



PUBLIC SAFETY CHAPLAIN CERTIFICATION COURSE

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COURSE INFORMATION

Course Title: Public Safety Chaplain Certification

Class Number: HCI-03

Total Hours: 80

Target Population: Public Safety Chaplains

Mandatory Grade: 72%

MCHAPTER ONE:

1. The student will utilize skills in assessing the dynamics of Public Safety Chaplaincy.
2. The student will identify the crisis theory when affecting an Officer's behavior
3. The student will recognize human nature during crisis situation.
4. The student will identify the "crisis of faith" response for a Police Officer
5. The student will be able to recognize the social impact in Law Enforcement
6. The student will be able to recognize signs and symptoms associated with job related stress
7. The student will acknowledge the signs and symptoms associated with line of duty deaths and officer suicides.
8. The student will be able to evaluate a person in a crisis
9. The student will be able to evaluate the crisis situation
10. The student will recognize the best approach for assessment.
11. The student will know the difference in CISM debriefings/defusing
12. The student will identify debriefing and defusing procedures
13. The student will identify the importance of follow-up procedures

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PREFACE

The purpose of Homeland Crisis Training Institute is to help and encourage those seeking the knowledge needed to become a Public safety Chaplain. This course will give you sound foundation and a faith based insight into how to expand your thoughts, abilities and knowledge through a better understanding of the needs of police officers, their families, victims and offenders. Furthermore it will become a valuable tool and resource in the future when you are working within the field of Public safety Chaplaincy.

Public safety chaplaincy programs are becoming more and more common throughout the world. Police departments, federal agencies and fire departments are realizing the importance of the role of the chaplain and the benefits of having such a program. However there is not a lot of good written material for those seeking to becoming chaplains in the public safety community. Until now most public safety chaplains had to learn the hard way by trial and error.

Public Safety chaplains must always remember they are not police officers, doctors, Psychologist, or Psychiatrist. This course is not intended to train chaplains in such procedures.

Public Safety Chaplains are dedicated to serving the community at large, victims, offenders and members of the law enforcement communities. Take your time on this course and you will gain a lot of knowledge and practical experience from those who have already been involved in law enforcement chaplaincy for many years. We hope and pray that you will take advantage of this training and develop your own skills for the advancement of the Chaplaincy program. Thank you! *Dr. Donald J. Gibson*

The purpose and Goals of the Public safety Chaplain:

1. To provide spiritual guidance and faith based counseling to all members of the Public Safety departmental agencies both sworn and civilian, and their families in their time of need.
2. The services of the Public Safety Chaplain will be available on the basis of need which is 24/7. They are not intended or wish to replace any appointed department clergyman or individual's member of the clergy such as church pastors.
3. To assist Public Safety officers and the people of the community through a ministry of presence and dedicated service.
4. To provide guidance, faith based counseling and comfort in times of crisis. The chaplain should be able to put people in contact with the appropriate agency or agencies for help and support when needed.

STATEMENT OF POLICY CONFIDENTIALITY

Chaplains volunteering with this department shall not disclose the following information to anybody who is not acting in an official capacity.

- a. Any personal information about citizens, witnesses, complainants, officers, family members, or other department personnel.
- b. Any address, telephone numbers, or vehicle information.
- c. Any call information, either verbally, recorded or transmitted in writing.
- d. Any information received via department personnel.
- e. Any call, criminal or personal history.
- f. Information reviewed or received via reports.

DEFINITIONS OF THE FOLLOWING:

Official Capacity: A person employed by a city, local, state, federal, or government who is investigating an event in his/her official capacity as a police officer, fire fighter, investigator, or criminal investigator.

Personal Information: Information that identifies a person, including photographs, social security numbers, driver license and/or ID card numbers, names, addresses, telephone numbers and medical or disability information.

Vehicle Information: License plate numbers, vehicle identification numbers (VIN), lien information, registered owner information and owner address information.

Confidential Department Personnel Information: Information pertaining to any employee of this department including family members received from any counseling, crisis, and traumatic situation, physical, mental or psychological to any person not acting in an official capacity.

Departmental Agreement

This department complies with the Confidentiality laws herein the State of _____.

I have read and understood the above restrictions related to release of information that I have access to as a Chaplain, paid or volunteer. I understand that any violation of this confidentiality statement may result in termination of my duties as a Chaplain.

Signature

Date

SAMPLE
VOLUNTEER CHAPLAIN APPLICATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Name: _____

Church Address: _____

Denomination: _____

Birthday: _____

Soc. Sec. #: _____

Height: _____ Weight: _____ Eyes: _____ Hair Color: _____

Children's Names/Ages/DOB _____

Subject of special study/research paper: _____

Special Training: _____

Activities (civic, athletic, etc.): _____

References (three persons not related to you, known at least one year):

In case of emergency, notify:

As a volunteer Chaplain, I will not hold this department responsible for any serious injury or death.

I confirm that I will hold information I discover during the minister/counselor relationship confidential, being subject to the Chaplain code of ethics considering this information privileged communication.

I understand that I am a volunteer Chaplain, I am under the direction of the Chief of Police, and agree to work voluntarily within the framework of the volunteer Chaplain's Program to exemplify the Ministry of the Chaplaincy as outlined by the policies and regulations outlined by this department

Signature: _____ Date: _____

THE DEMAND FOR POLICE CHAPLAINS

Over the last decade, there have been drastic changes in law enforcement and the service they provide. Today, more than ever, the Public safety profession is unique in its demands. Crime rate statistics in 2006 show that the crime rate is out of control, so we cannot begin to imagine what it is today.

- Population in the U.S. 299,398.484
- Violent Crimes – 1,417,745
- Property crimes – 9,983.568
- Murder – 17,034
- Rape – 92,455
- Robbery – 477,403
- Aggravated Assault – 862,947
- Burglaries – 2,183.746
- Larceny & theft – 6,607,013
- Vehicle thefts – 1,192,809

LAW ENFORCEMENT FACTS

1. There are approximately 740,000 sworn law enforcement officers in the United States. About 10 % of them are female.
2. Each year approximately 33 million crimes are committed, an average of one crime every two seconds.
3. Since the first police death in 1794, more than 14,000 law enforcement officers have died in the line of duty.
4. 1,533 law enforcement officer died during the last 10 years, an average of one death every 58 hours or 153 per year. There were 130 deaths in 1999 alone.
5. More than 65,000 law enforcement officers are assaulted each year and 23,000 are injured annually.
6. The deadliest year in law enforcement history was 1974 when 268 officers were killed. The deadliest decade was the 1970's when a total of 2, 182 officers died, or 218 each year. That figure dropped in the 1990's to 152 per year.
7. The deadliest day in law enforcement history was September 11, 2001, when 72 officers were killed while responding to the terrorist attacks on America.

8. The second deadliest day in law enforcement history was November 24, 1917, when none Milwaukee (WI) police officers were killed in a bomb blast at headquarters, and a 10th officer from Columbus (OH) police department was shot and killed.
9. New York City has lost more officers in the line of duty than any other department, with 526 deaths. California has lost 1,176, more than any other state. The state with the fewest deaths is Vermont, with 15.
10. An average age of the officers killed during the past century was 38 and the average length of service was approximately eight years.
11. The oldest officer to die in the line of duty was 80, from Pulaski County (MO). He was struck by a vehicle while on patrol in 1952.
12. He worked in law enforcement for 44 years, making him the longest serving officer ever to die in the line of duty.
13. There have been 105 female officer killed since 1900, only seven of whom were killed prior to 1970.
14. More officer are killed in January (1,318) and December (1,309) than any other month.
15. During the last 10 years, more officers were killed on Fridays than any other day of the week.
16. More officers were killed between 8:00 to 10:00 p.m. and any other two hour period.
17. 61% of the officers were feloniously assaulted by criminals.
18. 39% died in accidental circumstances. More than 5% of the officers who died over the past 100 years were killed taking law enforcement action while in the official duty capacity.

NOTES

STATISTICS OFFICER DEATHS

Firearms – 6,846 or 49%
Automobile Accidents - 2,090 or 15%
Motorcycle Accidents – 1,022 or 7%
Struck by vehicle – 955 or 7%
Job related Illness – 588 or 4%
Aircraft Accidents – 311 or 2%
Stabbings – 197 or 1%
Falls – 147 or 1%
Beaten to death – 134 or 1%
Drowning – 142 or 1%

Automobile accidents were the second leading cause of police fatalities.
Motorcycle accidents ended the century as the third leading cause of police deaths.

Nationally, twice as many officers commit suicide as are killed in the line of duty, according to a study by the National Association of Police Chiefs.

2007: A DEADLY YEAR FOR U.S. LAW ENFORCEMENT

Officer fatalities rose more than 28 percent to the second highest total in nearly two decades; fatal shootings surged 33 percent, while a record 81 officers died in traffic-related incidents

WASHINGTON, D.C. — 2007 has been a deadly year for law enforcement in the United States, with 186 officers killed nationwide as of December 26, according to preliminary statistics from the National Law Enforcement Officers Memorial Fund (NLEOMF) and Concerns of Police Survivors (C.O.P.S.).

When compared with 2006, when 145 officers died, officer fatalities rose more than 28 percent this year. Outside of 2001, when 239 officers died, 72 in the September 11 terrorist attacks.

The number of officers killed by gunfire and in traffic-related incidents both increased in 2007, the latter reaching a record high of 81. So far this year, 69 officers have been shot and killed, up 33 percent from 2006, when there were 52 fatal shootings. Six times this year, two or more officers were gunned down in the same incident, including a shooting that killed three Odessa (TX) Police officers in early September.

"In 2007, our nation's law enforcement officers were confronted with more brazen, heavily armed and cold-blooded criminals than they have faced in many years," said Craig W. Floyd, Chairman and CEO of the NLEOMF, a non-profit organization that researches officer fatalities and maintains the National Law Enforcement Officers Memorial in Washington, DC.

"Even in the face of incredible danger, our men and women in blue displayed remarkable bravery in working to protect the rest of us. As this tragic year comes to a close, every American owes our law enforcement officers an incredible measure of gratitude," Mr. Floyd added.

Law enforcement officers killed in traffic-related incidents also increased, from 73 in 2006 to a new high in 2007. The previous high was 78 in 2000. 2007 is the 10th year in a row in which traffic-related incidents were the leading cause of officer deaths nationwide.

Of the 81 traffic-related deaths in 2007, 60 officers died in automobile crashes and six in motorcycle crashes and 15 were struck by automobiles while outside their own vehicles.

Among other causes of deaths 18 officers died from physical causes, primarily heart attacks, four drowned, three fell to their deaths and two were killed by falling objects. Three officers died in aircraft accidents, and one was killed in a boating accident.

The surviving families of these fallen officers will be struggling for years many months trying to adjust to life without their officer," said Jean Hill, National President of C.O.P.S., which provides resources to assist in rebuilding the lives of surviving families of officers killed in the line of duty.

There will be hundreds more survivors needing our services due to the increased numbers of deaths, and C.O.P.S. will need to increase its efforts to assist these families. We will strive to reach our mission for these families and help them rebuild their shattered lives. And that support from C.O.P.S. will be there for the families for as long as they need our support," Mrs. Hill continued.

Forty-one states, the District of Columbia, Puerto Rico and the U.S. Virgin Islands experienced officer fatalities during 2007. Texas, with 22, had the most officer deaths, followed by Florida (16), New York (12), California (11) and Louisiana (9). Seventeen federal law enforcement officers died this year, including five special agents of the Air Force Office of Special Investigations who were killed in Iraq.

The officers killed in 2007 ranged in age from 19 to 76; the average age was 39. The officers had an average of 11.4 years in law enforcement. Seven of the officers killed were women.

Handguns were used in the vast majority, 51 of the fatal officer shootings. Shotguns were used in 8 officer killings and rifles in 9 others, including the fatal shooting of Miami-Dade (FL) Police Officer Jose Somohano with an assault weapon.

Approximately 40 percent of the officers who died were killed in felonious attacks; the other 60 percent died from accidental causes. Up until the late 1990s, more officers died in felonious attacks than accidents.

Alcohol was a contributing factor in 21 of this year's officer fatalities, up from 17 in 2006; illegal drugs played a role in 21 deaths, up from 11 in 2006.

After peaking at 277 in 1974, officer fatalities have generally declined over the past three decades, with the exception of the increase in 2001. The annual average number of officers killed was 228 in the 1970s, 190 in the 1980s, 160 in the 1990s and 167 from 2000-2006. The statistics released by the NLEOMF and C.O.P.S. are preliminary data and do not represent a final or complete list of individual officers who will be added to the National Law Enforcement Officers Memorial in 2008.

THE VOLUNTEER CHAPLAIN PROGRAM

The department chaplains should be skilled and committed to ministering to all people regardless of religious beliefs and should always respect the beliefs of those whom they serve.

In recognition of the cultural and religious diversity within Police Departments everywhere, chaplains should be established to administer spiritual guidance and support to police officers, the department personnel and their families.

Chaplains also serve the citizens of the community by assisting police personnel in stressful and traumatic situations involving serious injury or death. Public Safety Chaplain must be legally ordained, have proper training and be experienced.

Police officers are often confronted with situations that demoralize and create emotional, mental and spiritual burdens. These burdens can affect their work performance, their health, and their relationship with their families. In such situation the chaplain provides a very valuable service, sometimes it may be just be an ear.

One day I received a call from the PD requesting I come to the department, they informed me there was an officer who needed to speak with me. When I arrived I found a young officer about 38 years old that was on the verge of a nervous breakdown, he was literally shaking all over.

We spent a little over an hour together in private, he cried, I cried, and he vented about many things that had just built up over a matter of time. I may have said 20 words during the whole conversation, I felt that he just really needed to vent. When he was ready he stood up, wiped his eyes, and thanked me for just listening, and for not trying to tell him what he should or should not be feeling. There are many times the following statement is true. "If you cannot improve on silence, keep your mouth shut". *Dr. Donald Gibson*

Police officers and agency employees often need to express their frustration and problems to someone who fully understands the circumstances surrounding their duties, without fear of repercussions. **This is one area where Confidentiality is very important!**

Public Safety Chaplains must listen to the problems of officers with empathy, and be able to offer them sound advice and wise counsel. During the performance of the chaplain's counseling duties, the communications between the chaplain and the police officer or employees are privileged communication. Officers must have the assurance that the details of their conversations with a chaplain will not be repeated to anyone. (See [Confidentiality section for exceptions and further information](#))

Public Safety Chaplains respond to the law enforcement community 24/7 offering assistance whenever there is an incident involving traumatic situations. They offer comfort and consolation to all who may be emotionally distraught.

Examples include, but are not limited to the following:

1. Auto Accidents
2. Natural Disasters
3. Suicides
4. Unattended Deaths
5. Murders
6. Domestic Violence
7. Child Abuse
8. Police Involved Shootings

Note: There are many situations where people are confronted by trauma or death.

The services of the chaplain may be requested by any officer, supervisor, watch commander or department employee for any reason.

Chaplains are encouraged to routinely participate in ride alongs, attend staff meetings, briefings and participate in department training when possible. Interaction with department members at special and social events and functions should always be encouraged.

Public Safety Chaplaincy has many different types of members from all walks of life. They are priests, pastors, ministers, carpenters, retired law enforcement officers, school teachers, health care workers, doctors, lawyers, and many others.

Chaplains must learn to depend on the Lords' guidance to help people through the worst times of their lives. There may be times that just handing someone a tissue or a drink of water, can turn into a ministry of presence.

Public Safety Chaplaincy began nationwide in 1977, when members of the clergy cared for personnel who were struggling with the loss of loved ones. Now it has become one of the most demanded needs of officers, their families and people within the community.

Chaplains provide emotional support for citizens that have been traumatized by homicides, suicides, domestic violence or auto accidents. There are many departments

that will request the chaplain to do death notifications. These are just some of the reasons that trauma and crisis intervention training are so badly needed.

There is nothing easy about knocking on someone's door at 3 a.m. to deliver a life-changing message. "We can't change the message, but we can change how a person reacts to it with proper training and compassion.

