



Mental Health Training and Intervention: A Critical Component of Police Reform

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The vast majority of individuals will experience a traumatic event in their lifetime (89.7%; Kilpatrick et al., 2013), with multiple exposures the rule rather than the exception. Despite the high rate of exposure, only 8.3% of trauma-exposed individuals in the general population will go on to develop posttraumatic stress disorder (PTSD) (Kilpatrick et al., 2013). For individuals employed as first responders, the rate of lifetime trauma exposure is much greater. For instance, Patterson (2001) found that, on average, police officers experience more than three traumatic events for every six months of service. Similarly, Hartley et al. (2013) found that most police officers experience multiple types of traumas within a 12-month period. It is therefore unsurprising that research has shown police officers to be at enhanced risk of PTSD and suicide compared to the general population (Berger et al., 2012).

Research on the prevalence of conditions such as PTSD and depression in law enforcement has been varied, with estimates ranging from 7 to 19% (Yuan et al., 2011) up to 35% (Ruderman Family Foundation, 2018). However, these values fail to capture the extent of mental health symptoms during a period of relative crisis for law enforcement. In 2020, law enforcement have experienced a dramatic shift in public perception; namely, law enforcement were generally celebrated as essential workers risking their lives for the public during the first wave of COVID-19 and now targeted as brutalizers and murderers following the death of George Floyd. Law enforcement officers are verbally and physically targeted when responding to calls made by the public to protect them. Officers' every move is now recorded on cell phones or body cameras, often while being baited to respond through verbal taunts and threats. Police departments are seeing a dramatic increase in retirement filings, as officers who are able to leave the profession are now exiting in droves, leaving more work for fewer officers. Between being

understaffed, confronting COVID-19, responding to ongoing riots, looting and attacks, and working amidst public discourse that treats all officers as murderers, the mental health of officers is suffering.

Law Enforcement Sample

To investigate the current state of mental health among law enforcement officers, a brief online survey using well-validated and normed measures of stress and mental health¹ was distributed across the country and left open for two weeks in August of 2020. In total, 1,355 active duty law enforcement officers from across the United States participated. Among the sample, 84% identified as male with an average of 16 years of service (ranging from 0 to 50 years of service). In regard to racial composition of the sample, 85% identified as white, 4% identified as black, 2% identified as biracial, 4% identified as “other,” and 5% declined to report their race. A total of 7% identified as Hispanic or Latino/a. In regard to setting of the officers’ department, 44% reported working in an urban setting, 42% in a suburban setting, and 14% in a rural setting. Veterans of the Armed Services comprised 21% of the sample.

Law Enforcement Mental Health 2020

The following is a brief summary of the results related to current mental health functioning among active duty officers across the country. The measures assess mental health symptoms experienced in the past month.

- 47% of the sample screen positive for PTSD using the Primary Care PTSD Screen for DSM-5, a measure developed at the National Center for PTSD. This is **9 to 10 times greater** than the prevalence of PTSD in the general population.

¹ Primary Care PTSD Screen for DSM-5 (PC-PTSD-5); Depression, Anxiety, and Stress Scale (DASS-21)

- 29% of the sample are in the moderate to very severe range of anxiety. This is approximately **2 times greater** than seen in the general population.
- 37% of the sample are in the moderate to very severe range of depression. This is approximately **5 times greater** than seen in the general population.

Impact of Events on Job Perceptions and Productivity

Duty-related stress and poor mental health can have a significant impact on work productivity and job perceptions. To assess for these factors, questions regarding duty-related work performance and perceptions of work within law enforcement were included. Results showed the following:

- 63% of the sample reported that recent events have impacted their work productivity on a daily or weekly basis.
- 59% of the sample reported feeling trapped or hopeless about their job in law enforcement on a daily or weekly basis.
- 55% of the sample reported that they consider quitting their job in law enforcement on a daily or weekly basis.
- 69% of the sample stated that they would be somewhat or very unlikely to recommend a job in law enforcement as a career choice. Only 16% reported that they would be somewhat or very likely to recommend a job in law enforcement.
- 38% of the sample reported that their department does not provide adequate mental health services, with an additional 8% indicating that they would prefer not to respond.

Officers at Greatest Risk for Adverse Outcomes

Statistical analyses were performed to investigate whether subsets of the sample were at enhanced risk for mental health symptoms. Several analyses failed to achieve statistical significance. For instance, no statistical differences in symptoms of PTSD, depression, anxiety, or stress were observed as a function of veteran status or as a function of setting (i.e., suburban, urban, or rural). Further, because a large majority of the sample was White, and there was a small number of respondents in each of the remaining racial categories (e.g., only 52 officers identified as Black, which was the second largest racial group), comparisons across racial and ethnic groups were not completed. However, the following factors were significantly associated with greater risk for mental health symptoms.

- When grouped by years of service, officers with 5-10 years of service are at greatest risk for PTSD and depression when compared to officers with 0 – 4 years, 11 – 20 years, or 20+ years. Notably, officers with less than five years are seemingly buffered from stress, as their scores are statistically lower than all other groups.
- Officers who consider quitting their job “always” or “often” report significantly greater symptoms of stress, depression, anxiety, and PTSD.
- Feeling trapped or hopeless about the job is significantly associated with symptoms of stress, depression, anxiety, and PTSD.
- Consistent with gender disparities found in the general population, female officers reported levels of PTSD and anxiety that were statistically higher than male officers.

Barriers to Seeking Assistance

Though many agencies have improved access to mental health services for their officers, there remain barriers to seeking assistance in the law enforcement community. To assess for barriers, officers in the study were asked to rank order factors that would prevent them from seeking the assistance of peers or a mental health counselor. The leading barrier to seeking

assistance among the sample was fear of stigma (i.e., seeking help affects your reputation if others find out), which was identified as the number one barrier by 31% of the sample. A belief that seeking assistance is a sign of personal weakness was endorsed as the second-leading barrier, and was selected as the top barrier for 22% of the sample. Following this, a number of agency-related factors were identified as barriers. Specifically, 28% reported that job loss or department repercussions (i.e., information being used against the officer for promotion or transfer) was the primary barrier to seeking assistance. Lack of good available services in the community was also endorsed among officers, but was reported as a top barrier by only 5% of the sample. Notably, only 10% of the sample reported that they do not believe officers are reluctant to seek assistance.

Why the Increased Suffering?

The events of 2020 have created a unique and complex landscape for law enforcement to navigate. Several key factors are likely large contributors to the high rate of mental health symptomatology reported here.

Risk for verbal and/or physical assault. Officers in many areas have been injured or even killed as a result of the rioting and looting seen in 2020. Research has long shown that trauma has a cumulative effect on mental health. That is, as trauma exposure increases, the risk for adverse mental health increases (Kilpatrick et al., 2013). It is possible that the heightened levels of mental health symptoms are a direct result of the ongoing violence seen across the nation, as well as the threat of violence to officers that has increased across the year.

Betrayal. Trauma-focused research over the past few decades has identified betrayal as an emotion that is frequently implicated in trauma-based reactions. Betrayal is a complex emotion, as the individual experiencing betrayal must wrestle with the knowledge that a trusted

other has intentionally (or even unintentionally) harmed them. Individuals often cope with betrayal by using avoidance or suppression strategies, which save the individual from having to confront the pain of the betrayal, but represents an ineffective coping strategy long-term. While early research on betrayal in the context of trauma revealed that betrayal by loved ones (e.g., childhood maltreatment, partner violence) conferred particularly high risk for PTSD (Gamache Martin, Cromer, DePrince, & Freyd, 2013), more recent research has focused on the harm that can be caused by institutions that betray their constituents. When individuals feel betrayed by the institutions that they serve (i.e., their department, the community), they are at heightened risk for PTSD, suicide, and depression (Smith & Freyd, 2014). In a time of community discourse that paints all officers as killers while also calling 9-1-1 in an emergency, a sense of betrayal can be easily summoned. This is especially true on the heels of COVID-19 when officers went from being celebrated to denigrated seemingly over night. Officers may also fear betrayal by their departments if their actions become politicized. Further, ongoing discussion regarding police reform and defunding may lead to policies that leave officers vulnerable and unprotected.

Moral injury. Moral injury is “perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations [which] may be deleterious in the long term, emotionally, psychologically, behaviorally, spiritually, and socially” (Litz et al., 2009, p. 695). Among officers, there may be a high level of guilt and shame associated with a failure to prevent violence or suffering within their community, within their profession, or at the hands of their profession. In an age of body cameras and cell phones, officers may have become hesitant to act on the job. This hesitation may feel like a failure that runs counter to a deeply held commitment to serve and protect their communities. This comes at a significant psychological

cost, as moral injury has been consistently connected to risk for PTSD, depression, and suicide (Williamson, Stevelink, & Greenberg, 2018).

Identity threat. A person's sense of who they are based on the groups to which they belong is called social identity. Social psychologists have long demonstrated that individuals derive a sense of pride and self-esteem by affiliating with the groups to which they belong (Tajfel, 1979). Social identity threat occurs when there is public scrutiny and/or negativity directed at the groups to which an individual belongs (Tajfel & Turner, 1986). For law enforcement in the present day, social identity threat is a clear and present danger as public discourse surrounding police officers is that they are, as a collective, killers, brutalizers, and bastards². Research demonstrates that social identity threat is linked to health and well-being, including poorer mental health (depression and anxiety) and physical health (Haslam, Jetten, Postmes, & Haslam, 2009), and impacts responses to trauma (Muldoon et al., 2019).

Implications for the Workforce

As officers retire from law enforcement and positions remain unfilled due to negative public perceptions of police officers, greater workload is placed on fewer employees. This enhances stress and decreases job satisfaction, as fewer officers will likely mean an increase in mandatory overtime and extended work hours. This is particularly concerning when the remaining workforce is psychologically taxed, as there is a significant association between mental health and work absenteeism (Dewa, Loong, & Bonato, 2014).

Perhaps the most concerning result is the extent to which officers report feeling trapped and hopeless in their job. As noted, 59% of the sample reported feeling trapped or hopeless about their job in law enforcement on a daily or weekly basis. Hopelessness is a leading predictor of

² Recently, one brewery printed ACAB on the bottom of their cans to say "All Cops Are Bastards."

suicide risk (Ribeiro, Huang, Fox, & Franklin, 2018), particularly among police officers (Violanti et al., 2016), which may be especially salient for officers who are far enough in their career to feel financially and/or personally obligated to remain in the profession, but are far from retirement. This may be why officers in the current study who were 5 to 10 years into their job reported the most significant suffering in regard to PTSD and depression. Suicide is already an epidemic among law enforcement (O'Hara, Violanti, Levenson, & Clark, 2013; Violanti, Robinson, & Shen, 2014), and we can very reasonably predict that this rate will rise significantly in the immediate future. All of the evidence is present to suggest that this is an industry that may experience even more catastrophic losses to suicide than have been seen historically. Further, the current study found that the largest barriers to seeking assistance were stigma and beliefs that seeking assistance is a sign of personal weakness. These results are equally concerning, suggesting that without a robust, proactive approach to changing police culture in regard to access and perceptions of mental health, the industry is in significant trouble.

Implications for Work-Related Performance

The results of the current study are extremely concerning, as it suggests a high level of suffering for law enforcement, their families, and their communities. The results are also extremely concerning from a public health perspective, as the mental suffering seen among officers has direct implications for their job performance. For instance, PTSD and depression increase the probability that public safety personnel will experience difficulties in sleep and concentration (American Psychiatric Association, 2013), both of which impair work performance. Indeed, poor sleep and concentration are symptoms of PTSD, anxiety, and depression. Increasingly, sleep quality has been connected to most cognitive and emotional outcomes (Beattie, Kyle, Espie, & Biello, 2015; Lim & Dingnes, 2010); that is, without adequate

sleep we cannot expect officers to be maximally effective in their job. This is already complicated by a 24/7 industry that is under-staffed during COVID-19 and a period of extreme civil unrest. As a result, we can anticipate more mistakes and more emotion-driven responding. In addition, PTSD, depression, and anxiety have all been linked to enhanced risk for substance abuse (Ross & Peselow, 2012), as well as impairments in memory, problem-solving, decision-making, and learning (Brewin, 2011; Levy-Gigi et al., 2012, Polak, Witteveen, Reitsma, & Olf, 2012; Scott et al., 2015), all of which are imperative in effective performance among law enforcement officers. Finally, in the case of PTSD, sufferers experience hypervigilance and heightened physiological arousal, both of which can lead to overestimation of threat in the environment (Naim et al., 2015). Said differently, officers who are suffering from mental health symptoms may be likely to perceive situations as more threatening than is warranted. When combined with sleep deprivation and high levels of stress, the decision-making that occurs in such contexts may be negatively affected and/or potentially more severe than is necessary.

Conclusions

There is a complex and tragic crisis happening in the United States. Conversations regarding police reform and defunding are occurring across the country. Prior to the year 2020, the mental health and risk for suicide among law enforcement officers was already a source of significant concern. In a societal context marked by betrayal, social identity threat, and moral injury, it is perhaps unsurprising to see that nearly one-half of officers screen positive for PTSD. Perhaps more troubling is the impact that poor mental health has on the workforce, and by extension, the general public. The call for mental health training and intervention for law enforcement as part of police reform could not be louder.

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