

## SLIDE 3.1 TITLE SLIDE

# PRIORITIZING OFFICER MENTAL HEALTH, WELLNESS, AND RESILIENCE

**Time:** 50 minutes

**Slides:** 18

**Purpose:** This module discusses topics related to officer mental health and wellness and provides training participants with strategies to support mental wellbeing throughout their career.

### **Instructor:**

This module should be taught by an officer with lived experience in overcoming challenges related to officer mental health and wellness. This could be an officer who is a peer or in a leadership role, depending on if the leader has demonstrated interest and guidance in this topic area or if it's preferred to have this content delivered by a fellow officer. If possible, it is recommended to invite a representative from an agency wellness program or a licensed mental health practitioner with expertise in police officer mental wellness, as a co-instructor.

If an agency has a police officer peer support program, invite a representative to speak at the conclusion of the module and review available services and resources. This will reinforce strategies and services to overcoming challenges.

### **Learning Objectives:**

Upon completing this module, participants should be able to:

1. Describe how stress manifests itself in the body and how it displays in oneself and peers;
2. Identify risk factors and recognize warning signs of officer suicide;
3. Identify and use strategies for building officer resilience; and
4. Access available officer mental health and wellness resources.

### **Activities:**

- **Video Activity:** "4 Police Officers, 4 Different Ways to Cope with Suicide and Mental Health" (5:15)  
<https://wusa9.com/embeds/video/65-83d252c1-2150-4927-a487-bd317e8dae8e/iframe?jwsourc=cl>.



### Additional Materials:

- Consider the Bureau of Justice Assistance's [VALOR Officer Safety and Wellness Initiative](#)  
The Officer Robert Wilson III Preventing Violence Against Law Enforcement Officers and Ensuring Officer Resilience and Survivability (VALOR) Initiative is an effort to improve the immediate and long-term safety, wellness, and resilience of our nation's law enforcement officers. Through a multifaceted approach that includes delivering no-cost training, conducting research, developing and providing resources, and establishing partnerships that benefit law enforcement officers, the VALOR Initiative seeks to provide law enforcement with innovative, useful, and valuable resources and skills.
- Prepare a handout of agency-specific and local resources for participants including confidential resources and crisis lines. Agencies may consider customizing an IACP resource, such as:
  - [IACP/BJA Enhancing Officer Wellness and Resiliency in Policing](#)
  - [IACP Employee Family and Wellness Guide](#)
- Note that there are multiple places during this module that reference the agency and local resources available to officers and the instructor should point these out along the way to reinforce help-seeking behavior.
- Connect participants to [www.theiacp.org/OSW](http://www.theiacp.org/OSW) which contains resources on topics ranging from officer mental health and resilience, suicide prevention, family wellness, and more.
- Highlight the following resources:
  - [IACP/BJA National Consortium on Preventing Law Enforcement Suicide Toolkit](#)
  - [IACP/BJA Enhancing Officer Wellness and Resiliency in Policing](#)
  - [IACP/BJA Mastering Work-Life Balance Poster](#)

### Key Message to the Trainer:

This module provides participants with information, strategies, and tools for improving officer mental health and resiliency. The trainer(s) are encouraged to use this material, which was developed by the IACP, in partnership with BJA, under its Law Enforcement Officer Safety and Wellness Initiatives, which includes the ***Law Enforcement Agency and Officer Resilience Training Program, National Consortium on Preventing Law Enforcement Suicide, and Innovative Approaches to Strengthening Officer Wellness Program*** as well as the Office for Victims of Crime's Vicarious Trauma Response Initiative.



**Module Overview**



- Impact of stress and trauma
- Preventing officer suicide
- Tips to promote self-awareness and awareness in colleagues and peers
- Strategies to build personal resilience
- Available services and resources to support mental health and wellness

2

## SLIDE 3.2 MODULE OVERVIEW



**Trainer Note:** Introduce the training module as one focused on the health and wellness of the participants in the room and the importance of health and wellness throughout an officer’s career. Over the course of the training week, participants will be learning and talking about difficult topics related to mental health and disabilities, trauma and post-traumatic stress, suicide, and other areas—all with the purpose of informing their responses to individuals in crisis in their community. However, it is equally important to discuss the mental health and wellness of law enforcement officers to ensure they are getting the support and services they need to be safe and effective in their work.

Good mental health is just as essential as good physical health for officers to keep communities safe from crime and violence. Explain to participants that taking care of their mental health and well-being can strengthen connections in their personal life and in their day-to-day encounters with members of the community.

Highlight each point on the slide as topics to be covered during the module.

Source: Deborah L. Spence, Melissa Fox, Gilbert C. Moore, Sarah Estill, and Nazmia E. A. Comrie, 2019, *Law Enforcement Mental Health and Wellness Act: Report to Congress*, Washington, DC: Department of Justice, Community Oriented Policing Services, retrieved from <https://cops.usdoj.gov/RIC/ric.php?page=detail&id=COPS-P370>.



### SLIDE 3.3

## VIDEO: FOUR POLICE OFFICERS, FOUR DIFFERENT WAYS TO COPE WITH SUICIDE AND MENTAL HEALTH



**Video Activity:** As an introduction to this module, play the video “4 Police Officers, 4 Different Ways to Cope with Suicide and Mental Health”:

<https://www.wusa9.com/video/news/investigations/4-police-officers-4-different-ways-to-cope-with-suicide-and-mental-health/65-83d252c1-2150-4927-a487-bd317e8dae8e?jwsourc=cl> (5:15)

This video is a 2019 news feature from WUSA TV in Washington, DC. It was developed in partnership with the International Association of Chiefs of Police and features four police officers who share their experiences with mental health conditions, suicide, and seeking help to support their health and wellness. This video highlights how the cumulative experiences of police officers can have significant effects on their mental health and wellness. It emphasizes the importance of prioritizing mental health in policing and asking for help when it is needed.



**Trainer Note:** Be sure to note that this video was produced in 2019 to provide context to the statistics reported within the clip. Following the video, reinforce with the participants that it’s okay to say, “I’m struggling,” and ask for help. Throughout this module, aim to normalize the idea of seeking help when help is needed.

Highlight the following points from the video:

1. The importance of asking for help—because help is available.
2. The value of sharing your personal experiences with others.
3. The benefits of seeking assistance through avenues such as peer support, police chaplains, or professional counseling.

**Realities of the Job**



- Police work is characterized by physical and psychological dangers
- Cumulative exposure can affect officers' mental well-being and physical health
- Experiences found to impact traumatic stress symptoms, substance use, depression, and suicidal ideation

## SLIDE 3.4 REALITIES OF THE JOB

**T N** **Trainer Note:** Discuss the realities of police work, using the points on the slide and the content note below to support this discussion. Acknowledge that most people join law enforcement because they have a deep desire to help others and make a positive impact in the community. However, from the moment officers enter the academy and up through retirement, they will experience many challenges including those related to stress and experiences with trauma.

Discuss research conducted by Dr. John Violanti and colleagues that demonstrates the high rate of illnesses among police officers when compared to the general population (see content note below).

Facing these risks, remind participants to:

- Check in regularly with those in your support system. Between the demands of work and personal obligations, it may become difficult at times to stay connected.
- Remember what drew you to the profession and what motivates you to selflessly serve your community every day.
- Review and use if needed, your agency's available Employee Assistance Program (EAP) and wellness resources.

Use this slide as another opportunity to normalize help-seeking. Explain that, while police professionals possess unique strengths that make them more resilient, it does not mean they do not need help at times. Explain that help-seeking is a method for staying strong and performing at their best.

**C N** **Content Note:** Officers routinely experience physical and psychological stressors on the job. In addition, they are responsible for responding to and addressing the



needs of crime victims—meaning officers are exposed to the traumatic experiences of other people—known as vicarious trauma.

*Vicarious trauma*, sometimes referred to as “secondary trauma” and “professional exposure to trauma,” is a result of continued exposure to victims of violence and trauma, as well as witnessing fear, pain, and terror that others have experienced. It is an inevitable occupational challenge for law enforcement as well as allied professionals in emergency medical services, fire services, victim services, and other professions.

The cumulative experiences of stress and trauma can affect officers’ mental and physical health, contributing to problems such as post-traumatic stress symptoms, substance use, depression, and suicidal ideation. The acute stress caused by these events can produce psychological and physiological reactions that may overcome a healthy person’s ability to cope. Approaches to address vicarious trauma can range from peer and family support to access to mental health services.

**Research findings on the health of police officers:** Dr. John Violanti, in partnership with colleagues from the State University of New York at Buffalo and the National Institute for Occupational Health and Safety, has studied a group of white, male police officers who worked in Buffalo (NY) to examine different health-related outcomes of the group across several decades. This research has found a connection between the physical, mental, and health-related stressors experienced by police officers in their work and an increased risk of obesity, cardiovascular disease, depression, insomnia, and suicide. Notably, this research has found that officers face a higher risk for these experiences when they serve for longer periods of time.

The health disparities between police officers and the general U.S. population have been attributed to many different factors found in the policing profession, including the organization of officer schedules (i.e., shift work), frequent experiences with stress, involvement in potentially traumatic situations, and harmful environmental exposure (e.g., physical and biological hazards). Collectively, the mental well-being, physical health, and lifespan of officers appear to be affected by these factors.

Sources:

Ja K. Gu, Luenda E. Charles, Cecil M. Burfiel, Michael E. Andrew, and John M. Violanti, 2011, “Cancer Incidence Among Police Officers in a U.S. Northeast Region: 1976–2006,” *International Journal of Emergency Mental Health and Human Resilience* 13: 279–289.



Tara A. Hartley, Cecil M. Burchfiel, Desta Fekedulegn, Michael E. Andrew, and John M. Violanti, 2011, “Health Disparities in Police Officers: Comparisons to the U.S. General Population,” *International Journal of Emergency Mental Health and Human Resilience* 13: 211–220.

John M. Violanti, Ja Kook Gu, Luenda E. Charles, Desta, Fekedulegn, Michael E. Andrew, and Cecil M. Burchfiel, 2011, “Is Suicide Higher Among Separated/Retired Police Officers? An Epidemiological Investigation,” *International Journal of Emergency Mental Health and Human Resilience* 13: 221–228.

John M. Violanti, John E. Vena, and Sandra Petralia, 1998, “Mortality of a Police Cohort: 1950-1990,” *American Journal of Industrial Medicine* 33: 366–373.

For more information on police work and health, see John Violanti’s (Editor) *Dying for the Job: Police Work Exposure and Health*—published in 2014 by Charles C. Thomas Publisher Ltd.

For more information on vicarious trauma in law enforcement see the International Association of Chiefs of Police, [Vicarious Trauma Response Initiative](#).



## Understanding Stress



**Stress** generally refers to two things:

- The psychological perception of pressure, and
- The body's response to it, which can involve multiple systems such as metabolism, muscles, and memory

**Chronic stress** is the response to this pressure over a prolonged period where an individual feels they have no control

## SLIDE 3.5

## UNDERSTANDING STRESS



**Trainer Note:** Review the definitions of stress and chronic stress on the slide. Discuss what stress is and its role in our life. Note that it can be caused by the everyday pressures of family and work or by traumatic situations.



**Content Note:** Short episodes of stress are not necessarily harmful. However, prolonged, or repeated, stress can have long-term physical and psychological effects. Specifically, chronic stress is found to force the body into a constant state of heightened alertness that can have negative effects on a person's physical health and mental well-being (e.g., heart disease, stroke, diabetes, anxiety, and depression). Acute stress can produce psychological and physiological reactions that may overcome a healthy person's ability to cope.

### Sources:

Aaron Kandola, and Alina Sharon, January 2, 2022 [Updated], "What is Chronic Stress and What Are Its Common Health Impacts?" *Medical News Today*, retrieved from <https://www.medicalnewstoday.com/articles/323324>.

American Psychological Association, November 1, 2018, "Stress Effects on the Body," <https://www.apa.org/topics/stress/body>.

Psychology Today Staff, n.d., "Stress," accessed October 21, 2022, <https://www.psychologytoday.com/us/basics/stress>.



**Police Officers and Traumatic Stress**

“Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life-threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.” (SAMHSA, 2014)

**Key symptoms of traumatic stress:**

- Re-experiencing or reliving the event
- Avoidance of situations that are reminders of the event
- Hyperarousal
- Negative mood and thoughts

**Psychological trauma is an injury from which people can recover**

## SLIDE 3.6 POLICE OFFICERS AND TRAUMATIC STRESS



**Trainer Note:** Let participants know that content on trauma and post-traumatic stress disorder (PTSD) will be covered in greater detail in another module. In the context of officer mental health and wellness, however, it is important to consider how traumatic stress may manifest in police officers. Define trauma and highlight the key symptoms of traumatic stress. Use the content note below to support this discussion.



According to research from Dr. John Violanti, “it is estimated that, on average, approximately 15% of officers in the U.S. experience PTSD symptoms. Unfortunately, it is not definitively known what the true scope of this problem is among police” (Violanti, 2018).

As stated on the slide, key symptoms associated with traumatic stress can include:

- Re-experiencing or reliving the event
- Avoidance of situations that are reminders of the event
- Hyperarousal, that is, feeling jittery or always alert and on the lookout for danger
- Negative mood, such as depression or anger, and negative thoughts about yourself and/or others due to the event(s).

PTSD is when a certain number of these symptoms are persistent after one month. Not everyone who experiences the same types of events will have traumatic stress reactions and not all those who experience trauma will develop PTSD. It is common to have some stress-related reactions after a traumatic event but not everyone gets PTSD. **It is important to remember that psychological trauma is an injury from which people can recover.**

Source: John Violanti, May 2018, “PTSD Among Police Officers: Impact on Critical Decision Making,” *Community Policing Dispatch* 11(5), Washington, DC: Office of Community Oriented Policing Services, retrieved from <https://cops.usdoj.gov/html/dispatch/05-2018/PTSD.html>.

Managing Stress	
<b>Healthy Activities</b>	<b>Unhealthy Coping Mechanisms</b>
<ul style="list-style-type: none"> <li>• Refocusing on your purpose</li> <li>• Taking care of your body</li> <li>• Connecting with others</li> <li>• Practicing mindfulness</li> <li>• Seeking help</li> </ul>	<ul style="list-style-type: none"> <li>• Uncontrollable eating or dieting</li> <li>• Excessive use of alcohol</li> <li>• Misuse of medication; Use of illicit drugs</li> <li>• Excessive shopping</li> <li>• Overworking</li> </ul>

## SLIDE 3.7 MANAGING STRESS



**Trainer Note:** Recognize unhealthy habits that are often relied on to cope with stress and traumatic experiences. Highlight healthy strategies using the points on the slide and the content note below. Use the question below to prompt a discussion on healthy coping strategies.



### Ask officers: What strategies do you use to overcome stress?

To engage the class participants, elicit responses from participants and write down responses on a flip chart. Once there is a list up on the flip chart, offer ideas that were not suggested already, and then ask participants if there are any other strategies that they use to overcome stress on a day-to-day basis.



**Content Note:** Policing involves a psychologically stressful and physically dangerous work environment filled with high demands, ambiguity in work encounters, and exposure to trauma and death. Officers' exposure to traumatic events and experiences with PTSD have been found to increase their risk of alcohol use and suicidal ideation. Research has also shown that drinking is an accepted bonding practice and coping strategy in the law enforcement culture, with alcohol use being common.

Without managing one's stress with healthy activities, it can become chronic and create serious problems for officers, including with their relationships, physical health, mental health, and work. Healthy activities to help manage stress may include:

- Refocusing on your purpose:
  - Consider why you joined the policing profession
  - Identify the things most important to you, and invest time in those things
- Taking care of your body:
  - Eat healthily
  - Exercise regularly



- Get plenty of sleep
- Connecting with others:
  - Maintain social relationships with those close to you
  - Talk with friends and family
  - Participate in activities with family or friends
- Practicing mindfulness:
  - Identify and recognize stress triggers
  - Take a moment to slow down your thinking. Breathe, process, and then respond.
  - Keep a gratitude journal and regularly document what you are thankful for
  - Meditate on your own or as a family to improve your focus and lower stress levels
- Seeking help:
  - It takes courage to be a law enforcement officer and it takes courage to ask for help. Remember that you are not alone.
  - Review and use your agency's available Employee Assistance Program (EAP) and wellness resources
  - Talk to those around you, such as your fellow officers, command staff, executive leadership, chaplains, family members, a psychologist, or someone you can confide in

There is some research that suggests seeking private professional help—that is services outside of those provided by a law enforcement agency—can help reduce feelings of stigma officers may experience when asking for assistance. In a 2018 survey of more than 8,000 officers (sworn and retired) conducted by the Fraternal Order of the Police, one-third of respondents stated they sought private professional help, and two-thirds of those respondents reported finding those private services to be helpful.

Sources:

Fraternal Order of Police, n.d., *Report on FOP/NBC Survey of Police Officer Mental and Behavioral Health*, Nashville, TN: Fraternal Order of Police, retrieved from <https://files.fop.net/wp-content/uploads/2021/03/OfficerWellnessSurvey.pdf>.

International Association of Chiefs of Police, n.d., *Preventing Suicide Among Law Enforcement Officers: An Issue Brief*, Alexandria, VA: International Association of Chiefs of Police, retrieved from [https://www.theiacp.org/sites/default/files/2020-02/NOSI\\_Issue\\_Brief\\_FINAL.pdf](https://www.theiacp.org/sites/default/files/2020-02/NOSI_Issue_Brief_FINAL.pdf).

International Association of Chiefs of Police, n.d., *Supporting Officer Safety Through Family Wellness: The Effects of Sleep Deprivation*, Alexandria, VA: International Association of



Chiefs of Police, retrieved from <https://www.theiacp.org/sites/default/files/2018-09/Axon%20Family%20Wellness-Sleep%20Deprivation.pdf>.

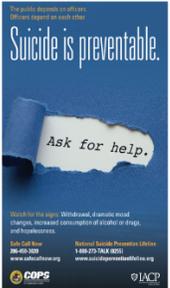
John M. Violanti, 2004, "Predictors of police suicide ideation," *Suicide and Life-Threatening Behavior* 34(3): 277–283.

Kim S. Ménard, and Michael L. Arter, 2013, "Police Officer Alcohol Use and Trauma Symptoms: Associations with Critical Incidents, Coping, and Social Stressors," *International Journal of Stress Management* 20(1): 37–56.

### Preventing Officer Suicide

- Since 2016, more law enforcement officers have died by suicide than were killed in the line of duty.
- Police officers have a heightened risk for suicide, but also have factors that can protect them from suicidal thoughts and behaviors.

**Suicide is preventable.**



## SLIDE 3.8 PREVENTING OFFICER SUICIDE



**Trainer Note:** Review the content on the slide. Emphasize that suicide is preventable.



**Content Note:** Since 2016, more law enforcement officers have died by suicide than were killed in the line of duty. Specifically, between 2016 and 2020, over 900 officer suicides were reported to Blue H.E.L.P., an organization that seeks to reduce mental health stigma within policing.

Police officers:

- Are at a heightened risk for suicide due to experiencing risk factors associated with suicide such as exposure to violence, suicide, or other job-related stressors; depression, anxiety, or other mental health conditions; substance use disorder; domestic violence; access to lethal means (e.g., firearms); and poor physical health.
- Have factors that protect them from suicidal thoughts and behaviors. These protective factors include resilience, coping skills, and social support via family, friends, and colleagues.
- It is important to recognize that suicide is preventable. While police professionals possess unique skills and strengths that make them more resilient, these qualities do not make them immune from needing help at times.

Source: Blue H.E.L.P. data as of 2021, retrieved from <https://bluehelp.org/>.

Preventing Officer Suicide 	
Protective Factors	Risk Factors
<ul style="list-style-type: none"> <li>• Resilience</li> <li>• Connectedness</li> <li>• Social and peer support</li> <li>• Coping and problem-solving skills</li> <li>• Ability to adapt to change</li> <li>• Self-esteem and sense of purpose or meaning in life</li> <li>• Culturally appropriate mental health and wellness services</li> <li>• Sources of continued care</li> </ul>	<ul style="list-style-type: none"> <li>• Previous suicide attempt</li> <li>• Mental health condition</li> <li>• Substance use disorder</li> <li>• Access to lethal means (e.g., firearm)</li> <li>• Social isolation</li> <li>• Chronic disease or disability</li> <li>• History of physical or sexual abuse</li> <li>• Family history of suicide</li> <li>• Exposure to traumatic events in adulthood</li> </ul>

## SLIDE 3.9 PREVENTING OFFICER SUICIDE



**Trainer Note:** Review the risk and protective factors for suicide. Highlight the importance of understanding the factors that contribute to suicide risk and to decrease these risk factors, to the extent possible. Emphasize that there are many factors that offer protection against suicide and that these factors—specifically those related to resilience—will be discussed later in this module.



**Content Note:** Risk factors make it more likely that a person will think about suicide or engage in suicidal behavior. Many risk factors can contribute to suicide. While having a mental health condition—most commonly a mood disorder—can increase the risk of suicide, people *without* mental health conditions can also engage in suicidal thoughts and behavior.

In addition to the risk factors presented on the slide, it is important to consider precipitating factors, that is, stressful events that can trigger a suicidal crisis in a vulnerable person. Examples include relationship problems, recent interpersonal conflict, the death of a loved one, and serious financial or legal difficulties.



## Warning Signs of Suicide



### IMMEDIATE RISK

Respond immediately if you observe any of the following behaviors:

- Talking about wanting to die or killing oneself
- Talking about feeling hopeless or having no reason to live

### SERIOUS RISK

- Talking about feeling trapped or in unbearable pain
- Acting anxious or agitated, behaving recklessly
- Withdrawing or feeling isolated
- Displaying extreme mood swings

10

## SLIDE 3.10 WARNING SIGNS OF SUICIDE



**Trainer Note:** Review with the class participants the signs of suicidal thoughts and behaviors that they should look for when considering whether to seek assistance. In this discussion emphasize the following:

**If you are concerned about a colleague or peer, reach out to them to provide support, and encourage them to seek help. You could also reach out to a peer supporter or other trusted colleague to connect the person at risk to support. If you are struggling yourself or have experienced suicidal thoughts, you are strongly encouraged to seek help. Seeking help is a resource for performing at your best and is a sign of strength. Many people with similar struggles have been able to find hope, be resilient, and demonstrate that recovery is possible.**

If an agency has a peer support unit, identify how to connect with a peer supporter. Discuss confidentiality. Ensure that all personnel understand that mental health services are confidential and that it is okay to seek help for a mental health concern. Encourage class participants to consider seeking professional help if they are unable to manage their stress or cope with trauma, and their usual ways of coping are not working. Recommend that officers identify a health care professional that understands police culture, such as clinicians who have direct policing experience and those trained in suicide risk assessment and treatment.

Source: International Association of Chiefs of Police, n.d., *Comprehensive Framework for Law Enforcement Suicide Prevention*, Alexandria, VA: International Association of Chiefs of Police, retrieved from [https://www.theiacp.org/sites/default/files/2020-11/NOSI\\_Framework\\_Final%20%28002%29.pdf](https://www.theiacp.org/sites/default/files/2020-11/NOSI_Framework_Final%20%28002%29.pdf).



## The Roles of Peers in Suicide Prevention



1. Be aware. Learn the warning signs of suicide.
2. Get involved. Become available. Show interest and support.
3. Be direct. Talk openly and freely about suicide.
4. Be willing to listen.
5. Be non-judgmental.
6. Offer empathy.
7. If someone expresses that they are struggling, do not act shocked.
8. Do not be sworn to secrecy. Seek support.
9. Offer hope that alternatives are available.
10. Act.

### SLIDE 3.11

## THE ROLES OF PEERS IN SUICIDE PREVENTION



**Trainer Note:** Highlight the significant role that participants can play in supporting their fellow officers who may be struggling. Mention that the stigma associated with mental health is a known barrier to help-seeking among police officers. Being able to be a supportive peer and using the methods listed above can help to break the stigma.



**Content Note:** In a survey done by the Fraternal Order of Police (FOP) on police mental and behavioral health, 90% of more than 8,000 police officer respondents reported the largest barrier to reaching out for support when struggling with mental health and wellness is the stigma that surrounds. However, 73% of those officers viewed peer support as the most helpful form of treatment (Fraternal Order of Police, n.d.).

For more information on the role of peers in preventing suicide, see [IACP/BJA's Power of Peers](#).

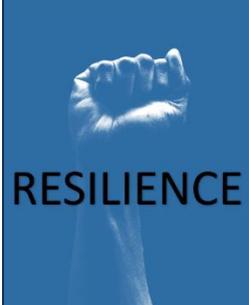
#### Sources:

Brian A. Chopko, Patrick A. Palmieri, and Richard E. Adams, 2015, "Critical Incident History Questionnaire Replication: Frequency and Severity of Trauma Exposure Among Officers from Small and Midsize Police Agencies," *Journal of Traumatic Stress* 28(2): 157–161.

Fraternal Order of Police, n.d., *Report on FOP/NBC Survey of Police Officer Mental and Behavioral Health*, Nashville, TN: Fraternal Order of Police, retrieved from <https://files.fop.net/wp-content/uploads/2021/03/OfficerWellnessSurvey.pdf>.



**Officer Resilience**



**RESILIENCE**

- Having the skills to navigate adversity and grow in the face of challenges, also known as **resilience**, can lead to improved mental health and physical wellness.
- In law enforcement, resilience can be viewed as the ability to adapt to and overcome the effects of the stress and trauma associated with police work.

12

## SLIDE 3.12 OFFICER RESILIENCE



**Trainer Note:** The remainder of this module will discuss resilience and the many habits and strategies that help to increase personal resilience. Remind participants that resilience is a key protective factor against suicidal thoughts and behavior. Additionally, many of the strategies identified to enhance resilience align with the healthy activities discussed previously for coping with stress.

If an agency is interested in a full resilience training course, visit the IACP/BJA [Law Enforcement Agency and Officer Resilience Training Program](#).

### Sources:

International Association of Chiefs of Police, n.d., *Law Enforcement Resilience Training Program Overview*, Alexandria, VA: International Association of Chiefs of Police, retrieved from <https://www.theiacp.org/sites/default/files/Law%20Enforcement%20Resilience%20Training%20Program%20Overview.pdf>.

International Association of Chiefs of Police, n.d., *Preventing Suicide Among Law Enforcement Officers: An Issue Brief*, Alexandria, VA: International Association of Chiefs of Police, retrieved from [https://www.theiacp.org/sites/default/files/2020-02/NOSI\\_Issue\\_Brief\\_FINAL.pdf](https://www.theiacp.org/sites/default/files/2020-02/NOSI_Issue_Brief_FINAL.pdf).

**Officer Resilience: Connection**



Connect with others by maintaining social relationships with those close to you. Set aside time to communicate with friends and family to keep your support system informed and strong.

**SLIDE 3.13  
OFFICER RESILIENCE:  
CONNECTION**



**Trainer Note:** Discuss positive relationships and ask officers to share the positive relationships in their own life (e.g., family, friends, colleagues).



**Ask class participants to share strategies to maintain those positive relationships.** Stress the importance of incorporating healthy activities in maintaining these connections (e.g., going for a walk with family, going to the gym with colleagues) over unhealthy activities (e.g., going out to the bar after a long shift).



## SLIDE 3.14 OFFICER RESILIENCE: BALANCE



**Trainer Note:** Discuss the importance of balance in maintaining a healthy lifestyle.



Ask the following questions to prompt discussion around keeping a healthy balance:

- What do you do for fun?
- What activities do you enjoy?
- How often do you get to partake in those activities?
- How can you better prioritize spending time doing activities that make you happy?

### Officer Resilience: Health



Take care of your body by maintaining healthy habits, such as:

- Eating nutritious foods; Balanced diet
- Staying hydrated by drinking 8-10 glasses of water each day
- Exercising regularly
- Getting plenty of sleep
- Avoiding nicotine and excessive alcohol intake

15

## SLIDE 3.15 OFFICER RESILIENCE: HEALTH



**Trainer Note:** Discuss the importance of taking care of one's body.



Ask class participants strategies they use to refuel, and how they make sure to prioritize physical health even when life, or work, gets busy.

For more information on maintaining healthy habits, visit [www.theiacp.org/OSW](http://www.theiacp.org/OSW).



## Officer Resilience: Mindfulness



- **Mindfulness** – Focusing attention on experiences occurring in the present moment
- Can assist with stress management and ability to cope with trauma or crisis
- Practice mindfulness by taking short breaks to reset and recognize what you need to do to cope with your emotions

16

## SLIDE 3.16 OFFICER RESILIENCE: MINDFULNESS



**Trainer Note:** Discuss the benefits of practicing mindfulness. Use the content note below to support this discussion.



**Content Note:** Mindfulness is an approach that helps individuals bring their attention to experiences occurring in the present moment and is an intervention that may be useful in police work. Benefits of mindfulness can include stress management and improved ability to cope with trauma and crisis.

Practice mindfulness by taking short breaks to reset and recognize what you need to do to cope with your emotions. Mindfulness activities include finding time for yourself, practicing deep breathing, and participating in activities that you enjoy.

- Exercise or go for a walk
- Listen to music
- Read a book
- Spend time with loved ones
- Meditate or practice yoga
- Be creative through art
- Keep a journal of your thoughts

Learn more about Mindfulness Strategies for Law Enforcement by watching the IACP/BJA four-part Mindfulness webinar series at [www.theiacp.org/OSW](http://www.theiacp.org/OSW).

Source: International Association of Chiefs of Police, n.d., *Preventing Suicide Among Law Enforcement Officers: An Issue Brief*, Alexandria, VA: International Association of Chiefs of Police, retrieved from [https://www.theiacp.org/sites/default/files/2020-02/NOSI\\_Issue\\_Brief\\_FINAL.pdf](https://www.theiacp.org/sites/default/files/2020-02/NOSI_Issue_Brief_FINAL.pdf).

**Accessing Support and Services**

Insert local resources, highlighting:

- Department resources
- Local government and community resources
- Crisis and suicide prevention hotlines

**SLIDE 3.17**  
**ACCESSING SUPPORT AND SERVICES**



**Trainer Note:** Use this slide to highlight available local and agency resources. Acknowledge that asking for help or seeking assistance can be difficult but should be normalized and encouraged. Encourage class participants to consider seeking professional help if they are having difficulty managing their stress or coping with trauma, and their usual ways of coping are not working.



**Content Note:** Resources that should be highlighted on this slide are shown below:

**Department Resources**

*Employee Assistance Program, Peer Support Unit, Police Psychologist, Police Chaplain, Family Support Groups, and more.*

**Local Government and Community Resources**

*Vetted lists of community mental health clinicians, community grief and loss groups, linkages to regional outpatient and in-patient substance use services covered by the agency’s insurance plan, Alcoholics Anonymous meetings, and any other local resource relevant to agency personnel.*



### **Crisis and Suicide Prevention Hotlines**

- National Suicide and Crisis Lifeline: 988
- Crisis Text Line: Text HOME to 741741 in the United States. Text 686868 in Canada.
- Copline: 1-800-COPLINE
- Cop2Cop: 1-866-COP2COP
- Safe Call Now: 206-459-3020



## SLIDE 3.18 MODULE WRAP-UP



**Trainer Note:** Use this as an opportunity for participants to ask questions before moving on to the next module.

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