I remember one night at about 3 am when dispatch informed me that we had received a teletype stating a young woman and her three small children had been killed in an auto accident. They told me her husband was at home and did not have a phone. I remember they lived in a rundown trailer park in a very small metal trailer. It was clear they had very little of the in material things in life, and now I had to inform this man his wife and three little girls had been killed in an auto accident while visiting their grandparents in another state. Chaplains live with such heart breaks and memories, they do not go away.
Dr. Donald Gibson.

Public Safety Chaplaincy requires a lot of humility: Chaplains must know how to **work** in authority, **with** authority, **under** authority and **beside** authority.

1. Chaplains has the opportunity of understand police sub-culture and to offer assistance in times of need. The better understanding that chaplains have, the more successful they will be.
2. Chaplains offer comfort and wise counsel to the survivors of violent crime, disasters and natural deaths. Their lives have been changed forever by a violent crime or unexpected tragedy.
3. Chaplains offer their services to all people, **regardless** of race, gender, sexual orientation, national origin, creed, or religion.
4. Chaplains offer their services without cost **or proselytizing**.
5. Chaplaincy programs provides a source of strength to law enforcement officers, their families, department office members, dispatchers and the community at large.
6. Chaplains must listen to officers with empathy and experience, always advising calmly in the midst of turmoil and danger offering their assistance only when it is appropriate or requested.
7. Chaplains provide spiritual guidance, wisdom, faith based counseling, community involvement as well as their assistance.

NOTES

PUBLIC SAFETY CHAPLAIN REQUIREMENTS

Pressures facing the Law Enforcement community and civilian personnel are more complex now than at any other time in our history. Chaplains must make themselves available to respond 24 hours a day if needed.

- 1) Chaplains must indicate a willingness to be involved in training that would enhance their efficiency in meeting and dealing with people in crisis (e.g. crisis intervention) and should be familiar with community resources and referral services.
- 2) Chaplains must be willing and available to respond to any and all situations where their presence as Chaplain is needed.
- 3) Chaplains must possess a valid and current driver's license.
- 4) Chaplains respond to all major disasters in the community such as, auto accidents, unattended deaths, suicides, murders, domestic violence, bombings, building collapses, explosions, airplane crashes, and multiple-alarm fires, unusual industrial accidents and other disasters.
- 5) Chaplains provide a liaison with other religious leaders in the community.
- 6) Chaplains are to notify the pastor of an officer's or other involved person or person's as soon as possible in cases of death or serious injury.
- 7) Chaplains are to make proper referrals in unique cases which need specialized or professional help.
- 8) Chaplains are to assist in raising funds for the Chaplaincy program and keep supporters in the community informed on the work of the chaplaincy.
- 9) Chaplains must have a basic knowledge of the duties of Law Enforcement officers and keep themselves updated on any new procedures.
- 10) Chaplains when on duty shall be available to the dispatcher or officers 24/7 either by radio, telephone, or in person.
- 11) Chaplains on vacation or when out of town shall designate a chaplain to take their place during their absence and provide contact information to the appropriate department heads.
- 12) Chaplains shall not publicly criticize the action of any Law Enforcement officer, department official, fellow chaplain, or department policies.

- 13) Chaplains shall not release any information to the media, any insurance agencies or attorneys regarding cases in which they may be involved. All information should be held in strict confidence and used for the benefit of the department, officers or persons involved.
- 14) In the field of religious guidance, the chaplain is an advisor to the Law Enforcement agency administrators in all matters pertaining to the moral, spiritual and religious welfare of law enforcement personnel.
- 15) Chaplains must hold current training certificates in crisis management, crisis intervention, critical incident stress management, debriefing and defusing, stress management, and be willing to attend continual education training.
- 16) Chaplains will adhere to confidentiality rules and regulations at all times. The chaplain when counseling agency personnel shall maintain confidentiality unless there is an exception where criminal or civil law has been violated, or threats made of taking their own lives, or threats made against others. Then it is the chaplain's duty and responsibility to notify the proper authorities.
- 17) Chaplains shall not gossip, start rumors, or commit any immoral acts of any kind. All conversations, calls, or personal actions of any member of the department or that of their families will be held in the strictness confidence.
- 18) In the field of religious guidance, the chaplain is an advisor to the Law Enforcement agency administrators in all matters pertaining to the moral, spiritual and religious welfare of law enforcement personnel.
- 19) Chaplains must hold current training certification and certificates pertaining to crisis management, crisis intervention, critical incident stress management, debriefing, defusing, stress management and be willing to attend continual education training.

CHAPLAIN RESPONSIBILITIES

- 1) All members of the Chaplaincy program will assist with situations when requested, (i.e. situations where they can use their training and expertise in providing a caring and responsible conclusion).
- 2) All information communicated to a police chaplain in their position as a religious advisor will be considered privileged information.
- 3) The Senior Chaplain will meet with the Selection and Review Committees as necessary to discuss problems and concerns and implement new or revised procedures concerning the program.

- 4) The Chaplains will be available to members of the Police Department and their families in times of injury, illness or other personal crisis when requested. If a member of the Police Department has an existing relationship with a particular Chaplain, attempts will be made to coordinate the Chaplain's efforts with those of the officer's request.
- 5) It may become necessary for the Chaplain to be available at unusual times of the day or night. Therefore a schedule will be compiled by the Senior Chaplain which will indicate an "on-call" status rotation. Exceptions may be made when a police department employee requests a specific Chaplain. In such an event, every effort will be made to honor this request.
- 6) When a situation or crisis occurs, the on call chaplain will be notified by appropriate personnel of the specifics of the incident.
- 7) After assessing the situation or crisis, the duty chaplain may contact other chaplains based on the severity of the situation, or other specifics such as religious preference, gender, race, and ethnic background.
- 8) Chaplains must never try to influence any officer, or department employee in matters that may be contrary to their individual religious beliefs and practices.
- 9) The services of a chaplain may be requested by any police department employee for any incident where such services might be deemed helpful. Chaplains are also encouraged to routinely participate in ride-a-longs, attend staff meetings and briefings and participate in department training when possible. Interaction with department members at special and social events are encouraged and can be of great benefit to the chaplain as well as the officers and their families.
- 10) After selection into the program, chaplains will be issued a police identification card indicating their position as a police department chaplain. It is the responsibility of the chaplain to ensure that their position is clearly communicated as a Police chaplain whenever presenting their identification.
- 11) Identification cards will be replaced if reported lost or stolen. Lost or stolen identification cards shall be immediately reported to the Senior Chaplain and the Administration.
- 12) Designated attire for chaplains shall be worn at all times while assisting or representing the department.

NOTES

RELIGIOUS OR CHAPLAINCY AFFILIATIONS

A list of volunteer police chaplain and their religious affiliations should be made available to all members of the police department, a copy should be maintained with dispatch or dispatcher for call-out related purposes.

Procedure: Chaplaincy programs are established and directed by the Chief of Police or a designee. Upon request of any employee of the Police Department, a chaplain may be contacted to assist with the needs of that employee or their family. Any Chaplain may be contacted in a variety of ways, including but not limited to:

- 1) Directly by any employee
- 2) Via dispatch (who should maintain a current list of all Chaplains)
- 3) A supervisor

RECOMMENDATIONS

Three or more letters of recommendation from different individuals should be required and submitted by each chaplain applying for the chaplaincy program. Letters of recommendation should come from, but not limited to the following.

- 1) A fellow member of the clergy
- 2) The member of leadership within chaplain's church or religious organization or denomination.
- 3) Another experienced Public safety Chaplain.
- 4) A police officer or other department employee who has known the applicant for at least two years.

BACKGROUND CHECKS

After submission of the chaplain's application, including a resume, all applicants will be required to undergo a criminal background check, "CCH and NCIC" by the officer assigned to the background investigation by the police department. A criminal or unfavorable background result should be cause for exclusion in the program.

NOTES

SELECTION PROCESS

The selection process for membership and assignment in the chaplaincy program may include the following criteria:

- 1) Be an ordained minister, religious leader or clergyperson who lives or practices within the city or community.
- 2) In some states or departments they may require attendance in a citizens police academy and successfully complete the course as well as an orientation training course conducted by the Senior Chaplain to include familiarization with policies and procedures relating to their service.
- 3) Agree to serve for a minimum of 1 year, with additional yearly renewals based on approval of the Chaplain Selection and Review committee.
- 4) Renewal reviews will be based on satisfactory performance total length of service, degree of involvement during the previous year's service, number of new applicants to be reviewed, number of applicants involved in the program during any year, and the diversity of the applicants involved in the program.

Note: Exceptions to these provisions may be made by the Chief of Police when it is determined that a candidate's unique qualifications would enhance the Chaplaincy Program.

LAW ENFORCEMENT KNOWLEDGE

Some of the following we have already covered, do not take for granted it is exactly the same information. Chaplains who cannot following instructions can get themselves hurt, or cause others to get hurt, including their officers. Public Safety Chaplains must have a basic knowledge of the duties of law enforcement officers and seek to keep abreast of new procedures and in addition the following:

- 1) The Chaplain must conform to all department policies if possible. The Law Enforcement Chaplain will fall under the same rules and regulations as any other paid or volunteer employee and will fall under the discretion of the Chief of Police.
- 2) The Chaplain must be familiar with and conform to radio procedures established by the department. It is the Chaplains responsibility to keep abreast of changes in policy and procedure concerning radio operations. The Chaplain will attend all training classes to learn policy and procedure for the department.
- 3) The Chaplain will not criticize the action of any law enforcement officer, department official, fellow Chaplain, or department policy or action. Furthermore the chaplain will

not interfere with any officer, or employee while in the performance of their duties on or off duty.

- 4) Chaplains will not release any information to the news media, insurance agencies or attorneys regarding cases in which he/she has been involved.
- 5) It is understood by all Chaplains that any information regarding the operation of the agency must be released through the Chief of Police, Sheriff or Public Relations Officer. Never by the chaplain!
- 6) Chaplains will maintain activity reports for each call they respond to. This activity report will have pertinent information i.e.) Name, address, date, time, event number and time spent on the call. Information is to be kept on file.
- 7) Chaplains will not interfere with the duties of police officers in the performance of their duties during ride-a-longs.

THE AUTHORITY OF THE CHAPLAIN

The public safety chaplain should be considered as a staff member of the department. The chaplain functions as a non-sworn staff assistant to the Chief of Police or his designee and comes **under the authority of the Chief of Police**.

Note: Unless certified by the State as a commissioned police officer, police chaplains, by virtue of the chaplaincy, are not sworn law enforcement officers and have no law enforcement powers.

The police chaplain should be authorized to ride with police officers and should be authorized to visit all police facilities and offices of the agency. Chaplains should have access if possible and approved by the on-scene ranking Officer, to all buildings and scenes where the presence of law enforcement officers indicates the need for the chaplain's services or presence.

Police chaplains should carry proper identification issued by the department and, when on duty, properly identify themselves in a manner becoming the chaplaincy.

PROBATION PERIOD

All chaplains shall be on probation for one year, which includes at least three months of training and three months of in-service experience.

Training in both law enforcement and chaplain specific procedures is essential and will include both INITIAL and ON-GOING training models.

ORIENTATION

Each chaplain will on completion of the application process and acceptance, be required to begin a training procedure which may consist of, but not limited to the following:

- 1) An initial interview with the Senior Chaplain or Department Supervisor
- 2) An interview with the Chaplaincy “TO” Training Officer
- 3) A thorough review of the department chaplaincy training manual
- 4) An orientation Ride-Along with the Senior Chaplain or department supervisor
- 5) A first training Ride-Along with Training Sergeant from the agency.
- 6) A second training Ride-Along with a Training Sergeant from an agency in close proximity to an area.
- 7) Finalize interviews with Chaplaincy Training Officer
- 8) A Chaplains badge, wallet and ID number will be issued upon completion of the initial training period and after the Chaplain has been approved by the Chief of Police.

Note: Training will differ depending on the size of the department, and the state you are working in. Many departments are still using local pastors of churches who have no idea what chaplaincy is. Chaplaincy is becoming a major part of most large law enforcement departments and county, state and federal departments as well. Chaplain Fellowship has members who are US Air Marshalls, and federal agents with Homeland Security.

Dr. Donald Gibson

CHAPLAIN TRAINING

Christian ministry has grown rapidly over the past twenty years as the need to share God’s word and hope in Christ offers encouragement to people in an ever growing society of many different cultures. Chaplains are more available to serve in a variety of ways, they make themselves available to offer invocation, prayer and encouragement on a personal basis.

In the midst of all this ministry activity, the Public Safety Chaplain joins the ranks of those who believe that official training and certification need to be available for those who wish to carry the title of “Public Safety Chaplain.”

Public Safety chaplaincy training is vital considering chaplains become involved in crisis situations while working side by side with officer in the streets. Without proper training,

chaplains can be a bigger hindrance than an asset. Training provides credibility by assuring Law Enforcement Agencies that those who wear the name “Chaplain with their department” have been trained and endorsed by an organization familiar with the unique aspects of Law Enforcement.

Training also provides a forum for other chaplains in the Law Enforcement community to gather and exchange information and offer encouragement with other like-minded servants of Christ.

IN-HOUSE TRAINING

In-house training should be made mandatory and must be completed prior to beginning in-service experience. It will include:

- 1) An orientation to the Police Department (tour, organizational structure, etc.)
- 2) Orientation to Patrol (Districts, Zones, Sectors)
- 3) Orientation to radio procedures, signals, codes, and call designators
- 4) Crime Scene Preservation and Etiquette
- 5) State Law regarding unattended deaths with a view toward specific religious Considerations (requirements and procedures)
- 6) Firearms familiarization and training
- 7) Vehicle use
- 8) Basic street survival skills
- 9) Rules, regulations, policies and procedures
- 10) Basic training in the chaplain’s role and mission
- 11) Confidentiality
- 12) Ride-along procedures and requirements
- 13) Reporting procedures
- 14) Death notification & follow-up procedures
- 15) Ministry parameters while representing the department
- 16) Sensitivity to officers and their job demands
- 17) Successful completion of the Citizens Police Academy or department training

NOTES

ON-GOING TRAINING

On-going training is essential for all chaplains and should be offered periodically. To include specialized chaplain training and certifications: The police department should pay any annual membership fees for all chaplains. In addition, subject to available funds, the Department shall pay the chaplain's fees for attending seminars and classes.

There are many training classes for Chaplains beneficial and available throughout the country. Below is a list of just some of the classes available.

- Critical Incident Stress Management or
- QPR (Gatekeeper) Program or
- EMDR
- Homeland Security
- CPR certification
- Pastoral Crisis Counseling for Chaplains
- Traumatic Crisis Counseling for Chaplains
- The Law Enforcement Chaplain
- Cultural Spirituality and Sensitivity
- Volunteer Chaplain Liability
- Disaster Relief for the first responder chaplain
- Strategic Response
- Community Emergency Response
- Crisis Intervention
- Crisis Management
- Peer Support
- Death Notification
- Compassion Fatigue
- Critical Incident Stress
- Post Traumatic Stress Disorder (PTSD)
- Grief and Loss Counseling
- Suicide/ Officer Suicide
- Weddings
- Funerals
- First Aid/AED/CPR
- Pastoral Counseling

NOTES

CERTIFICATION PHASE

Volunteer Chaplains: For liability reasons, before Volunteer status has been assigned to a Chaplain, it is necessary for the department to review and verify all certifications, endorsements, training certificates and degrees of the candidate. Copies of those certificates and degrees must be kept on file at the Department at all times.

The Board of Directors in charge of Chaplaincy Program should make a decision before the Volunteer Chaplain Program begins on what types of training the department will require.

During this phase, a potential candidate will receive information about prerequisites for certification, and should submit an application for review. Once an application has been reviewed, the potential candidate will be notified regarding status or progress.

Throughout the years, depending upon region, the department or personal preference, training has differed from one extreme to another throughout the United States. However, since the rise in terrorist attacks and crime rates that have increased significantly and the need for Chaplains have increased, Law Enforcement Chaplaincy training has become paramount on the minds of those in positions of authority within the law enforcement community.

The more certification classes that a Chaplain candidate possess the safer a department can feel about the Chaplains ability to do the job correctly.

FAILURE TO SHOW PROOF OF TRAINING

If at any time the candidate is unable to provide the required training documentation, it would be to the benefit of the department to decline the application until the candidate can provide proof, for liability reasons.

The required training depends on the needs of the department, however, considering the nature and danger of the Law Enforcement profession, liability is of the up-most importance when lives are at stake.

There are a lot of “so called” certifications programs floating around the country today, most are what we call “diploma mills” they have no actual value other than a certificate to hang on the wall. Any department assigning a Chaplain should make it a policy to do background checks and verify any certificates and diplomas the Chaplain may possess making sure that the Chaplain has actually have had the education they claims they have by an accredited school, seminary or ministry affiliation.

Failure to produce certificates, diplomas or education should be immediate suspension from the department until those articles can be produced.

The untrained chaplain can actually be a detriment instead of an asset to someone suffering from severe trauma, stress or a crisis. It is imperative that the Police Chaplain obtain and maintain the proper training “before” attempting to help.

REASONS FO DISMISSAL OR SUSPENSION

If a chaplain is accused of dereliction of duty (i.e. failure to submit monthly reports, attend meetings and training, contribute an average of four hours per week per month) or any action that would bring reproach upon the department of program, the chaplain shall be required to answer such allegation to the Chaplain Selection and Review Committee.

The chaplain Selection and Review Committee shall have the power to recommend dismissal or suspension of the chaplain to the Chief of Police.

THE DECISION OF THE CHIEF OF POLICE IS FINAL

A chaplain who is dismissed or suspended shall immediately surrender his badge and ID and shall surrender all other equipment within 24 hours of dismissal or suspension.

Suspensions shall be administered for a specific period of time, to be recommended by the Selection and Review Board. Following the period of suspension, the suspended chaplain shall submit, in writing, to the Selection and Review Board, a request for full re-instatement to active status.

The Selection and Review Board shall forward its recommendation to the Chief of Police. Failure to request reinstatement to active status within 7 days of the expiration period of the suspension shall be considered a resignation from the chaplaincy program.

DEPARTMENT RULES AND REGULATIONS

- Police chaplains shall strictly abide by all the rules, regulations, policies and procedures that are applicable to other members of the police department.
- Police chaplains shall be familiar with all General Orders and pertinent SOP's.
- The police chaplain will obey all commands and requests made by an officer and will not, in any way, interfere with any officer in the performance of their duty.
- Due to their unique and sensitive position, police chaplains must be especially careful to maintain the confidentiality of the police department. Chaplains may be exposed to information that they must not divulge to the public.
- Chaplains should refer inquiries for information by the public or press to the proper authorities (supervisor, Public Information Officer) within the department
- Upon obtaining a State issued Concealed Weapon or Firearm License, passing annual departmental qualification and with approval from the Chief of Police or his designee, a chaplain may be permitted to carry a concealed firearm in accordance with State law.

CHAPLAIN UNIFORM

In some small departments and rural areas, uniforms may not be available or the Chaplain may be required to purchase their own uniforms. Either way, the chaplain should always get approval from the Chief of Police on the required, approved dress code.

Each Chaplain will be required to wear the appropriate Chaplaincy uniform while on ride-along(s), visits to law enforcement agencies, or on calls for service. The basic Chaplaincy uniform normally consists of:

- 1) Black shoes
- 2) Black socks
- 3) Black slacks
- 4) White or gray Shirt with Chaplains logo in plain view
- 5) Black Chaplaincy logo jacket

Any designated chaplains uniform that is a required dress for department chaplains should have the word “***Chaplain or Police Chaplain***” written in ***plain view*** and uniforms should be ***worn at all times*** while assisting police officers or in representation of the police department.

Note: There are certain dangers for the police Chaplain who assist police officers in the line of duty, who are not identified by the clothing they wear. The general public has the misconception that when an officer arrives on a scene and has another person to assist them, regardless if it is a uniformed officer, that the other person is another police officer. This can and has determined to be a deadly decision for the unarmed Chaplain.

The Police Chaplain must adhere to the rules and regulations regarding department dress codes for safety reasons for themselves and the police officers they assist.

CHAPLAIN VEHICLES

Some department provides police chaplains a vehicle during call outs. Use of the vehicle should be restricted as follows:

- Only active members of the Chaplain program may drive the vehicle
- Vehicles will only be used when acting in their official capacity as a chaplain on call, when traveling to and from a department or city sanctioned event, or call-out, or as authorized by the Senior Chaplain.

PASSENGERS MUST BE EITHER

- A Department member
- City employee
- City volunteer
- Authorized ride-along with waiver filled out, notarized, approved and filed.
- Authorized client with waiver filled out, notarized, approved and filed.

EMERGENCY NOTIFICATIONS AND/OR CALL OUTS

The Chaplain program will be immediately notified and/or called out for the following:

- The death of any police department employee or their immediate family
- Any serious injury to an officer or immediate family member
- Any officer involved shooting
- Any traumatic event, crime scene, fire or automobile accident
- Any suicide or attempted suicide
- Any other matter where moral or spiritual guidance is needed to address a crisis situation

NON-EMERGENCY NOTIFICATIONS

- City wide alerts
- Homeland Security alerts
- Large events (Air & Sea Show, Boat Parade, Festivals, etc.)
- Graduations, promotions, awards presented to Police Personnel
- Births, anniversaries or other department events
- Baptism, Communion, Barmitzvah, Batmitzvah or other significant spiritual event

NOTES:

CHAPTER TWO

Chaplaincy Program Organizational Structure: The chaplaincy program shall be under the authority of the chief of police unless assigned to a commander or a senior chaplain has been appointed. The chaplaincy program shall be staffed with as many public safety chaplains as necessary to accomplish the objectives of the program.

Chaplains shall be appointed by the chief of police, a department commander, or senior chaplain that has been assigned by the chief of police.

Chaplains are held accountable and are under the direction of the chief of police or a department commander, or senior chaplain that has been assigned by the chief of police.

Chaplains are chosen from local religious institutions unless otherwise approved by the chief of police or a department commander, or senior chaplain that has been assigned by the chief of police..

Note: I have been involved with larger departments where the Chief of Police assigned the chaplaincy program over to commanders of the department. *Dr. Donald Gibson*

Senior Chaplain Responsibilities include, but are not limited to the following:

- 1) Keep in close contact with Agencies and Patrol with weekly visits.
- 2) Communicate weekly with all chaplains in the program
- 3) Be consistent with Ride-along and Briefings.
- 4) Meet formally or informally with the chief or department commander - coffee/lunch, etc. at least each quarter
- 5) Assist with training
- 6) Collect, summarize, and file monthly activity reports
- 7) Oversee the entire chaplain program and personnel
- 8) Be a liaison between the office of the Chief of Police (or designee) and the chaplains
- 9) Establish and maintain a separate personnel and training file for each chaplain.
- 10) Interview every new chaplain and verify all ecclesiastical credentials
- 11) Put together a notebook of chaplaincy resource materials for each new chaplain
- 12) Create and make available to the chaplains all needed forms and reports
- 13) Provide for and schedule meetings and ongoing training
- 14) Prepare a rotation schedule of callouts and keep dispatch informed
- 15) Submit quarterly written statistical reports to the Chief of Police (or designee)

Notes

Reports and Meetings: Monthly reports shall be submitted to the senior chaplain. They shall be general in nature (in order to protect anonymity) indicating the date and time of the chaplain's involvement, total hours and the nature of the activity, e.g. ride-along, call-out, counseling, etc. Forms should be provided by the senior chaplain.

The senior chaplain will compile and submit a quarterly statistical summary of all reports submitted to the Chief of Police. Where privileged communication is involved, the report shall in no way, by either name or circumstances, identify any member of the police department.

Meetings of the Chaplain program will be held on a regular basis in order to discuss any problems or concerns, share information, keep abreast of current needs, engage in fellowship and provide on-going training.

Associate Chaplain's Committee: A selection committee of two civilians, at least 2 sworn members of the Department appointed by the chief of police, and the senior chaplain will review all volunteer chaplain applications and make final recommendations to the chief regarding the selection of chaplain Volunteers. Final selection will be at the sole discretion of the Chief of Police.

NOTES

CHAPTER THREE

Confidentiality and Privilege Communication: Refers to information that is shared with the implicit or explicit promise and expectation that it will not be disclosed or repeated to anyone, including department supervisors.

Privilege: is a legal protection against forced disclosure in legal proceedings that would violate the promise of confidentiality. "**Privilege**" allows the professional to refuse to answer questions in court and/or to refuse to produce records without fear of a "contempt of court" citation or an adverse instruction to the jury.

Professionals who can decline to disclose information provided by their "clients" or "penitents" are priests, chaplains, lawyers, physicians, and therapists in many states.

THE EXCEPTIONS TO CONFIDENTIALITY

The communications between the chaplain and the counseled are privileged, and the chaplain may not be compelled to disclose what has been heard. Confidentiality of chaplain services to police department personnel is a matter of extreme sensitivity and importance to the chaplain program and the administration of the department.

Most laws do not prohibit testimony by a chaplain with knowledge of relevant admissible facts. Example: A chaplain may testify regarding a public incident they have witnessed while acting in the role of chaplain.

It should be policy that all police department personnel confiding in a police chaplain will be covered by the confidentiality privilege with the *exception* of the following acts:

- **Homicidal:** The chaplain believes that the person is a threat to the life, health or safety of another person.
- **Suicidal:** The chaplain believes that the person will cause harm to himself or herself.
- **Child Abuse:** The chaplain is made aware that child abuse is or will be taking place.
- **Criminal Activity:** The chaplain is made aware that a person is engaged in or plans to engage in criminal activity or is a threat to the city or department.

Confessions regarding past events are considered privileged communication. Revelation of on-going criminal acts or plans to commit criminal acts in the future is **NOT** protected as privileged communication.

It is incumbent upon the chaplain to immediately advise the subject that this is not protected under the privileged communication laws, that they must cease and desist, and that a refusal to do so will result in their plans being reported to the proper authorities.

All such encounters must be reported immediately to the Senior/Master Chaplain. If the Senior/Master Chaplain is unavailable and the circumstances warrant it, then the Chief of Police or the highest-ranking officer on duty should be advised.

Police work is highly stressful and is one of the few jobs where one continually faces the effects of murders, violence, accidents and serious personal injury. A police officer's twenty-plus years of "peacetime combat" wreaks a heavy toll personally and professionally.

No human being, no matter how healthy, well trained, or well adjusted, is immune to the long-term effects of cumulative stress or sudden critical incidents.

In the words of one police veteran, "Policing is a combination of mind-numbing boredom and mind-blowing terror."

Because the nature of policing has changed so drastically in the past decade, many departments have begun to provide psychological services for officers and their families either as an in-house unit or as a contractual arrangement with a private therapist who is not an employee of the department.

One barrier that prevents officers from seeking counseling is the perception that the information they share is not confidential. These concerns are valid because in some cases, the information is not confidential.

WHAT DO OFFICERS WANT?

The seven most important characteristics of a police counseling program were rated in a survey of the Metropolitan Police Officers in Washington, D.C. The results are as follows:

Since a lot of departments today have psychologist on staff. The Psychologist is obligated to the department to document any problems that they feel would be detrimental to the safety of the officer and citizens, regardless of how serious the officer feels about it.

Officers fear that if they tell a psychologist how they truly feel, they will either be deemed unfit to do the job and their job would be on the line and they will be seen as a liability. Either way, they are most apt to tell a department psychologist exactly what they think they want to hear instead of revealing their true feelings in fear that job security, reputation or promotion will be compromised.

A police chaplain is there to listen and not to pass judgment. Unless laws have been broken by the officer or the officer is suicidal or homicidal, a police chaplain will counsel with strict confidentiality.

The officer needs to know without a doubt, that they can discuss the day to day stresses of the job without the fear of it interfering with their professions.

A police chaplain is available to the police officer because they are human beings who don't have to fit into any particular mold or measure up to anyone's standards.

Regardless if the officer is a church member or attends a church at all, the chaplain accepts them as children of God. The chaplain does not have to agree or condone anything an officer does or doesn't do, he accepts that person without judgment and it is vital that the officer is aware of this.

The police chaplain realizes that the police officer is still a human being even after he puts on the badge and gun, with real human emotions. He realizes that they were a person before they were a police officer.

There is an unspoken rule for police officers in that they are not to show emotion during working hours so they either block it out completely or the emotion comes out in anger, domestic violence, addiction or possibly suicide.

It is imperative that departments make available someone for their employees to speak with and to discuss problems and feelings that they would not normally get out to a department head.

CHAPLAIN SERVICES FOR PERSONNEL AND THEIR FAMILIES

Police chaplains offer a wide range of services not only to the department personnel, but also their families. Police work touches the whole family and the chaplain must be able to adequately provide for the needs of the officers and their families.

SERVICES AVAILABLE TO THE OFFICERS AND THEIR FAMILIES

- Grief counseling
- Marriage counseling (limited, the chaplains are not licensed marriage counselors)
- Spiritual guidance counseling
- Substance abuse counseling and support
- Help with domestic abuse issues
- Critical Incident counseling

REFERRALS

The chaplains will assist in making competent referrals to counselors or mental health professionals should the officer or family member need such services.

LISTED IN ORDER WITH MOST IMPORTANT FIRST

1. Licensed professional therapists or chaplains who are completely independent from the department to ensure strict confidentiality.
 2. Long term counseling for officers and family for as many times as we need.
 3. Therapists and chaplains who have many years of experience with the Department.
-
1. On-going stress training for officers and management.
 2. Private, comfortable offices far removed from any police facility.
 3. Free services
 4. Debriefings and mandatory counseling after critical incidents, like shootings.

EMPLOYEE ASSISTANCE PROGRAM

There are at least three fundamental ways the Law Enforcement chaplain differs from a traditional Employee Assistance Program:

- It is personal, with male and female chaplains regularly interacting and building personal relationships through visits to the work place.
- It is proactive, with chaplains taking the initiative to meet and be available to all officers and their families; it is not just a “crisis response” reaction; many problems are much more effectively dealt with in their early stages, thereby reducing the possibility of a serious crisis.
- It offers a much broader range of services when the Chaplain is available for all officers, immediate family members, and the community.

WHAT TO EXPECT

Human Resource statistics indicate that positive results will be seen in a number of areas important to every agency:

- Improved employee attitude, morale and teamwork
- Increased loyalty and commitment to agency and community goals
- Reduced employee conflict; Improved workplace safety
- Decreased absenteeism
- Increased productivity
- Reduced turnover cost and less job related mishaps

WHY SHOULD AGENCIES BE INVOLVED?

Agency leaders do not need to be involved directly in their employees' personal or family lives. They do need to recognize the majority of problem issues for their employees stem from things outside the work place, but come into the work place with the employee and have a negative effect on attendance, attitude and productivity on the job.

The voluntary, neutral, confidential services provided by Law Enforcement chaplains offer agency leaders a way to express interest and concern for employees and give them a resource to help resolve problem issues without getting directly involved. In so doing, the individual employee gets help, their family gets help and the agency "bottom line" gets help for the betterment of the community and all involved.

As Chaplains, we seek to provide a multi-faith and holistic service to Police Officers, families and to the community, offering a friendly ear to anyone in need of religious or spiritual support.

Our approach to Chaplaincy is proactive, however, we do not impose our views on any member of staff or the public, rather we are there to offer support to anyone working within the Trust.

PROACTIVE ACTIVITIES

BRIEFINGS:

- Attendance
- Watches
- During shift change.

RIDE-ALONGS WITH:

- Officers
- Detectives
- Jail Transport
- Mental Health Officers

VISITATIONS:

- Homes
- Hospital
- Employees and families & Citizens upon request

INFORMAL COUNSELING:

- On site
- Leads (supervisors or peers)
- Follow up's

COMMUNITY INVOLVEMENT:

- Department representation
- Public Relations

WEDDINGS:

- Pre-marital counseling for employees and their families
- Wedding planning guidance
- Wedding ceremony

OFFICIAL FUNCTIONS:

- Award Ceremonies,
- Training Academy visits
- Promotion and swearing in

VOLUNTEER CHAPLAINCY PREP:

- Establishing board for chaplain volunteers
- Provide Training, guidance, peer support and continual education programs

BACK UP RESOURCES:

- Establishing a network of referrals
- Configure Resources and referrals to assist employees and families.

NOTES:

CHAPTER 4: DEVELOPING A CHAPLAIN'S ROLE

MINISTRY OF PRESENCE

Presence is a necessary phase of the law enforcement Chaplain's work, and more and more Law Enforcement Officers and their families seek out the Chaplain. Chaplains should provide counseling and consultation for Law Enforcement Personnel and their families for personal, marital, family, spiritual and job-related problems.

UNIQUE DEMANDS

Over the last decade, with 9/11, the Oklahoma City Bombing, hurricanes Katrina, Rita and the rising crime rates throughout the nation, there have been major changes that have demanded an immediate need for policy and procedure revisions in every department in the country.

Today, more than ever, the Law Enforcement profession is unique in its demands and the need for officer and peer support is more vital than ever. According to Clarence M. Kelly, the former Director of the Federal Bureau of Investigation, "The time has come for Americans to understand and appreciate the humanitarian nature of the Law Enforcement profession in more than thirty years in the Law Enforcement profession, I have known thousands of officers, and they are human. They have emotions.

STRESSFUL POSITION

Law Enforcement officers are subject to the same kinds of feelings and tensions as other people. Law Enforcement work is considered one of the highest stress related professions in the country today, that involves considerable provocation on a day to day basis for the average Law Enforcement officer on the street and job related pressures create an added burden on the officer which may affect physical, emotional and personal well-being.

Law Enforcement work is an occupation requiring a high level of emotional stability. Because personal, family or job-related problems are likely to interfere with optimum performance on the job, it is important that counseling services be made available to Officers and their families, particularly those with stress-related problems.

Many officers will opt out on a trip to the department psychologist, unless it is made mandatory by department heads because of the stigma associated with the visit because officers feel that there is a "double jeopardy" effect that comes with a visit to the department "shrink" and feel reluctant to seek their help.

Since a department psychologist is obligated to the department, they have to document any problems that they feel would be detrimental to the safety of the officer and citizens, regardless of how serious the officer feels about it.

Officers fear that if they tell a psychologist how they truly feel, they will either be deemed unfit to do the job and their job would be on the line and they will be seen as a liability. Either way, they are most apt to tell a department psychologist exactly what they think they want to hear instead of revealing their true feelings in fear that job security, reputation or promotion will be compromised.

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It is imperative that departments make available someone for their employees to speak with and to discuss problems and feelings that they would not normally get out to a department head.

TRAINING AND SEMINARS

The head chaplain will be responsible for:

- Officer, Supervisors and employee stress management
- PTSD acute and accumulated
- Family and finance
- Children and teen crisis management

FUND RAISING PROGRAMS:

- Church and shelter fundraisers
- United Way
- Fundraisers for those in need

PULPIT FILLING:

- For requesting churches
- Church services for officers, families and management on duty
- Services for extended scenes rescues, disasters and mass destruction.

PUBLIC RELATIONS:

- Information to the media
- Community awareness
- Brochures, videos, newsletters to department employees concerning programs.

BOARD MEETINGS:

- Planning and fiscal budgets
- Programs
- Daily, weekly, monthly and yearly reports.

It is the responsibility of the Chief of Police to organize training and supervise Chaplain Volunteers. This program shall be composed of duly ordained clergy who desire to serve the Law Enforcement community. The purpose of this program is to assist the Chaplain in ministry to the Agencies involved.

The Chief of Police or an appointed department supervisor shall be responsible for the Administrative duties of the Chaplaincy Program.

The Chief of Police shall supervise the Chaplaincy Program Ministry and oversee the Pro-active and Reactive outreaches of the Supervisory and Associate Volunteer Chaplains.

CHAPLAIN RESPONSIBILITIES

- Death Notifications
- Attempted or actual suicides
- Hostage Situations
- Lost Children
- Sexual Assaults

- Child Abuse
- Domestic Disturbances
- Traffic accidents involving death or serious injury
- Line of duty deaths or injury of officers or personnel
- Home deaths or accidents, industrial accidents, fires, drowning, etc.
- Hospital or home visits for police personnel
- Counseling personnel and provide Follow-up
- Critical Incident Stress Debriefing or defusing
- Major events involving large numbers of law enforcement officers
- Attend or perform funerals of active or retired police officer
- Conduct memorial services
- Attend briefing
- Attend department graduations, promotions, ceremonies, dinners and social events and offer invocation or benediction.
- Enhance public relations
- Assist with major disasters
- Attend council meetings at request
- Attend Department planning meetings upon request

WHAT A POLICE CHAPLIAN SHOULD KNOW

- The Chaplain must know who he/she is. A chaplain must know, without a doubt, that he is called by God. He must know that call is real and be willing to go to the fields to what God has sent him/her out to do.
- The Chaplain must make a commitment and take it seriously.
- They must be willing to make time to visit officers and families and become familiar with their lives. They must take the time to make regular visits, daily if possible, to the department and be available when needed.
- The chaplain must assume the responsibility for building relationships. They need to initiate conversations, stay positive, and observe changes in behavior. They need to apply the knowledge they have to building morale, promote confidence and counsel for the betterment of the department.
- A chaplain must be a good listener. They must be willing to get to know the officers and families and follow up on what they know. (Example). I know your baby was sick, is she better now? I hear you went fishing, did you catch anything? You pick up information from being around the department in conversations.
- A chaplain should be an affirmer. The police profession is one of the most “thankless” jobs that you can have. It’s normally the bad things you did or the things that you did wrong that you hear about. In certain instances, it may have been out of your control

be it a supervisor or irate citizens due to something that occurred that they were angry about.

- The chaplain should always be affirmer letting the officer know that they are doing a good job. An “at-a-boy helps morale much more than fault finding. The chaplain plays a huge role in this matter. A simple comment usually makes all the difference.
- A chaplain should acknowledge special events. Birthdays, weddings, anniversaries, graduation, should always be acknowledged. Deaths should be followed up by a visit in person to the funeral home. It will show that the chaplain cares about the officer and what happens in their life. These special remembrances become the foundation on which the chaplain achieves acceptance.
- Acceptance will never come overnight. The trip behind the thin blue line is not a short or brief journey but it will be worth the taking.

NOTES:

CHAPTER 5: VOLUNTEER CHAPLAIN LIABILITY

Before the last decade, lawsuits against volunteers were rare. In the mid-1980s, law suits against volunteers grew in number. At about the same time, the insurance picture for volunteers and nonprofit organizations darkened. Premiums increased dramatically, coverage exclusions increased, and several types of coverage became unavailable.

As Insurance premiums began to increase, non- profits began to cut back on services. Some agencies eliminated insurance coverage all together, increasing the chance that an injured party would sue volunteers in search of a "deep pocket."

As law suits became more prevalent, volunteers became more apprehensive and reduced their willingness to serve. As a result, many organizations suffered board resignations and volunteer recruitment difficulties.

Legislators began proposing ways to remove the liability fear from volunteering. On the national level, Congressman John Porter (R-IL) dramatized the problem by assigning bill number 911 to his proposed *Volunteer Protection Act*.

Congressman Porter designed the federal bill to spur state adoption of volunteer protection laws and on June 18, 1997, President Clinton signed into law S.543, the "Volunteer Protection Act of 1997."

The legislation, which took effect 90 days from the date of enactment, was the culmination of over ten years' effort to enact a federal law to provide some protection from liability for volunteers. The Act provides civil liability protection for non-profit or government volunteers.

Although every state now has a law pertaining specifically to the legal liability of volunteers, the statutes lack uniformity and consistency. In adopting these laws, state legislatures tried to balance the choice of protecting a volunteer from personal liability with assuring compensation to the innocent victim of the volunteer's negligence.

Only about half the states protect any volunteers other than directors and officers. Moreover, every volunteer protection statute has exceptions. The most common exclusions are those for certain types of conduct, the use of motor vehicles, and federal actions.

Most of the laws permit claims based on a volunteer's willful or wanton misconduct. Several laws also exclude gross negligence or another category of error above negligence.

Definition: Willful and Wanton: Most of us have heard the phrase "willful and wanton misconduct" many times, but may not have understood exactly what it means or why it's used.

Although the exact definition may differ from state to state, or slightly different terminology may be used, it's generally taken to mean a course of action that shows actual or deliberate intent to harm or which, if the course of action is not intentional, shows an utter indifference to or conscious disregard for a person's own safety or the safety or property of others. In other words, it means something much more serious than ordinary negligence, which is simply a failure to exercise due caution.

NEGLIGENCE - The failure to use reasonable care. “The doing of something which a reasonably prudent person would not do, or the failure to do something which a reasonably prudent person would do under like circumstances”. A departure from what an ordinary reasonable member of the community would do in the same community.

Negligence is a 'legal cause' of damage if it directly and in natural and continuous sequence produces or contributes substantially to producing such damage, so it can reasonably be said that if not for the negligence, the loss, injury or damage would not have occurred.

Negligence may be a legal cause of damage even though it operates in combination with the act of another, a natural cause, or some other cause if the other cause occurs at the same time as the negligence and if the negligence contributes substantially to producing such damage.

In general, most states say that the law declares that everyone is responsible for an injury occasioned to another by his want of ordinary care or skill in the management of his property or person that, of course, means that people are generally liable when they negligently injure others.

In liability claims, claimants often plead for recovery of exemplary/punitive damages from the defendant, thereby bringing to harsh light the fact that their personal assets have been placed at risk.

The burden on claimants to prove entitlement to such damages, however, is quite heavy. As such, while requests for exemplary/punitive damages are ubiquitous in liability claims, it is quite rare that the underlying facts, unless very egregious, support such allegations, both at trial and on appellate review.

Under current Texas law, a claimant is not entitled to exemplary/punitive damages unless claimant proves that the underlying injury or event on which the request for exemplary/punitive damages is based results from fraud, malice, or gross negligence or:

- (1) Is based on a separate statutory provision that both establishes a cause of action and authorizes the recovery of exemplary/punitive damages
- (2). When exemplary/punitive damages are sought in liability claims, they are most frequently based on allegations of malice and/or gross neglect.

The existence of fraud, malice, and/or gross negligence must be proven by “clear and convincing” evidence

(3). “Clear and convincing” evidence is defined as “the measure of the degree of proof that will produce in the mind of the Trier of fact a firm belief or conviction as to the truth of the allegations sought to be established”

(4). This standard has been described as falling “between the preponderance standard of civil proceedings and the reasonable doubt standard of criminal proceedings”

(5). Further, exemplary/punitive damages may be awarded only if the jury is unanimous in deciding liability for exemplary/punitive damages and the amount of exemplary/punitive damages to be assessed

(6). In addition, there is authority that supports the contention that in liability claims, the elements of “malice” and/or “gross negligence” need to be established by expert testimony.

MALICE: is defined as “a specific intent by the defendant to cause substantial bodily injury or harm to the claimant”

This is a pretty straightforward definition. Malice is quite difficult to prove. Basically, to establish malice, a claimant must show not only that the defendant had some ill will towards the victim, but that it was a purposeful act on that ill will to cause some serious injury.

GROSS NEGLIGENCE: as defined, is a much more nebulous and complicated concept. Gross negligence is an act or omission “which:

(1) When viewed objectively from the standpoint of the actor at the time of its occurrence involves an extreme degree of risk, considering the probability and magnitude of the potential harm to others; and:

(2) Of which the actor has actual, subjective awareness of the risk involved, but nevertheless proceeds with conscious indifference to the rights, safety, or welfare of others”.

To establish gross negligence, there must be more than evidence of “simple negligence” Gross negligence, however, can be established through circumstantial evidence.

To satisfy the “extreme risk” part of the definition, there must be evidence of more than “a remote possibility of injury or even a high probability of minor harm.”

To establish extreme risk, the evidence must show “the likelihood of serious injury” The “actual awareness” element requires evidence that “the defendant knew about the peril, but its acts or omissions demonstrated that it did not care”.

DEFINITION: SIMPLE NEGLIGENCE: Simple negligence. Simple negligence is the absence of due care, Simple negligence is a lesser degree of carelessness than culpable negligence. ..

4 ELEMENTS OF NEGLIGENCE

- Duty
- Breach of duty
- Damages
- Proximate causation

These are the four elements that must be present to cause an action for negligence. Each of the four elements must be proven in a court of law before negligence can be proven.

LEGAL OBLIGATIONS OF VOLUNTEERS

Like every individual they have legal duties and responsibilities, and if they fail to meet those duties they may be liable for the injuries or damages they have caused.

A volunteer has a duty to take reasonable care when carrying out their duties. Failure to do so can sometimes amount to the tort of negligence. Failing to do something can also amount to negligence. Basically there are five elements of negligence:

1. **Duty:** There must be a legal obligation to act in a certain way towards others.
2. **Breach of Duty:** The conduct must be below the standard a reasonable person would have shown in the same or similar circumstances.
3. **Damages:** Someone must have been injured or suffer loss because of the failure to act properly.
4. **Causation:** There must be a causal connection between the negligent act and the injury or damage. The injury or damage must have been foreseeable.

OBLIGATION TO ACT

Once an individual volunteers their services an obligation arises which requires the volunteer to carry out the act they have volunteered to do.

For instance, where a volunteer is involved with the supervision of children, other volunteers or involved with people with disabilities, they must act in a certain way consistent with the duties they have volunteered for.

Volunteers might also become liable for damages where an individual under their care or someone affected by their actions is injured, or property damaged.

REASONABLE PERSON

The reasonable person standard measures the conduct of volunteers. Volunteers must behave to the same standard of care that would be shown by a reasonable person with similar ability and experience under the same circumstances.

Where a volunteer falls short of this standard they may be held liable for negligence. If a volunteer has training in a particular background then she/he would be expected to use his or her special skills if someone was injured.

INJURY OR LOSS

Before anyone can sue a volunteer or an organization the individual must have been injured or have suffered a loss. This can include emotional harm as well as physical.

Emotional harm requires a diagnosis of an actual mental illness or injury such as depression, mental anxiety or the worsening of such an illness. However, all injury or loss must have been a reasonably foreseeable consequence of the volunteer's action or lack of.

Many departments get into trouble in this area. Many departments fail to make sure proper background checks are completed on applicants and fail to make sure that the Chaplains have obtained the necessary training needed to do a proper job.

When Chaplains are responsible for crisis counseling for Officers, citizens etc, it is a huge liability if the Chaplain has not provided valid, current proof of training and education. That should be the first thing considered before appointment of a Chaplain.

CAUSAL CONNECTION

For the volunteer or organization to be found liable in negligence, the injury or damage sustained must be causally connected to the negligent actions of the volunteer. A volunteer will not be liable if the damage or injury is the result of the injured person's own negligence.

FORESEE ABILITY

It is the volunteer's job to prevent foreseeable injury or damage. However, many activities carry risk and it is up to the volunteer to consider those risks prior to carrying out their activity.

This involves an assessment of the amount of risk involved; a consideration of the ease at which the risk can be minimized or eliminated; and the importance or value of the activity. Not all risk can be eliminated but a volunteer has a duty to consider and weigh all foreseeable risks that could ensue.

CONFIDENTIALITY

Volunteers have a duty of confidentiality. This obligation to keep information confidential increases with the kind of service a volunteer provides.

Volunteers who leak information can be found liable for any loss or injury suffered by the person whose information was leaked. However, in some cases a volunteer may have a duty to reveal information where another person is in serious danger or at risk of serious injury.

Volunteers who provide services to children have an extra duty to report child abuse. Volunteers should inform their clients or participants if they feel they may have to reveal confidential information in the future.

Volunteers also have a duty of confidentiality towards the organization they are representing and other duties include the duty not to assault, and the duty not to discriminate. Where children are involved there is a duty to supervise, duty not to abandon, a duty to rescue and a duty not to use excessive force.

When providing services for seniors or people with disabilities, there is the additional duty to accommodate people with disabilities.

Volunteers who give advice or counsel must take particular care. If they give out bad information they may be liable in negligence. However four conditions must be present and these are:

1. The volunteer must be in the business of giving advice; Counselor, Psychologist etc
2. The volunteer must claim to be, or have the appearance of being, skilled and able to give out advice;
3. It must be foreseeable that the other person will rely on the volunteer's advice or statements;
4. The client must rely on the information and suffer a loss or damage as a result.

Special duties arise where the volunteers are involved in outdoor activities, driving, preparing printed matters, or organizing special events and fundraisers.

Volunteers undertaking such activities must ensure that they are adequately trained and knowledgeable in the particular area they are venturing into.

Although an organization will likely be found liable, through vicarious liability, if something does go wrong, this does not mean that the individual volunteer is sheltered from such liability.

The individual volunteer is always responsible for his/her own conduct and such conduct falling below a reasonable standard and out with the scope of his/her volunteer duties may render that volunteer liable in law.

RESPONSIBILITIES TOWARDS VOLUNTEERS

Voluntary organizations and the people that run them owe legal duties to their staff, participants, directors, and the volunteers. This duty also extends to anyone affected by the acts of the organization that suffers damage. Some of the duties of an organization are:

1. Duty to take reasonable care (negligence)
2. Duty to those injured by volunteers
3. Duty to volunteers.
4. Duty to provide safe premises.
5. Duty not to discriminate.

An agency or organization must also ensure that volunteers are legally permitted to volunteer. Visitors and newcomers should not be permitted to volunteer if they do not have proper documented training.

THE DUTY TO TAKE REASONABLE CARE

Like the individual volunteer, the organization has a duty not to injure anyone or damage property that the organization may foresee may be a result of its actions.

This duty is the same as for the volunteers who were discussed earlier, however the organization's duty is much broader. This duty extends to making activities safe, and the extent and range of duties changes with the type of activities involved.

This standard of care is the same as any other organization and therefore is not reduced if the organization engaged in the activity is unincorporated or a charitable organization.

Safety and prevention is the most prudent route for all organizations to take. This requires carrying out risk assessments to identify and eliminate possible risks, thereby reducing its liability.

INJURY BY VOLUNTEERS

An organization may be held liable for the actions of their volunteers through Vicarious Liability.

This means that when a volunteer is sued as a result of his actions, the organization may be held responsible at law because of the relationship between the volunteer and organization. However an organization will only be found liable if the following two conditions are met:

1. The volunteer was under the direction and control of the organization; and
2. The volunteer was acting within the scope of his or her responsibilities when the incident occurred.

The Volunteer must be directed by commanding officials on what should be done, when, where, and how their responsibilities should be fulfilled. For instance a volunteer who acts under the supervision of a paid staff member they will be seen to be under the control and direction of the organization.

When a volunteer is taking part in an activity or program approved by the organization they are considered to be acting within the scope of his/her responsibilities, even if he/she has not carried out their instructions correctly.

Where a volunteer does something outside the scope of their volunteer activities the organization may not be held vicariously liable. However, an organization can still be held liable for such actions where a volunteer has been seen to have ostensible authority.

This law was developed to protect businesses that contract with people who hold themselves out to be representatives of an organization, but later try to back out of responsibility.

Two conditions must be present for ostensible authority to be found:

1. The volunteer reasonably appeared to have the authority to do the act (e.g. sign contracts).
2. The other party did not know that the volunteer lacked the authority to do business on behalf of the organization.

VOLUNTEER DUTIES

The agency or organization has a duty to protect its volunteers from unnecessary risk and danger. The fact that volunteers are unpaid help and the organization is benefiting from their services has no bearing on the protection from unnecessary risks.

This duty extends to hiring competent and qualified staff to oversee volunteer activities, as well as selecting competent and qualified volunteers to carry out the organizations activities and making sure that the volunteers are trained in the activity.

Facilities must be adequate and there must be suitable and appropriate safety equipment available on the premises.

Training in the use of safety equipment is also a reasonable standard expected of an organization. Training and screening for staff and volunteers to carry out the activities mandated is also expected so as not to put participants at risk.

DUTY TO PROVIDE SAFE WORKING CONDITIONS

Every agency or organization has an obligation to provide safe working conditions to anyone who enters in or on the property. This extends to space or premises to facilitate its activities or events. This duty extends to volunteers for mandated activities.

DISCRIMINATION

Most Laws in this country, protects all people from discrimination against someone based on race, religion, marital status, family status, physical or mental disability, sex, sexual orientation, or age.

It is better for organizations to act without discrimination and assume that protection from discrimination extends to any activity or service of the organization.

This includes a duty not to discriminate when selecting volunteers and participants, protecting them both from discrimination once they have been selected and taking reasonable steps to prevent or stop discrimination when it occurs.

Agencies and organizations need to realize that they have a legal duty to reasonably accommodate individuals. This means that they may need to change policies and procedures that are discriminatory based on, for example, religious grounds.

Activities that prevent disabled people from participating, working or attending must be adjusted to accommodate their needs. The responsibility is on the organization to make reasonable attempts to accommodate, by correcting or changing any policies, procedures or activities, which discriminate.

An organization may need to show that it made reasonable efforts to accommodate a person up to the point of where they encountered financial hardship or some other serious issue prevented the accommodation from going further.

BOARD OF DIRECTORS/COORDINATOR'S AND LIABILITY

The Board of Directors or coordinators assume responsibility for the affairs of the agency or organization and owes a duty of trust to participants, volunteers, other board members, staff, and members and to anyone who comes in contact or is affected by the acts of the board.

There are laws and statutes which a director or coordinator must comply with. A director or coordinator must use his/her skill and experience while managing the affairs of the organization. Additionally, he or she has a duty to put the interests of the organization before their own personal interests. Failure to do so can leave the organization liable for damages, or the department heads personally, in many situations.

A department's liability is more of a threat now than ever before. Department heads used to enjoy limited or no liability for damages when things went wrong. However, case law has progressed and the department can no longer hide securely behind the shield.

Department's heads have been held personally liable in a number of situations. There are even statutes which impose liability for directors, Chiefs, and department heads and their officers in certain circumstances. The changes in the law have forced departments and businesses to rethink their risk management process.

Not that many years ago, claims against non-profit organizations and their board members or coordinators used to be rare however; they have become more common in the past 5 years.

However, there is a growing fear of potential liability. The important point here is that it is the responsibility of directors and their officers to assess potential liability and put procedures and practices into place, which will reduce that risk. Adequate insurance is another useful and necessary means to have in place.

PERSONAL AND DEPARTMENT FINANCIAL OBLIGATIONS

The head of a non-profit organization can be held personally responsible for the organization's financial obligations and debts. The director of an unincorporated organization is generally responsible for the organization's debts. However, that protection is not absolute, if the director fails to comply with the requirements of the statutes governing it.

A director can also be held personally liable if he/she has breached their duties, such as mismanaging the organization's funds, making improper loans, or making unlawful personal profits. The Employment Standards Act and Income Tax Act impose additional obligations, which may render a director personally liable when the obligations imposed are not met.

BOARDS OF DIRECTORS DUTIES

Volunteer directors owe legal duties to their organizations, staff, volunteers, participants, and anyone who is affected by the acts of the board. These duties include:

FIDUCIARY DUTIES, SUCH AS;

- Duty to perform with diligence, care and skill,
- Duty to act with prudence, Duty to avoid a conflict of interest.
- Duty to maintain the organization's legal status;
- Duty to employees; and
- Duty to act within the scope of their authority.

FIDUCIARY DUTIES

A fiduciary must always act without putting his/her own interests before the interests of their organization. This includes a duty to act fairly and to use the skill and experience they bring with them to the job.

Any director acting as a fiduciary must exercise a high standard of care in protecting the interests of the organizations. Directors are expected to attend meetings and oversee the day-to-day operations and activities.

They must participate in decision-making and cannot rely on the opinions of others when decision-making unless they have made reasonable enquiries. A director has a duty to review and understand the financial statements.

He/she cannot rely on their own lack of skill to remain ignorant of the situation. They have a duty to ask Duty to avoid a conflict of interest.

- Duty to maintain the organization's legal status
- Duty to employees; and
- Duty to act within the scope of their authority

Any board member, who reasonably relied on the financial statements, believing them to be true and accurate, or relied on false statements of other directors, may not be found liable for other people's fraud or negligence. However, this would be based on the premise that they had no reason to suspect that the financial statements were false or misleading and they were conscientiously doing their job.

Directors have a duty to act prudently. This means they should act cautiously and carefully, anticipating the results of their actions. The duty to act prudently also means that a director should avoid taking unnecessary risks.

The duty to avoid conflict of interest requires directors to put the interests of the organization above their own, and to declare any possible conflicts. Where there is a declared conflict the director must step back and take no part in the decision-making regarding that conflict.

When a conflict of interest occurs the director must be careful to maintain a distance in relation to any decisions or transactions that may result in personal gain. This duty encompasses a duty to disclose, which must be:

- Full and honest.
- Be made promptly to each director.
- Include the specific form of the interest.
- Include the benefit that would be received.

A volunteer, at whatever level, has various duties, obligations and responsibilities. The basic duties, such as taking reasonable care or the duty of confidentiality or not to discriminate and to accommodate, are applicable to all levels of volunteers.

The higher the position in the organization or agency comes more responsibility, the greater the obligations or duties. Additionally, expectations and standards of care increase with responsibility and position. Once a volunteer takes on a responsibility or task, they are expected to use the skills and training they bring to the job.

A volunteer should ensure that the organization it is supporting has adequate insurance, as well as an appropriate selection and training procedure.

Department heads have greater responsibility and although they can delegate responsibilities to the organizations officers they cannot hide behind their own ignorance of the affairs of the organization to avoid liability.

Department heads must ensure that they are familiar with all legislation governing their organizations. Additionally, they need to be aware of the various duties owing to their volunteers, staff, and organization, as well as those outside the organization and carry out risk management assessments.

And finally, a department heads must ensure that the organization stays within its stated purpose and goals, to ensure the insurance coverage remains valid, and the status of the organization is maintained.

WHO IS A VOLUNTEER?

The federal law defines volunteer very broadly. It is defined to mean “an individual performing services for a nonprofit organization or a governmental entity who does not receive

(A) Compensation (other than reasonable reimbursement or allowance for expenses actually incurred) or:

(B) Any other thing of value in lieu of compensation, in excess of \$500 per year.” The statute protects a volunteer serving as a “director, officer, trustee, or direct service volunteer.”

QUALIFICATIONS

To qualify as an organization whose volunteers are entitled to the protections of the federal statute, the organization must be

(1) a 501(c)(3) organization, or

(2) Any non-for-profit organization which is organized and conducted “for public benefit and operated primarily for charitable, civic, educational, religious, welfare, or health purposes” even if it has not applied for 501(c)

(3) Status. In addition to non-profits, all governmental entities meet the qualifications of the federal statute.

This statute does not prevent the non-profit organization or governmental entity from being sued and held liable for a harm caused by a volunteer. This law affects only the liability of the volunteer. Also, nothing in this law prevents the non-profit or governmental entity from suing the volunteer.

THE FEDERAL MINIMUM STANDARD

Many states have laws that provide for immunity from liability for the conduct of volunteers. Unfortunately, there is no uniformity from state to state, which makes it difficult for a non-profit operating across state lines because you are never sure what standards apply.

The new federal legislation deals with this problem by establishing a fresh start with a federal minimum standard, which is called preempting state law. All state laws that provide less protection for volunteers than provided by the federal statute are made invalid by the federal law therefore as of right now, only a state law that provides more protection for the volunteer remains in force.

There is a provision that permits a state to elect to go its own way, but to do so it must enact a statute declaring the law not applicable and must do so after the effective date of the federal law. Of course, all states are covered initially and only if a state elects non-applicability will it not be covered. So far, none has done so because none has had the opportunity to do so.

Valid State Requirements: Certain state law requirements are explicitly saved from the pre-emption and fresh start provisions. These state laws must be followed in order for the volunteer to claim the protection of the federal law.

(1) Risk Management Laws: A state law requiring an organization or entity to adhere to risk management procedures, including mandatory training of volunteers is saved.

(2) Organizational Liability Laws: A state law providing that a non-profit or governmental entity is liable for the acts or omissions of its volunteers to the same extent as an employer is liable for the acts or omissions of its employees is saved.

(3) Suits Brought by the Government: A state law that make a limitation of liability inapplicable if the civil action is brought by an officer of state or local government pursuant to state or local law is saved.

(4) Insurance Requirement Laws: A state law that requires a nonprofit or governmental entity to maintain an insurance policy that covers volunteers or to have some other source of recovery available is saved.

REQUIREMENTS AND LIMITATIONS

The federal law has several requirements and limitations.

(1) Scope: The harm must have been inflicted by the volunteer acting within the scope of the volunteer's responsibilities in the organization.

(2) Licensure: If the harm-inflicting activity required a license, certification or authorization, the volunteer had the appropriate credentials.

(3) Not criminal or Gross Conduct: The harm was not caused by "willful or criminal misconduct, gross negligence, reckless misconduct, or a conscious, flagrant indifference to the rights or safety of the individual harmed by the volunteer."

(4) Not Motor Vehicle: The harm was not caused by operation of a motor vehicle, vessel, aircraft or other vehicle for which the state requires the operator to be licensed.

NO SPECIFIED CRIMINAL ACTS

The harm was not caused by conduct that is a crime of violence or an act of international terrorism for which the volunteer has been convicted, a hate crime, a sexual offense for which the volunteer has been convicted, misconduct for which the volunteer has been found to have violated a federal or state civil rights law, or conduct engaged in while the volunteer was under the influence of alcohol or any drug.

ADVISE VOLUNTEERS

This new federal law will do no good to anyone unless its benefits are communicated to volunteers and prospective volunteers because its purpose is to encourage volunteerism. You might consider communicating with them by letter, newsletter or handout sheet something like the following:

The Supremacy Clause of the United States Constitution prevents states from cutting off federal claims. Thus, the Internal Revenue Service can sue a volunteer director for failure to comply with tax withholding rules, and wronged employees can sue for civil rights or employment violations.

WHERE IT DOES NOT APPLY

The state law preemption also does not apply with respect to any of the following provisions that may be incorporated in existing state laws:

- (a) The requirement that a nonprofit adhere to risk management procedures;
- (b) Laws that make a nonprofit liable for the acts or omissions of its volunteers to the same extent that an employer is liable for the acts or omissions of its employees;
- (c) Provisions that render the immunity inapplicable if an officer of a state or local Government brought the civil action; and
- (d) Provisions that limit the applicability of immunity to nonprofits that provide a "Financially secure source of recovery," such as insurance.

In addition, the new federal law's protections do not apply to civil actions in which all parties are citizens of the state where the state has enacted a statute declaring that the VPA does not apply.

Simply stated, **Public Law 105-19** provides immunity for volunteers serving nonprofit organizations or governmental entities for harm caused by their acts or omissions if:

- The volunteer was acting within the scope of his or her responsibilities.
- If appropriate or required, the volunteer was properly licensed, certified or authorized to act.
- The harm was not caused by willful, criminal or reckless misconduct or gross negligence.
- The harm was not caused by the volunteer operating a motor vehicle, vessel, or aircraft.

Nevertheless, despite the VPA, many volunteers remain **fully liable** for any harm they cause, and all volunteers remain liable for some actions. The Act only applies to 501(c)(3) organizations and governmental entities. In addition, the VPA does not prevent a nonprofit from bringing an action against a volunteer.

Other exceptions to the liability limitation include misconduct that is a crime of violence, hate crime, sexual offense, violation of federal or state civil rights law, and acts committed under the influence of alcohol or drugs.

VOLUNTEER PROTECTION ACT

The VPA does not affect the liability of nonprofits and governmental entities with respect to harm caused by volunteer actions. According to Congress, the intent of the ***Volunteer Protection Act***, first introduced in 1986, was to "shield volunteers from being sued except in cases of willful or wanton misconduct."

In the Republican Weekly Radio Address delivered on April 19, 1997, Congressman Porter explained that "The idea here is that if litigation must arise from volunteer activity, the nonprofit organization itself should be named, not individual volunteers."

WHAT ARE THE BENEFITS OF FEDERAL VOLUNTEER PROTECTION?

Legislative sponsors and nonprofit proponents of federal volunteer protection have argued that the fear of liability has had a negative effect on volunteerism in America. Advocates of the new law have argued that the new law will enhance volunteerism by:

Encouraging a comprehensive and consistent approach to volunteer immunity so that volunteers serving in different states will be treated similarly. The new law will fill the gaps created by the divergent and wide-ranging differences in current state volunteer immunity laws.

Reducing prospective volunteers' fear of liability: This enhancement is required for nonprofit organizations to meet the increasing demand for volunteer services demanded by growing gaps in government and private-sector programs. By reducing the threat of frivolous lawsuits against good-hearted, well-intentioned volunteers, the new law will increase volunteerism and much needed community involvement. \

NEGATIVE CONSEQUENCES OF FEDERAL VOLUNTEERS PROTECTION

The new Volunteer Protection Act has several potentially negative consequences:

- Volunteers and nonprofit organizations often serve highly vulnerable populations that are unable to select their volunteer caregivers. Without the fear of being held liable except for wanton or criminal acts, volunteers may act inappropriately. Volunteers may be more likely to take unacceptable risks or accept assignments and responsibilities for which no one has trained them. In addition, volunteers may not take their responsibility of extraordinary care for vulnerable populations seriously and over time feel less accountable for their actions.

- The growing emphasis on risk management may diminish. Risk management provides a means of protecting clients from harm, safely administering volunteer programs, and preventing injuries.
- In many respects, the fear of liability has been an effective motivator for staff and volunteers to seek training and support in designing risk management programs.
- The current tort system provides incentives for volunteers (and others) to exercise due and reasonable care. Most Americans expect the people to whom they have entrusted the care of their children, elderly parents, and others to follow the reasonable person standard.

The Act provides an unfortunate consequence of the states' volunteer immunity laws has been the creation of a false impression that volunteers are immune from lawsuits. The new ***Volunteer Protection Act*** will further fuel existing misconceptions about immunity and cause some to ignore the continuing possibility of suits against nonprofits and their volunteers.

The truth is that many volunteers remain ***fully liable*** for any harm they cause, and all volunteers remain liable for some actions. In addition, only a small percentage of the nation's 1.4 million nonprofits purchase liability insurance.

Those who believe they are immune will not be adequately prepared to deal with the consequences (including the financial burden) of lawsuits when they occur.

While suits against nonprofits and nonprofit volunteers remain relatively rare, when they are filed, the impact on small to mid-sized agencies can be civil liability protection for non-profit or government volunteers if:

- The volunteer was acting within the scope of his/her responsibility;
- The volunteer was properly licensed, certified or authorized to engage in the activity or practice (if required by the state in which the damage occurred) and those activities were within the scope of the volunteer's responsibility;
- The harm was not caused by willful or criminal misconduct, gross negligence, reckless misconduct or a "conscious, flagrant indifference" to the rights or safety of the individual harmed by the volunteer; and
- The harm was not caused by the operation of a motor vehicle, aircraft, or other vehicle for which an operator's license or insurance is required by the state.

PRE-EMPTION AND STATE ELECTION OF NON-APPLICABILITY

The federal Volunteer Protection Act pre-empts existing state laws except those (like New Jersey's) that provide broader volunteer protection than the federal law. However, the new law does allow states to enact their own legislation to make the federal law inapplicable in a particular state.

EXCEPTIONS

The federal statute allows states that have certain existing restrictions on volunteer immunity to retain those limitations without having to take the affirmative step to enact new legislation. These restrictions, which states may enact at a later date if they so choose, include:

- Requiring non-profits or governmental entities to adhere to risk management procedures, including mandatory training of volunteers;
- State laws that make the organization's liability for the acts of its volunteers consistent with its liability for the acts of its employees;
- Providing that volunteer immunity is inapplicable if the lawsuit is brought by an appropriate state or local officer to enforce a state or local law; or
- Requiring, as a condition of limited liability, organizations or governments to provide a financially secure source of recovery for individuals who suffer harm as a result of actions taken by a volunteer. Acceptable sources of recovery could include an insurance policy with specified limits, comparable coverage from a risk pooling mechanism, equivalent assets or alternative arrangements that demonstrate that the organization could pay for losses up to a specified amount.

NEW FEDERAL LAW PROTECTING VOLUNTEERS FROM (PERSONAL LIABILITY)

In September 1997, a new federal statute entitled the Volunteer Protection Act of 1997 ("the Act") took effect. This new statute provides immunity from **personal liability** only to volunteers working for non-profit and charitable organizations. It governs all claims based on incidents that took place after that date. This article is intended to provide a basic summary of the provisions of the Act.

THE SCOPE OF THE ACT

For the purposes of the Act, a "non-profit organization" is any organization allowed tax-exempt status as a non-profit. Organizations such as, churches, synagogues, civic charities or educational organizations would be included in this definition.

In short, any organization entitled to non-profit status under the Tax Code is probably well within the scope of the Act.

The other important definition is that of a "volunteer" for the purposes of the Act. A "volunteer" is defined as a person who provides services to a non-profit organization but does not receive compensation or anything of value in excess of \$500.00 per year for his or her services.

A person may receive reimbursement of his or her expenses and still be protected as a volunteer by the Act.

For organizations that reimburse officers or volunteers for their expenses based on the submission of receipts or invoices, there should be no problem showing that these people are "volunteers" under the Act.

IMMUNITY FROM PERSONAL LIABILITY

The Act states that a volunteer for a non-profit or charitable organization may not be held personally liable for harm caused in the course of his or her work for the organization if certain criteria are met. If all of these criteria are not present, then the volunteer could be held personally liable.

First, the volunteer must have been acting within the scope of his or her responsibilities for the organization at the time the harm took place. In other words, a person must be doing something that he or she is supposed to do or required to do in order to further the activities of the organization.

Exactly what activities fall within the scope of a volunteer's responsibilities for the organization will depend on the volunteer's position and the nature of the organization.

It's unclear as of yet, the personal liability in regards to Police Chaplains because the scope of their responsibilities fall in a totally different liability spectrum.

Second, the volunteer must be properly licensed, authorized or certified to do the thing that he or she was doing at the time the harm took place. This criterion applies only if a license, authorization or certification is required in order to undertake the activity.

For example, professionals such as doctors, nurses, lawyers, et cetera, providing their services to an organization as professionals, should be properly licensed and in good standing in their respective professions. Whether or not a license or certification is required for a particular activity will depend on the nature of the activity and the applicable state or local laws.

Third, the volunteer must show that the harm in question was not caused by his or her willful or criminal misconduct, gross negligence, reckless misconduct or a conscious, flagrant indifference to the rights or safety of others.

These terms are all legal terms with specific meanings that can vary slightly from state to state.

But, in general, merely being careless or inattentive is not willful, gross or reckless – to rise to a level of reckless or gross misconduct, the volunteer usually must know that the thing he or she is doing is wrong or against the rules, and do it anyway.

Again, the kind of conduct that is considered reckless, grossly negligent or willful misconduct will depend greatly on the specific circumstances.

The final requirement is that the harm in question not has been caused by the volunteer's operation of a motor vehicle or other vessel for which an operating license is required.

There are a number of exceptions to the general immunity afforded by the Act.(fn10) A volunteer may still be held personally liable for harm he or she causes in the following situations:

- If he or she commits a crime of violence or an act of international terrorism
- If he or she commits a hate crime
- If he or she commits and is convicted for a sexual offense
- If he or she violates a federal or state civil rights law
- If he or she was under the influence of alcohol or an intoxicating drug at the time he or she committed the acts (complained of

Each of these exceptions is defined by reference either to the applicable state criminal laws or to specific federal laws.

LIMITATIONS ON DAMAGES

In addition to dealing with issues of liability, the Act also limits the kinds and amounts of damages that can be awarded against a volunteer who is being sued for activities on behalf of a non-profit or charitable organization. The first limitation on damages relates to punitive damages.

Punitive damages are damages that are not related to the actual losses, injuries or harm suffered by a person.

They are generally assessed based on how bad the defendant's conduct was. Punitive damages are intended to punish a wrongdoer for exceptionally bad conduct, not to compensate anyone for losses.

The Act states that punitive damages may not be awarded against a volunteer who has been acting within the scope of his or her duties unless certain criteria are proven at trial by clear and convincing evidence.

Specifically, in order to obtain punitive damages, the plaintiff must prove that the volunteer's actions rose to a level of willful or criminal misconduct, or exhibited a conscious, flagrant indifference to the rights or safety of others.

Based on this standard, merely being careless would not result in an award of punitive damages, even if the volunteer was somehow held personally liable for his or her carelessness.

Another section of the Act limits a volunteer's liability for damages for non-economic losses.

Non-economic losses include claims for pain and suffering, emotional distress and other non-tangible losses. A volunteer may be held personally liable for such losses only to the extent that he or she is responsible for the overall harm alleged.

This limitation makes the most sense when expressed in an example. Imagine a scenario in which a plaintiff claims emotional distress while he was being counseled by the Chaplain. The plaintiff sues the Chaplain and the Police Chief individually, as well as the city.

In most states, the judge or jury in such a case will apportion liability among multiple defendants according to their individual actions or omissions. Under the provisions of the Act, the Chaplain, if he were found liable at all, could be compelled only to pay non-economic damages proportional to his actual personal liability.

He would not be responsible for paying non-economic damages that were found to have been caused by the actions or omissions of the organization or a property owner.

WHAT THE ACT DOES NOT COVER

The Act does not cover several important things. Most importantly, the Act does not prevent individuals acting as volunteers from being sued or being named in a lawsuit.

Instead, the Act provides an affirmative defense to liability, which the lawyers for the volunteer would raise in the course of the case. While a volunteer might be named as a defendant in the initial stages of a case, it is very likely that the claims against the volunteer would be dismissed fairly early in the process.

In addition, the Act does not protect the organization itself from liability for harms suffered in the course of its activities. The organization remains responsible for the acts or omissions or the persons working for it, even if the persons cannot be held liable individually.

The Act does not prevent non-profit organizations from suing their volunteers for misconduct. If an officer or volunteer harms the organization in some way, the organization can still bring suit against him or her without invoking the protection provided by the Act.

The Act also does not eliminate all the laws of the individual States relating to the liability of volunteers. Instead, the Act sets a floor for the protection that is to be afforded volunteers.

States may create additional protections, but may not mandate less protection or pass other inconsistent laws. State laws that are considered consistent with the Act will remain in force.

In addition, individual states are expressly permitted to pass legislation stating that the Act does not apply in that state. Such legislation would apply only if all of the parties in a lawsuit were citizens of the same state. Whether individual states will take advantage of the leeway provided by this portion of the Act remains to be seen.

Finally, one important thing to keep in mind when reading the *Act is that Congress left several areas unclear*. These areas will have to be fleshed out, either by the individual States or by cases interpreting the Act.

At this point, there are not yet any reported cases interpreting the Act. Until some of these ambiguities are resolved, it is impossible to predict with certainty how the Act would be applied in any given situation.

CONCLUSION

The Act is not a perfect or a comprehensive statute. However, it is an important step in standardizing the protection afforded to volunteers throughout the country.

It should provide some measure of comfort to those who volunteer their services to non-profit organizations.

In addition, reducing the possibility of personal liability for volunteers should make people more willing to contribute their time and energy, and re-direct existing resources to more productive efforts than worrying about potential lawsuits. All in all, the Act is a positive step both for volunteers and for the non-profit organizations that rely on volunteers.

Many police chaplains today pay for personal Liability insurance to help insure that their legal needs are met. Some of the larger departments who have paid Chaplains will also have a good insurance policy in place.

Some larger departments are making it mandatory that all volunteer Chaplains carry their own insurance and that insurance policy is kept with-in the department for quick reference if necessary.

It is at the discretion of the department if volunteer chaplain insurance is necessary but most department heads feel that since liability is one of the largest issues for the police profession that even the volunteer should be covered.

NOTES:

**VOLUNTEER POLICE CHAPLAIN
DEPARTMENT**

GENERAL ORDERS

Chaplaincy Coordinator

Volunteer Chaplain Program

PURPOSE

The purpose of the Volunteer Police Chaplain Program is to provide more sensitive responses to the public in times of crisis and to set forth objectives and requirements for participation, assignment and training of qualified Police Chaplains. The Volunteer Police Chaplain or his designee will be available on a 24-hour basis.

This purpose is to establish the duties, responsibilities and procedures governing the appointment, direction and control of police Chaplains.

OBJECTIVES

The Volunteer Chaplaincy Program is designed to:

- A. Provide non-denominational spiritual support to Police Department personnel and victims of crimes and tragedies.
- B. Enhance the Department's support 24 hours a day.

POLICY

This General Order will define the responsibilities of the Volunteer Police Chaplain and Associate Volunteer Police Chaplains of the Police Department.

APPLICATION AND SELECTION REQUIREMENTS

The applicant must:

1. Be a minister or Endorsed Chaplain who is credentialed by a recognized ecclesiastic body and either ordained or licensed.
2. Possess a valid unrestricted driver's license or be eligible to receive one by the date of appointment.

3. Possess current individual medical and auto insurance coverage.

Qualified applicants must pass the following:

1. Oral and Personal questionnaire interviews.
2. Background investigation developed for the Volunteer Police Chaplaincy Program.
3. Ecclesiastic credential review

The appointment of qualified persons to the position of Volunteer Police Chaplain is at the discretion of the Chief of Police.

ASSIGNMENT AND TRAINING

- The Chaplain Coordinator (CC), who is a member assigned to the department shall administer the Volunteer Police Chaplaincy Program under the direction of the Chief of Police.
- The CC shall conduct or attend an academy consisting of a minimum of 24 hours of law enforcement related training for all new Volunteer Police Chaplains before they are assigned to any shift.
- The Volunteer Police Chaplain shall be required to participate in continuing education in order to retain their status as chaplains in the program. All continuing education classes shall be approved by the Chief of Police and all certificates shall be given to the department for their records.
- Volunteer Police Chaplains will devote minimum of 24 hours annually to ride-along programs.
- It will be the duty of the Chaplains Coordinator to provide the Communications Division Supervisor with a current and alternative contact number, and an updated, current, on call schedule.
- The Volunteer Police Chaplain must be able to respond within 30 minutes from time of dispatch.

ORGANIZATIONAL STRUCTURE

The Chaplaincy program operates under the guidelines set forth by the Police Department. The Board of Directors is responsible for all policy, personnel and fiscal matters, subject to revision and approval by the Chief of Police.

The Volunteer Police Chaplain and Associate Volunteer Police Chaplains will be referred to as Police Chaplain(s) within this General Order.

The Volunteer Police Chaplain Program shall be headed by the Chief of Police or Senior Chaplain and shall be staffed with as many Associate or Volunteer Police Chaplains as deemed necessary by the department to effectively accomplish the objectives of the Chaplain program.

The Chaplains Supervisory Board and the Chief of Police shall be responsible for training, continued training, supervision and assignment of the Volunteer Police Chaplain.

The Chief of Police shall appoint a Senior Chaplain or designated supervisor of the department to:

- Perform all administrative duties related to the program.
- To oversee quarterly training.
- Maintain Chaplains personnel records.
- Monitor Chaplains regarding their volunteer services.
- Maintain training records
- Review all Chaplain activity reports

ACTIVITY REPORTS

A Chaplain Activity Report must be completed after each Chaplain involved incident. The report shall include date, time received, and en-route and arrived, type of incident, address of incident and a short narrative with pertinent activity information.

The activity shall be completed by each Chaplain at the end of duty and forwarded to the Chaplain supervisor or Senior Chaplain for review.

All contacts with Department personnel shall remain confidential and employee members shall not be identified on Chaplain Activity Reports. Referral sheets requesting chaplain assistance shall be controlled and maintained by the Chaplain Coordinator.

THE POLICE CHAPLAIN SHALL BE

- A liaison between the department and the religious community
- Answer directly to the Chief of Police and/or Chaplain coordinator

- Be a volunteer chosen from a church or a licensed faith based Chaplains program within the city, county or district.

ASSOCIATE POLICE CHAPLAINS SHALL BE

1. Appointed by the Chief of Police based upon the recommendations of the Police Chaplain;
2. Volunteers chosen from a church or a licensed faith based chaplains program within a city, county or district.

CHAPLAIN DUTIES AND RESPONSIBILITIES

Chaplains may be requested to assist with the following types of events, in accordance with their duties with approval of supervisory personnel.

- Assist an officer with a death notification
- Suicide or suicide attempt events
- Lost or missing persons or children
- Hostage situations
- Sexual assaults
- Child abuse
- Domestic violence
- Traffic accidents involving serious injury or death
- Line of duty deaths
- Fire scenes involving serious injury or death
- Hospital visits
- Counseling of department personnel with personal problems
- Critical Incident stress debriefings and defusing.
- Award ceremonies, graduation, Social events, invocations and benedictions
- Attend, participate, or assist in funeral planning
- Conduct memorial services
- Attend line ups and briefings in the department depending on requirements
- Serve as a public relations officer for the department
- Assist in all major disasters

REGULATIONS AND PROCEDURES

1. Non-sworn Volunteer Police Chaplains or paid Chaplains are not normally a law enforcement officer but are expected to act as representatives for their denomination, duly ordained or licensed and approved.

2. As a volunteer or paid police chaplain, there are many responsibilities. Those responsibilities will be at the direction of the Police Chief and upon request. The non-sworn chaplain shall not, interfere with an officer in the performance of his/her duties, and are subject to the authority of the requesting officer.
3. All chaplains, when on duty, shall properly identify him/herself, wear proper chaplain clothing, be courteous and conduct him/herself in a manner that is in accordance with the rules and regulations set by the department.
4. A police chaplain should have a basic knowledge of the duties of law enforcement officer, be aware of new policies and procedures and be willing to attend training sessions.
5. The Chaplain will be available to the police dispatcher by pager, radio or telephone unless otherwise directed.
6. If the Chaplain is not available the Chaplain will assign another Chaplain to act on his/her behalf. If no one has been assigned to act in the capacity of Chaplain, the Chief of Police or supervisory personnel will advise further.
7. It will be understood that members and employees of the department who request counseling sessions with the Chaplain are entitled to privileged communications which will not be reported to Department heads or have any bearing on job status.

Confidentiality will be strictly maintained *except* in the following circumstances:

1. The Chaplain believes that the member/employee is an immediate danger to him/herself or others (i.e.) Suicidal, Homicidal.
2. The Chaplain learns through counseling that criminal or civil law has been broken by the member/employee.

If the Chaplain has knowledge of either of these events, it is with-in the boundaries of the Chaplain duties to immediately notify the Chief of Police of such. If the Chief of Police is not available, the Chaplain will notify the Watch Commander or highest ranking supervisor with-in the department.

Once the information has been reported to the proper authorities, a written statement should be prepared by the Chaplain and given to the proper authority immediately.

Once the information has been reported and the statement has been issued and delivered the Chaplain should have no contact with the reported party unless under the direction of the Chief of Police and without additional parties present.

UNIFORM REQUIREMENTS

When on duty, the sworn Chaplain will follow the guidelines set for Chaplain appearance and uniform for regular assignments and ceremonial uniforms in accordance with the provisions of the Departmental General Orders.

Chaplains should have a dress uniform and a non-dress uniform. The Dress uniform should be worn for ceremonial occasions. Ceremonial occasions are defined as Graduations, Promotions, Funerals or public appearances or any other department designated formal function.

The non-dress uniform should be a Polo Type shirt, white or Gray in color with a large "Police Chaplain" logo in plain sight, on the back of the shirt and with a patch or Chaplain logo on the left upper shoulder area of the shirt.

The department may supply appropriate clothing that is deemed necessary to identify the individual as a Police Chaplain.

If the Police Department issues a badge or a picture ID card, the badge or picture ID card should be worn while on duty status at all times.

Each Chaplain issued an official badge or picture ID card will surrender these items upon resignation or dismissal from the program and should be surrendered directly to the Chief of Police or his representative by the Chaplain.

CHAPLAIN UNIFORM

- Black pants
- Black shoes and socks
- White or Gray Polo type shirt with (Chaplain) logo
- Black Jacket with (Chaplain) logo
- Pocket size picture ID card
- Small Bible
- 3 x 5 cards or spiral for information
- Rubber Gloves
- Hand cuffs and key
- Shot gun release key
- Reflective arm band
- Flash light with extra batteries
- List of 10 codes (if used)
- Protective mask, Vicks Vapor Rub
- Orange vest and rain gear

CHAPLAIN DISMISSAL PROCEDURE

Violations of Chaplain Conduct include, but are not limited to:

- Violation of the Manual of Rules
- Repeated failure to respond when called
- Excessive tardiness
- Breach of confidentiality and release of confidential information
- Failure to perform duties
- Using the Department, personnel or equipment for own monetary gain
- Conduct unbecoming a member of the Clergy
- Use, handling or possession of un-permitted weapon
- Refusal to abide by dress code
- Getting arrested and charged with a criminal offense

If one or more of the above actions are performed, the Chaplain will be subject to:

- Counseling
- Review by Executive Board of Directors
- Dismissal from the program by the Chief of Police

POSSESSION OF FIREARMS

Unless commissioned as a licensed Peace Officer or Reserve Peace Officer, Chaplains shall not possess any law Enforcement authority other than that of a private person. As such, they are not authorized to carry any firearm, unless licensed under state statute and permitted by the agency, when in performance of their duty.

CHAPLAIN RIDE ALONGS

Chaplain participants of the department ride along program must follow department rules and regulations set forth by the Chief of Police unless otherwise directed.

- The participants must be a minimum of 18 years of age
- Each participant must read and sign a liability release form prior to ride along
- The participant must present proper identification to officer upon request
- The participant will wear proper, approved Chaplain attire when riding
- Each participant will be subject to a full background check prior to ride along
- Chaplains will be briefed on behavior prior to ride along
- Chaplains will know the 10 codes (if used) for the department
- Chaplains will not talk on the radio unless directed by the officer to do so
- Know where you are at all times (streets, addresses and businesses)
- Listen to radio traffic and know what is going on around you

- Be prepared to help the officer in any situation
- Keep a log for your records with address, times, event number and nature of call
- Participants will be assigned to a police unit by a patrol supervisor
- The Chaplain will follow directives from the officer at all times
- Chaplains will not get involved in any situation unless directed otherwise
- Chaplains remain seated inside the vehicle unless directed otherwise by officer
- Chaplains will not interfere in any form while on the ride along.
- The Chaplain will not disturb any crime scene

Know how to operate the equipment in the police unit:

- Radio
- Shot gun release and shot gun
- Sirens
- Spot lights
- Scanner

The Chaplain rider must remain aware and alert at all times on a ride out. An officer involved shooting usually takes place in three to five seconds of arrival to the scene or on a traffic stop.

Be aware of your surroundings and learn to watch suspects and gather good descriptions. The following is considered the “norm” for description information.

- Black, white, Hispanic or other
- Weight, height or physical disabilities
- Head to Toe i.e.: Hair, facial description, glasses etc, shift, pants, shoes Jewelry etc.
- At no time will the Chaplain assist in the clean-up or removal of any hazardous or bio-hazardous materials. No Chaplain is to be involved in the cleanup of any blood or other residual body fluids or parts.
- If a Chaplain is advised to retrieve a weapon while on a call out, they shall be prepared to use it. A report must be made any time the Chaplain is involved with a call that requires a weapon to be handled by the Chaplain. At no time will a Chaplain retrieve or handle a weapon on his/her own accord without the consent of the officer.

CHAPLAIN ON CALL STATUS

When a Chaplain is on call or called out by the Police Department, the call will be received from the dispatcher. Once the dispatcher advises that you have a call. You must advise the dispatcher that:

- Time that you are en-route to the scene
- When you arrive on the scene

The dispatch center has to keep records of times. It is vital for their records and for the chaplain activity report that you advise en-route, arrival and completed times.

POLICE COORDINATOR OR LIAISON DUTIES

1. The police coordinator or liaison shall report to the administrative services division and shall be held responsible for matters pertaining to the operation of the Chaplain's program.
2. The administrative duties of the police Chaplain Coordinator or Liaison shall include planning, organizing, and directing the activities of the Chaplain's program.
3. The Police Coordinator or Liaison shall be responsible for recruiting, performing background and educational checks, verifying certifications, endorsement and ordinations and processing applications.
4. Advising the chaplains of departmental activities and policies, conducting in-house training classes and assisting whenever special problems arise.
5. The Coordinator/Liaison shall submit reports on the activity of the Chaplain's program as deemed necessary by the Chief of Police.
6. The Coordinator/Liaison shall act as representative of the Chaplain's program to all new recruits.
7. A chaplain Coordinator/Liaison shall be familiar with rosters or call out lists and be willing to assist in contacting chaplains during emergency situations.

ASSOCIATE POLICE CHAPLAINS

Be ordained ministers, associate ministers, or chaplains, who are active, full-time in a church or ministry within a city, county or district.

Never have been convicted of a felony or any criminal offense involving moral turpitude;

- Must complete and submit the Police Chaplain Information Sheet containing certifications, ordinations, endorsements and training certificates to the Police Chaplain.
- Must be willing and able to undergo careful screening, by the Department, before appointment;
- Be willing and able to serve the Chaplaincy by being subject to 24 hour call-out when assigned;

- Be willing to sign a release of claim releasing the City or County, the Department, the Chief of Police, or any member of the Department from civil liability should they be injured or killed while conducting duties of a Police Chaplain.

RESPONSIBILITIES AND DUTIES

The Police Chaplain will provide Communications i.e.) telephone numbers, address information etc, concerning call-out rosters with current, participating Chaplains who are on call.

The on call chaplains should leave notification with Communications whenever he will be away from the phone numbers listed on the roster. When possible a pager or radio will be provided to facilitate contact.

The Police Chaplain will make his services available to Department personnel when they are burdened with personal problems adversely affecting their professional abilities.

- Police Chaplain will assist Department officials in notifying member's families and the general public in the event of serious injury or death.
- The Police Chaplain shall become involved in domestic situations only when the investigating Officer's supervisor feels the Chaplain's services may be of help to the family involved.
- The Police Chaplain will assist Department officials during major emergency incidents, i.e., major disturbances, natural disasters, major accidents, etc.

COUNSELING

The Chaplain shall be available 24 hours a day 7 days a week to counsel department staff and employees within the department concerning family, social, moral, employment or personal matters.

The Chaplain shall be available upon request, to counsel with any family members of those department employees. His counsel will be restricted to areas within his ability and referral will be made to further professional counsel when deemed necessary.

When requested, the Police Chaplain will assist Department officials in:

- The development and implementation of programs and activities designed to address general and specific crime problems within the various communities of the City; and
- Making presentations at In-Service Training Programs or too new employees concerning various topics, i.e., dealing with personal stress, family crisis intervention, etc.

The Police Chaplain shall not attempt to convert, proselytize or bring into their religious affiliations members of the Department, or the general public while they are assisting the department, unless a person requests information about the particular faith of the Police Chaplain.

1. The Chaplain will notify the designated person's home faith when that information is available.
2. When responding to a service call by vehicle, the Police Chaplain will observe all traffic regulations.
3. The Police Chaplain, when *responding* to a service call, will identify himself verbally and by displaying identification and badge provided by the Department.
4. The Police Chaplain, when *engaged in* a service call, will identify himself verbally and by displaying identification provided by the Department.
5. While riding along or when on the scene of a Police incident, the Police Chaplain shall wear clothing mandated by the department and/or authorized insignia that clearly identifies him as a Police Chaplain.
6. The Police Chaplain will carry no firearms on his person, or in his vehicle, while on call.
7. Additionally, if he observes a crime in progress, he will not intervene, but will notify the dispatcher immediately and observe the offense from a safe viewing area until Officers arrive.
8. The Police Chaplain is a volunteer of the Department and as such, is not considered a component of the formal chain of command. The Police Chaplain shall not intervene or hinder in any way the actions and decisions made by Department employees in the performance of their duties. However, nothing in this General Order shall prohibit the Police Chaplain from utilizing the prescribed Department complaint process.

REPORTS

- A. Any time an Officer utilizes a Police Chaplain in conjunction with official duties, the Officer shall document in his report the role of the Police Chaplain.
- B. Any time a Police Chaplain responds to an incident the Police Chaplain will complete a Police Chaplain Incident Report with details of the incident, which will be forwarded to Support Services, Chief, Commander, Captain, lieutenant or senior officer in charge for review and retention.
- C. Sworn personnel and Police Chaplains when responding to death notifications are encouraged to provide families a Deceased Person Brochure.

SAFETY

- A Release of Claim Form Liability waiver must be signed and notarized by the Police Chaplain wishing to ride along before the initial ride-along.
- Once a Police Chaplain has completed the necessary forms, the forms will be kept on file in the Office of the Chief of Police.
- A list of all approved Police Chaplains will be sent to all supervisors, listing which Police Chaplains are currently approved to ride and will be updated when changes occur.
- A Police Chaplain shall only be permitted to ride with personnel approved by the Chief of Police.
- The Police Chaplain shall follow the directives of the Police Officer to whom they may be assigned or the Officer with whom the Chaplain is riding.
- The Police Chaplain shall remain in the patrol unit unless the Officer directs the Police Chaplain that it is safe to exit the unit. A Police Chaplain shall not exit the vehicle on any high-risk calls to which they may be assigned. This will include family violence calls unless no elements of risk are present, nor are expected, and only a reporting procedure is necessary.
- In some rare instances, where circumstances indicate a serious danger due to the nature of a call, the Officer may have the Police Chaplain exit the vehicle in a safe place.
- The Officer shall notify communications so that the Police Chaplain may be retrieved as soon as possible. Officers should use good discretion and should consider all options in determining an appropriate area in which to release the Police Chaplain.
- Under no circumstances will a Police Chaplain be present in a patrol vehicle involved in any aspect of a pursuit unless directed personally by the Chief of Police.
 - Police Chaplains may ride with any division pending approval of the Chief of Police.

POLICE ACTION SHOOTINGS

Any time an Officer is involved in a Police related shooting he will be given the opportunity to have a Police Chaplain present as soon after the shooting as possible. If the Officer so desires, the Police Chaplain may stay with the Officer through every phase of

the investigation, except, at the discretion of an investigator during the interview of the Officer.

COMPLAINT AGAINST POLICE CHAPLAINS

- Should any Officer have a complaint against a Police Chaplain, the Officer shall document the complaint and forward it to the Chief of Police through the chain of command.
- Any citizen complaint will be handled through the prescribed Department complaint process following the proper chain of command.
- Possible termination of participation in the program could result if participants fail to abide by established policies and procedures, abuse of authority or privacy or failure to practice professional ethics.

CONFIDENTIALITY

Any counseling conducted by the Police Chaplains, with either Department members or the public will be held in strict confidence in accordance with state law. Should the Police Chaplain determine he can no longer be effective with a particular person, that person may be referred to another Chaplain or agency by the Department. Information concerning the individual may only be released to the referred counseling source with written permission of the person being counseled.

NOTIFICATION AND/OR CALL OUT OF POLICE CHAPLAINS

Any notification and/or call out of the Police Chaplains will require the approval of a supervisor. The Police Chaplain may be called to assist in:

1. The death notification and/or acknowledgment of an employee or a member of the employee's immediate family.
 2. Any Officer involved in a shooting.
 3. Serious injury or illness to an Officer or immediate family
 4. Any traumatic crime scene.
-
1. When a Chaplain arrives at a death scene, he will contact a uniformed Officer and identify himself as a Chaplain. The uniformed Officer shall notify the supervisor in charge of the scene (usually the C.I.D. supervisor) of the presence of the Chaplain. The supervisor or his designee shall contact the Chaplain as soon as practical and apprise the Chaplain of the situation.
 2. The Chaplain will act as an intermediary between Police personnel and the victim's family
 3. More than one Chaplain shall be summoned to the crime scene should there be multiple victims. Close communication between the Chaplain and the Police supervisor is essential.

4. At the scene of a natural death (i.e. hospice care, terminally ill, etc.) the Police Supervisor in charge of the scene, will have the discretionary power to decide whether or not family members will be allowed to view a body at the scene. Any viewing shall be after the investigation is complete and all evidence has been properly collected.
5. Any matter pertaining to moral, spiritual and/or religious welfare of Police personnel or a private citizen where religious guidance is needed to address a crisis situation.
6. After being notified, the Police Chaplain will decide whether to respond or to notify an Associate Chaplain.

TRAINING

- A. It shall be the responsibility of the Police Chaplain to ensure that all new Associate Police Chaplains have been appropriately trained.
- B. The chaplain shall be willing to undergo special department training and instruction that relate to the role and functions of a police chaplain as determined by the Chief of Police.
- C. All training documents must be forwarded to the Department's Training coordinator or Liaison.

PUBLIC RELATIONS

The chaplain may be invited to speak at various church meetings or ministerial meetings to present the departments philosophy of law enforcement.

The chaplain is designated to serve as liaison between the department and the community.

CARRYING FIREARMS

Unless the chaplain is a commissioned, regular or reserve peace officer, he/she shall not possess a firearm at any time concealed or otherwise, when in the performance of their duties.

To possess a firearm without a license is illegal and it is grounds for automatic dismissal from the chaplain position and its duties.

1. Unless commissioned as a regular or reserve police officer, the chaplain is not a law enforcement officer and shall possess NO law enforcement authority other than that of any private citizen. They are commissioned by the Chief of Police as Police Chaplains and their responsibility is to assist as outlined in this General Order. They shall in no way interfere with the officers in the performance of their duties.

RULES AND REGULATIONS

1. All Chaplains, when on duty, shall be clean and properly attired. They shall properly identify themselves, be courteous, conduct themselves in a manner

becoming a Chaplain, a Lady or Gentleman, a concerned citizen, and a representative of the church and the department.

2. No Chaplain shall release any information on any police investigation or activity to any news media or insurance companies. All information coming to the attention of any Chaplain shall be held in strictest confidence.

INVOCATION and BENEDICTION

The Chaplain may be asked to give the invocation or benediction for department functions such as dinners, ceremonies and graduations. He/she may be invited to perform similar functions at community meetings, service clubs and ceremonies.

CHAPLAINS ROSTER

A chaplain's roster listing the following information shall be published and regularly updated for all departmental personnel. It shall include, name, address, contact phone number, radio call number, and badge number.

EFFECTIVE DATE

1. Any previous directive, rule, order or regulation that pertains to this subject matter and its amendments shall remain in full force and effect for any violation(s) which occur prior to the effective date of this General Order.
2. If any section, sentence, clause or phrase of this General Order is, for any reason, held to be invalid, such decision shall not affect the validity of the remaining portions of this General Order.
3. All training on this General Order will be in accordance with General Order 100, Written Directive System, Chapter VIII, and Training.
4. The effective date is stated in the header block of this General Order

QUALIFICATIONS AND REQUIREMENTS

1. The chaplain shall be an ordained minister, priest, or individual licensed by a duly-recognized religious body compatible to, and in conformance with, the religious, or faith based organizations represented in the department.
2. The chaplain shall have sufficient experience in pastoral work so that he may cope with the spiritual, psychological and social needs of the members of the department and community.

3. The chaplain shall be willing to conform to department policy as set forth in the General Orders or any other order where applicable.
4. The chaplain must possess a valid driver's license and vehicle insurance.

SPECIFIC INSTRUCTIONS:

Assigned: (Date) _____.

These orders have been explained to me and I understand them completely. I agree to follow the said orders explicitly.

Chaplain Signature

Date

Chief of Police Signature

Date

PUBLIC SAFETY CHAPLAIN'S PLEDGE

I am a Public Safety Chaplain. I believe that Jesus Christ is my Lord and savior. I will at all times, bear witness to the unfailing, forgiving and redeeming power of God through Jesus Christ to all people, regardless of age, sex, race, culture, or background.

I will promise to abide by the Holy Bible and its word at all times. I will stand firm on the promises of Jesus Christ our Lord and pray that he will lead, guide and direct my actions, thoughts and words, especially to those in need.

I am not a police officer but an ordained, licensed or endorsed person of God and I will promise to assist all officers of Law Enforcement upon request.

I shall not in any way interfere with an officer in the performance of his/her duties but I will be subject to the authority of the officer on duty.

As a Public Safety Chaplain, I promise to:

- Abide by all department policies, procedures, rules and regulations at all times.
- Be available upon request by radio, telephone or in person.
- Not to publicly criticize the actions of "any" Law Enforcement officer, Department official, Fellow Chaplain, policy, procedure of regulation.
- Abide by all confidentiality laws
- Be an advisor and guide pertaining to the moral, spiritual and religious welfare of all Law Enforcement personnel.
- Hold the badge I carry with the highest regard, maintaining moral and ethical values on duty or off.

Date Signed: _____

Signature: _____

Signature of Witness: _____

TEN COMMANDMENTS FOR LAW ENFORCEMENT CHAPLAINS

1. Thou shall love the Lord thy God with all thy heart, realizing that the depth and quality of that love is constantly scrutinized.
2. Thou shall love thy Law Enforcement Department and all its personnel, even as thou dost love thyself regardless of age, race, sex or religion.
3. Thou shall perform necessary Chaplain's duties at all times in a professional and godly manner.
4. Thou shall be faithful to all thy duties and commitments, and engagements, punctually fulfilling all of them.
5. Thou shall show no partiality to the Police agency or its personnel, whether it is the chief of police or the newest rookie, but shall seek to love and serve all alike.
6. Thou shall never use thy privileged place or position for personal gain.
7. Thou shall guard thy tongue at all times, so as never to divulge or violate a confidence.
8. When riding with a Law Enforcement Officer, thou shall remember that thou art a guest; therefore, be courteous and warm.
9. Thou shall never resent or complain because of what is expected of thee, but shall remember thy servant's role.
10. Thou shall maintain a humble spirit at all times, remembering that though thou art not a religious specialist; not all wisdom and knowledge concerning God shall die with thy demise.

LAW ENFORCEMENT CHAPLAIN CODE OF ETHICS

DEPARTMENT REGULATIONS AND RESPONSIBILITY

We, the Law Enforcement Chaplain are committed to the Christian Ethics of cooperation and professional growth, equality, diversity, human justice, fidelity, peace and grace. We affirm and promote the value, dignity and worth of each person we encounter throughout our ministry. We will guide and direct all persons through counsel and the example of Jesus Christ. We will impart the principles of law enforcement ethics as fundamental to their functioning as a law enforcement officer and as essential for their personal career.

Chaplains are ministers called to serve God's people as commissioned by the sacred Word of God. In Christian grace and duty we will respond with love and compassion according to the needs. We will embrace the understanding that human beings are created in the image of God with uniqueness and freedom to think, act and feel and we will not condone or engage in discrimination based on age, culture, disability, ethnic group, gender, race, and religion, marital or sociological status or for any other reason.

DUTY TO MORAL LAWS

The Law Enforcement Chaplain shall assiduously apply himself/herself to a greater belief system and core of moral law, cultural background, attitudes and behaviors regardless of faith or religion and will provide care for all using resources to cope with physical, mental, social and spiritual challenges. The law enforcement chaplain will make certain his/her responsibilities in these areas when seeking aid, advice and enlightenment from his/her religious and civil superiors in matter of their respective fields.

Law Enforcement Chaplains shall be mindful of his/her responsibility to pay strict heed to the selection of proper means on the discharge of the chaplain's office. Violating the laws of God and/or department regulations may instill in the minds of departmental personnel and their public like dispositions. The employment of improper means, no matter how worthy the end, is certain to destroy all respect toward the chaplain. If laws and regulations are to be honored by others, they must be honored by the chaplain who represents morality and justice.

CONDUCT TOWARD THE COMMUNITY

As a Law Enforcement Chaplain, I shall give my service, empathy, compassion, trust, respect and integrity to my community without interfering with police procedure or infringing upon the ministry of others. While dedicated to the service of the law enforcement officer, their families, and other members of the department.

I will embrace the need of maintaining high standards of clergy and professional competence in the ministry as a disciple of Jesus Christ.

CONFIDENTIALITY

The Law Enforcement Chaplain will maintain strict professional privilege and confidentiality regarding counseling, departmental information, investigations or conversations. Chaplains will respect the right to privacy and avoid unwarranted disclosures of confidential information.

Chaplains must inform those requesting help, the difference between privileged information which may be confidential and threats, criminal activity, and detrimental immoral behavior which may have to be reported to department administration.

Chaplains are responsible for securing the safety and confidentiality of any pastoral encounters and records they create, maintain, transfer, or destroy whether the records are written, taped, computerized, or stored in any other medium.

FAVORS

The Law Enforcement Chaplain holds the responsibility to foster integrity and honor to the department. The chaplain shall not place himself/herself in a position in which any person can expect special consideration through him/her or in which the public can reasonably presume that special considerations has been given. The Law enforcement chaplain should refuse gifts, favors or gratuities which the public could interpret as being offered to influence others.

PROFESSIONAL ATTITUDE

As a law enforcement chaplain does not have the right to disdain the faith of others or attempt to proselytize them for his/her own church? The chaplain shall strive for an unbiased understanding of all faiths and be acquainted with their liturgies. As a Chaplain I will accept persons of all religions, faiths or backgrounds, without fail.

The law enforcement chaplain recognizes the sacredness of human relationships and do not engage in sexual intimacies or conduct with those coming to them for spiritual support. Chaplains do not engage in sexual harassment or sexual misconduct at any time. The law enforcement chaplain will use their pastoral skills and human awareness to uplift those under their care avoiding emotional, physical, social and spiritual harm at all cost.

DISCHARGING OF DUTIES

The law enforcement chaplain shall cooperate with department and other religious officials in the discharge of his/her duties, regardless of affiliation. The law enforcement chaplain shall be meticulous in guarding against the use of his/her office or person in a way that brings disrepute to him/her, law enforcement chaplaincy or the department.

In any situation open to questions, the law Enforcement chaplain shall seek counsel from the respective religious and/or department authority.

PRIMARY RESPONSIBILITIES

The Law Enforcement Chaplain must represent to all members of the law enforcement agency morality, justice, fidelity and peace. Therefore, to all officers he/she shall guide and direct them through counseling and personal example to that end; and to the recruits, he/she shall impart the principles of law enforcement ethics as fundamental to their functioning as a law enforcement officer and as essential for their personal career.

DUTY TO MORAL LAWS AND DEPARTMENTAL REGULATIONS

The Law Enforcement Chaplain shall assiduously apply himself/herself to a greater understanding of moral laws (including ethnic differences) and departmental regulations, as well as the ethics by which he/she must live and guide others. The Law Enforcement Chaplain will make certain his/her responsibilities in these particulars, seeking aid, advice and enlightenment from his/her religious and civil superiors in matters of their respective fields.

UTILIZATION OF PROPER MEANS

The Law Enforcement Chaplain shall be mindful of his/her responsibility to pay strict heed to the selection of proper means on the discharge of the chaplain's office. Violating the laws of God and/or department regulations may instill in the minds of departmental personnel and their public like dispositions. The employment of improper means, no matter how worthy the end, is certain to destroy all respect toward the chaplain. If laws and regulations are to be honored by others, they must be honored by the chaplain who represents morality and justice.

CONDUCT OF THE LAW ENFORCEMENT CHAPLAIN

Privilege: Because of the nature of the information received in personal counseling and through confidential reports or observations, the Law Enforcement Chaplain will maintain strict professional privilege in these matters.

Ecumenism: The Law Enforcement Chaplain's own personal convictions do not give him/her the right to neither disdain the faith of others nor attempt to proselytize them for his/her own church. The chaplain shall strive for an unbiased understanding of all faiths and be acquainted with their liturgies. The Law Enforcement Chaplain shall conduct himself/herself in a manner that will foster great ecumenism with churches other than his/her own and will attempt to win the goodwill of all.

Gifts and Favors: The Law Enforcement Chaplain bears the heavy responsibility to foster integrity and honor within the department.

The Chaplain shall guard against placing himself/herself in a position in which any person can expect special consideration through him/her or in which the public can reasonably presume that special consideration has been given.

The Law Enforcement Chaplain should refuse gifts, favors or gratuities, large or small, which the public could interpret as being offered to influence others.

Professional Attitude: The Law Enforcement Chaplain shall always discharge his/her duties with a feeling of serious responsibility. By diligent study for self-improvement and dedicated service toward police personnel, he/she shall strive for effective moral leadership and high-spirited morale. The Law Enforcement Chaplain shall appreciate the importance and the responsibility of the department and hold his/her office as essential in assisting all officers to render valuable service to the department and community.

WHAT DOES “CHAPLAIN” MEAN?

When we hear the word “chaplain” we automatically affiliate it with the military. The first military chaplain of the United States Army Chaplaincy reaches far back into the dim recesses of history.

Communities always have extended the comfort of religion to those serving in the heart of battle. From what we know of societies prior to written history, it is likely that priests and other religious figures petitioned gods and spirits for victory in war.

The word chaplain itself also dates from this period. A fourth century legend held that a pagan Roman soldier called Martin of Tours encountered a beggar shivering from the cold and gave him part of his military cloak.

That night he had a vision of Christ dressed in the cloak. As a result, Martin was converted to Christianity. He devoted his life to the church, and after his death was canonized. Martin of Tours later became the patron saint of France and his cloak, now a holy relic, was carried into battle by the Frankish kings.

This cloak was called in Latin the “cappa”. Its portable shrine was called the “capella” and its caretaker priest, the “cappellanus”. Eventually, all clergy affiliated with military were called “capellani,” or in french “chaplains”, hence chaplains

The role of a police Chaplain is similar to those of a military chaplain. A police chaplain is a person who has a call on their life to be a Christian servant to those providing service to others. It is a ministry of presence and they are always there when they are needed.

A law enforcement chaplain cannot serve the people unless he is one of them. They must meet those who require a ministry of presence through his services wherever they may be at the police station or in a patrol car at the scene of a disturbance or accidental death or in the hallway or office or at social functions, as well as their homes.

A chaplain’s role in law enforcement or any other profession is based on their understanding of that particular profession. That understanding is determined by the involvement that a chaplain has with the profession which he has chosen.

Many departments and industries today have chaplains who have served with the company or agency in some other capacity because they have an innate understanding of the job, the stressors and the needs of the employees.

Police Chaplains help the agency employees in areas of faith, morale, ethics, suicide, personal growth and adjustment, community peacekeeping and consistency.

More industries, businesses, federal, state and local arenas today, have employed chaplains or have volunteer chaplains on staff.

It has been proven that having a chaplain on staff increases work productivity, and professionalism for the company. It has also been proven that there is less sick time taken, better morale, and less turnover rate.

The chaplain's duties involve police staffs who deal with difficult and often fraught situations. The police chaplain aim to provide independent pastoral care and counseling to members of the force and their families to help them handle the increasingly complex and demanding nature of their work.

A chaplain's role is to provide pastoral counseling during difficult and complicated situations. They aim at the independent pastoral care to officers, staff and families to help them handle the increasingly demanding nature of their work.

Chaplain's respect all beliefs and have resources in place to meet the needs of officers and police staff, respect the diversity of faiths and beliefs both inside the service and to the community in which they serve. Their goals include:

- Keep morale high
- Value each individual member of the service
- Respect and reflect diversity
- Support and encourage staff and their families
- Support community during disasters and trauma
- