensitization and Reprocessing (EMDR) therapy, or other evidence-based

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<sup>74</sup> Tom Coghlan, Owner, Blue Line Psychological Services, email communication with Corey Nooner, Master Sergeant, Oklahoma City Police Department, OK, April 6, 2020.

<sup>75</sup> Nooner, *President's Commission on Law*, February 27, 2020.

<sup>76</sup> "Crisis Intervention Team (CIT) Programs," National Alliance on Mental Illness, accessed July 8, 2020, [https://nami.org/Advocacy/Crisis-Intervention/Crisis-Intervention-Team-\(CIT\)-Programs](https://nami.org/Advocacy/Crisis-Intervention/Crisis-Intervention-Team-(CIT)-Programs).

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therapies that promote self-regulation skills, and peer support.<sup>77</sup> This training will increase resilience and recovery of first responders who are exposed to trauma.

These programs are led by licensed psychologists, a team of qualified licensed mental health professionals, and highly trained peer support professionals who have also served in the line of duty. The Emergency Responders Assistance Program and the Law Enforcement Assistance Program both provide multiple-day intensive seminars for emergency responders and their significant others. Dr. Robbie Adler-Tapia (National Register Health Psychologist) suggests multiple sessions for officers suffering from PTSD.<sup>78</sup> These sessions should include training in stress management, understanding the impact of exposure to trauma, resiliency, and the prevention of debilitating mental health consequences of critical events, including suicide and substance use.

### **4.2.10 The Department of Homeland Security should develop a wellness unit within the Incident Command System.**

#### **[CROSS-REFERENCE HOMELAND SECURITY]**

This unit should allow the commander of a critical incident to immediately organize wellness resources for responders who were involved in the incident. The unit should also support follow-up care and continuous coordination after the crisis.<sup>79</sup>

The Department of Homeland Security developed a standardized approach to incident management known as the National Incident Management System (NIMS). The NIMS is designed to coordinate response to a critical incident. A subpart of NIMS is the Incident Command System (ICS), which provides a standard response and operation procedures for critical incidents.<sup>80</sup>

Currently, ICS does not specifically consider the wellness of the personnel involved in the incident. Including a specific unit within the ICS will ensure that scene commanders seek out the wellness resources available and provide a location for them to be accessed. This change will highlight that the wellness of responders is a priority and should be addressed at significant incidents.<sup>81</sup> It will also ensure that wellness is considered regardless of who is responding, which could include multiple agencies from across the region or county.

### **4.2.11 Congress should establish and fund a national law enforcement crisis hotline.**

Currently, there is no national hotline to specifically assist public safety officers in crisis. The national crisis support lines that are available to the public are perceived to be not well equipped to effectively respond to those performing public safety duties. If an officer finally calls a hotline and gets the “wrong” person on the other end of the line, they will likely never call again. Additionally, if an individual perceives that the hotline is not equipped to assist law enforcement, an individual in crisis may not attempt to access the service. A national hotline for public safety officers that is well marketed, has specifically skilled mental health professionals, and can direct the caller to locally specific resources will have an impact on an individual’s willingness to access the hotline. Confidentiality and text messaging capabilities are also critical components of a national hotline, particularly for those who are emotional with limited speaking ability.

The commission affirms that while “the efficacy of crisis hotlines in preventing suicides has not yet been

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<sup>77</sup> Bessel van der Kolk, *The Body Keeps the Score* (New York: Penguin Random House, 2015), <https://www.penguinrandomhouse.com/books/313183/the-body-keeps-the-score-by-bessel-van-der-kolk-md/>.

<sup>78</sup> Jim Walsh, “Police officers seek help for job trauma,” *The Republic*, August 28, 2015, <https://www.azcentral.com/story/news/local/phoenix/2015/08/28/arizona-police-officers-helping-combat-stigma-ptsd/71292594/>.

<sup>79</sup> *President’s Commission on Law Enforcement and the Administration of Justice: Hearing on Law Enforcement Health and Wellness* (February 27, 2020) (written statement of Doug Fuchs, Chief of Police (Retired), Redding Police Department, CT), <https://www.justice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>80</sup> Fuchs, *President’s Commission on Law*, February 27, 2020.

<sup>81</sup> Fuchs, *President’s Commission on Law*, February 27, 2020.

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empirically proven for the general population,”<sup>82</sup> crisis lines are an important tool for helping law enforcement officer’s mental health and addressing suicide.

### **4.2.12 Congress should amend the definition of “injury” in the Federal Employees’ Compensation Act to include post-traumatic stress disorder and other mental health issues incurred by employees in the performance of public safety duties.**

The Office of Workers Compensation Programs (OWCP) manages workers compensation programs for injuries and occupational diseases that occur in federal employment. The Federal Employees Compensation Act (FECA)

- minimizes the human, social, and financial impacts
- improves delivery of services to injured workers
- oversees distribution of funding and benefits<sup>83</sup>

Some research shows that a police officer will experience more traumatic events in six months than the average person will experience in a lifetime.<sup>84</sup> Similarly, federal employees performing law enforcement and other public safety duties are also exposed to danger and trauma, yet PTSD is not a covered injury in the FECA OWCP coverage. The federal government and its workers compensation programs should ensure that FECA rules clearly account for PTSD or other similar diagnoses and provide proper guidance to federal employees and agencies to address mental health needs.<sup>85</sup>

### **4.2.13 The Equal Employment Opportunity Committee should conduct a study that examines law enforcement officers’ reasonable accommodation requests under the American with Disabilities Act, specifically related to post-traumatic stress disorders and other mental health issues. This study should provide clear guidance to law enforcement officers and law enforcement agencies on reasonable accommodation.**

Law enforcement agency personnel need clear guidance on making requests for reasonable accommodation, and agencies need clear guidance in granting these reasonable accommodations.<sup>86</sup>

## **4.3 Law Enforcement Safety**

### **Background**

**PULL QUOTE:** “Every day, law enforcement officers serve this nation with distinction by protecting all of us from harm. . . . That protection, however, comes at great risk to the men and women who courageously don the uniform and wear the badge.”<sup>87</sup>

The murder of a police officer in the line of duty is an assault on the entire community. Policing continues to be an inherently dangerous profession, but a number of innovations have improved officer safety. In fact, Dr. Alexander Eastman (Chief Medical Officer of the Dallas Police Department) notes, “preventable deaths from

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<sup>82</sup> Deborah L. Spence et al., *Law Enforcement Mental Health and Wellness Act: Report to Congress* (Washington, DC: U.S. Department of Justice, 2019), 19, <https://cops.usdoj.gov/RIC/Publications/cops-p370-pub.pdf>.

<sup>83</sup> “Office of Workers’ Compensation Programs (OWCP),” U.S. Department of Labor, accessed July 8, 2020, <https://www.dol.gov/owcp/owcpmisvisgols.htm>.

<sup>84</sup> Tara Hartley et al., “PTSD Symptoms Among Police Officers: Associations with Frequency, Recency, and Types of Traumatic Events,” Abstract, *International Journal of Emergency Mental Health* 15, no.4 (2013), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4734407/>.

<sup>85</sup> *House Committee on the Judiciary, Oversight Hearing on Policing Practicing* (September 19, 2019) (written statement of Patrick Yoes, National President, Fraternal Order of Police), <https://fop.net/CmsDocument/Doc/Yoes%20testimony%2019%20Sept.pdf>.

<sup>86</sup> Yoes, *House Committee on the Judiciary*, September 19, 2019.

<sup>87</sup> Office of Public Affairs, “Department of Justice Releases Report on the Ambush of Police Officers,” U.S. Department of Justice, October 27, 2015, <https://www.justice.gov/opa/pr/departement-justice-releases-report-ambush-police-officers>.

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unchecked bleeding in our communities continue to fall based on law enforcement hemorrhage control programs.”<sup>88</sup> Law enforcement agencies and their families should continue to stress the importance of using ballistic vests to protect officers.

Law enforcement officers should wear lifesaving seatbelts just as they would ballistic vests. Traffic incidents have remained a significant source of law enforcement line-of-duty deaths over the past decade.<sup>89</sup> Curriculum, such as the National Law Enforcement Traffic Safety Program provides state, local, and tribal law enforcement training on a variety of traffic safety issues. This training will help law enforcement agencies enhance their safety measures by providing technical assistance on policies, procedures, and future training, and it will provide law enforcement the informational resources necessary to improve traffic safety awareness.<sup>90</sup>

As evidenced during the COVID-19 pandemic, law enforcement agencies are also exposed to significant health risks, as their interactions with the community are not limited in times of a health crisis. Protection and preparation against pandemics and exposure to illicit narcotics (e.g., fentanyl) is a concern for law enforcement officers. Law enforcement officers should continue to educate themselves concerning these topics, and they should also receive the proper protective equipment.

### Current State of the Issue

The National Law Enforcement Officers Memorial Fund (NLEOMF) reports that law enforcement line-of-duty deaths increased by 12 percent from 2017 to 2018.<sup>91</sup> A total of 145 federal, state, and local law enforcement officers died in the line-of-duty in 2018, up from 129 officers in 2017. In 2018

- firearms-related fatalities were the leading cause of officer deaths, with 53 officers shot and killed (up 15 percent from 2017)
- 50 officers were killed in traffic-related incidents (up 9 percent from 2017)
- 42 officers died from other causes (up 14 percent from 2017)<sup>92</sup>

### Targets of Violence

**PULL QUOTE:** "Too often, the badge and the shield have become targets and too many officers are paying the ultimate price for nothing more than the uniform they wear."<sup>93</sup> - Patrick Yoes, President of the Fraternal Order of Police

An officer not wearing their ballistic vest is 14 times more likely to suffer a fatal injury than an officer who is.<sup>94</sup> In 2019, 293 officers were shot in the line of duty, 50 of whom were killed. Thirty officers were shot in an ambush attack, and seven of those officers were killed.<sup>95</sup>

Enacting federal legislation that would make the targeting of a law enforcement officer with violence in

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<sup>88</sup> *President's Commission on Law Enforcement and the Administration of Justice: Hearing on Law Enforcement Health and Wellness* (February 27, 2020) (written statement of Dr. Alexander Eastman, Chief Medical Officer, Dallas Police Department, TX), <https://www.justice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>89</sup> Nick Breul and Desiree Luongo, *Making It Safer: A Study of Law Enforcement Fatalities Between 2010–2016* (Washington, DC: Office of Community Oriented Policing Services, 2017), <https://cops.usdoj.gov/RIC/Publications/cops-w0858-pub.pdf>.

<sup>90</sup> "National Officer Safety Initiatives," Bureau of Justice Assistance, accessed July 8, 2020, <https://bjia.ojp.gov/program/national-officer-safety-initiatives/overview>.

<sup>91</sup> Bureau of Justice Assistance, "National Officer Safety Initiatives."

<sup>92</sup> Bureau of Justice Assistance, "National Officer Safety Initiatives."

<sup>93</sup> *President's Commission on Law Enforcement and the Administration of Justice: Hearing on Law Enforcement Health and Wellness* (February 27, 2020) (written statement of Patrick Yoes, President, Fraternal Order of Police), <https://www.justice.gov/ag/presidential-commission-law-enforcement-and-administration-justice/hearings>.

<sup>94</sup> Dan Tompkins, "Body Armor Safety Initiative: To Protect and Serve . . . Better," *NIJ Journal*, no. 254 (2006), <https://nij.ojp.gov/library/publications/body-armor-safety-initiative-protect-and-serve-better>.

<sup>95</sup> Yoes, *President's Commission on Law*, February 27, 2020.

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certain circumstances a crime would help protect law enforcement.<sup>96</sup>

### First Responder and Combat Medical Care

The events of 9/11, increasing active shooter incidents, and targeted attacks on police officers have changed the world of law enforcement. Unique tactical law enforcement training has been implemented in response to these high-profile events. Because these scenes are deemed highly unsafe due to the possibility of other shooters or secondary devices, emergency medical services (EMS) may not be able to safely respond to provide care. As such, law enforcement may be the only resource to provide initial life-saving medical care to victims of these types of mass casualty situations. Law enforcement officers need every possible tool for their protection and safety so they are equipped to provide immediate self-care or have a partner provide care.

### Vehicle Safety

Typically, motor vehicle-related incidents are the leading cause of death for law enforcement officers. From 2005 to 2017, 30 percent of 1,512 officers who died in the line of duty died as a result of vehicle-related crashes, while 9 percent were struck by a vehicle.<sup>97</sup>

### **[CREATE FIGURE]**

**PULL QUOTE:** “In the last 10 years, on average, more than one officer per week has been killed on our nation’s roads (2006-2016 = 64 deaths per year).”<sup>98</sup>

Wearing seatbelts prevents injuries and vehicular deaths. In a major study conducted by National Highway Traffic Safety Administration, for those cases where seatbelt status was known, only slightly more officers wore seatbelts compared to those who did not.<sup>99</sup> Additionally, distraction-free driving should be a standard for each officer to follow on duty.

### **[CREATE GRAPH]**

733 crashes between 1980 and 2008 in which police officers were killed on duty in a patrol car. In 45 percent of the crashes, officers were wearing seat belts, slightly more than the 42 percent who were not.<sup>100</sup>

### **[END GRAPH]**

### Narcan/Naloxone Provision

In response to the current opioid epidemic, it is critical to prevent occupational exposure of fentanyl to law enforcement officers. Fentanyl is a powerful synthetic drug similar to, yet much more potent than morphine and heroin. Law enforcement personnel have a high risk of coming in contact with the drug unknowingly from its many forms. Exposure can be quick and lethal, and many researchers have suggested ways law enforcement officers can mitigate risk, such as using drug testing strips.<sup>101</sup> Although the components of illicit drug mixtures might not be known at the time, law enforcement officers must learn about safe operating procedures and proper use of personal protective equipment (PPE) when responding to incidents that may involve illicit drugs.

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<sup>96</sup> Yoes, *President’s Commission on Law*, February 27, 2020.

<sup>97</sup> “Causes of Law Enforcement Deaths,” National Law Enforcement Officers Memorial Fund, accessed May 22, 2020, <https://nleomf.org/facts-figures/causes-of-law-enforcement-deaths>.

<sup>98</sup> “Law Enforcement Officer Motor Vehicle Safety,” National Institute for Occupational Safety and Health, December 5, 2019, <https://www.cdc.gov/niosh/topics/leo/default.html>.

<sup>99</sup> Eun Young Noh, “Characteristics of Law Enforcement Officers’ Fatalities in Motor Crashes,” National Highway Traffic Safety Administration, January 2011, <https://crashstats.nhtsa.dot.gov/Api/Public/ViewPublication/811411>.

<sup>100</sup> Noh, “Characteristics of Law Enforcement Officers.”

<sup>101</sup> Sean E. Goodison et al., *Law Enforcement Efforts to Fight the Opioid Crisis: Convening Police Leaders, Multidisciplinary Partners, and Researchers to Identify Promising Practices and to Inform a Research Agenda* (Santa Monica, CA: RAND, 2019), [https://www.rand.org/pubs/research\\_reports/RR3064.html](https://www.rand.org/pubs/research_reports/RR3064.html).

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### Protective Gear and Equipment

Because law enforcement agencies not only maintain public order, but also assist public health care providers in their efforts to seek compliance with related health orders, law enforcement officers are three times more likely to be injured on the job.<sup>102</sup> They should take precautions to mitigate this risk. All law enforcement personnel should have PPE for the protection of the community, their families, and colleagues. In addition to masks, face shields, and other PPE, law enforcement should have priority access to health screening tools like testing, particularly to prevent the spread of asymptomatic infectious diseases and for prompt treatment to ensure the adequate levels of workforce availability.

During health- and non-health-related catastrophic events, law enforcement agencies experience significant challenges to regular administrative activities, such as patrol and shift assignments, training protocols, and use of leave. Correctional officers and sheriff deputies that work in jails and prisons are on the front lines of health-related incidents. Facilities or institutions such as jails and prisons present an even greater risk.

Tyler Winkelman, a doctor and researcher for the University of Minnesota who works in both the Hennepin County jail and local homeless shelters, notes, “There is a lot of overlap between jailed and homeless populations. Someone released from a jail, then, could infect people in a homeless shelter, or vice versa, causing an outbreak that could bounce back and forth between both places, infecting far more people than would be in a jail or homeless shelter alone.”<sup>103</sup> The Washington (State) Association of Sheriffs and Police Chiefs recently implemented an emergency plan for COVID-19 that included multiple components for managing the disease within the community, for staff, and for detainees.<sup>104</sup>

**PULL QUOTE:** “As the full scope of the crisis of COVID-19 in American correctional facilities has come into focus, it is important to recognize the critical role police play as gatekeepers to the rest of the system.”<sup>105</sup> - Leah Pope (Senior Research Fellow) and Aaron Stagoff-Belfort (Program Coordinator) (both of the Vera Institute of Justice)

#### **4.3.1 The Department of Justice should further implement a national, comprehensive database for law enforcement officer injuries and treatment. The data should be analyzed and released in a timely manner.**

While there has been considerable progress in revising the Law Enforcement Officers Killed and Assaulted (LEOKA) data set, it is still lacking specific medical information that would be required to study this topic appropriately. For law enforcement to make meaningful improvements based on the science of law enforcement injuries, there must be further solutions to capture comprehensive law enforcement injury-based data.<sup>106</sup> Finally, to make training and procedural improvements that save lives and prevent injuries, incidents and data need to be analyzed and assessed at the national level in a timely manner.

#### **4.3.2 Law enforcement agencies should join the National Blue Alert network.**

The National Blue Alert network is a program run by DOJ that gives law enforcement, the media, and the public an expanded early warning of threats against law enforcement officers, helps apprehend suspects who have killed or seriously injured an officer, and provides critical information when an officer is missing in the line of duty. Like AMBER Alerts, which are designed to speed actionable information about missing children to the public, Blue Alerts provide details about possible assailants, including physical descriptions, vehicle

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<sup>102</sup> Hope M. Tiesman et al., “Nonfatal Injuries to Law Enforcement Officers: A Rise in Assaults,” *American Journal of Preventive Medicine* 54, no. 4 (2018), <https://www.ncbi.nlm.nih.gov/pubmed/29395571>.

<sup>103</sup> German Lopez, “A Coronavirus Outbreak in Jails or Prisons Could Turn into a Nightmare,” *Vox*, March 17, 2020, <https://www.vox.com/policy-and-politics/2020/3/17/21181515/coronavirus-covid-19-jails-prisons-mass-incarceration>.

<sup>104</sup> “Washington Association of Sheriffs and Police Chiefs,” Washington Association of Sheriffs and Police Chiefs, accessed May 22, 2020, <https://www.waspc.org/>.

<sup>105</sup> Leah Pope and Aaron Stagoff-Belfort, “Public Health and Public Safety: The Critical Role of Police During the COVID-19 Crisis,” Vera Institute of Justice, April 30, 2020, <https://www.vera.org/blog/covid-19-1/public-health-and-public-safety-the-critical-role-of-police-during-the-covid-19-crisis>.

<sup>106</sup> Eastman, *President’s Commission on Law*, February 27, 2020.

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information, and other identifying characteristics. According to the COPS Office, 36 states currently participate in the National Blue Alert Network.<sup>107</sup> Expanding this program to all 50 states would further protect the lives of law enforcement.

### **4.3.3 Law enforcement agencies should eliminate the regular use of law enforcement vehicles to conduct the secondary transportation of mental health patients.**

In some jurisdictions, local law enforcement officers and vehicles are used to conduct the secondary transportation of mental health patients. These transports are done solely for the purpose of moving the patient to available bed space. There are no criminal charges placed on these individuals. During these transports, restraints are commonly used because of agency policy and procedure, which can have a devastating effect on the mental health client. Additionally, this responsibility consumes time and resources for the agency assigned the task. This loss of resources can affect response times for law enforcement calls for service and restrict an agencies' ability to respond proactively within its jurisdiction. Eliminating the regular use of law enforcement vehicles to conduct secondary transportations of mental health patients will improve patient experience and treatment and allow law enforcement to focus on their duties.

This recommendation is not intended to place an increased demand on the ambulance service used by a particular jurisdiction or service area. This type of transport does not require the high-level of care offered by ambulance transportation. Low-profile secure transport vehicles can easily handle these types of transports. Individuals who are specifically trained in mental illness and de-escalation should staff these vehicles.

### **4.3.4 Congress should create a working group within the Department of Justice to review and establish a National Law Enforcement Safety Board that investigates line-of-duty deaths. This board should effectively promote a higher level of safety in law enforcement.**

Law enforcement agencies are required to report felonious and accidental killings and assaults upon law enforcement officers in the line of duty as part of the FBI's Uniform Crime Reporting (UCR) program data. Additionally, other organizations review and report statistics for line-of-duty death incidents; however, there is no single entity that conducts thorough, accurate, and independent investigations and produces timely, well-considered recommendations to enhance law enforcement safety. A National Law Enforcement Safety Board, similar to the National Transportation Safety Board, would improve officer safety. A working group should help Congress sort through important considerations and nuances of efficacy.

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<sup>107</sup> Shanetta Cutlar, Senior Counsel, and Vince E. Davenport, Supervisory Senior Policy Analyst, Office of Community Oriented Policing Services, email communication with Matthew Varisco, Federal Program Manager, Law Enforcement Health and Wellness Working Group, April 13, 2020.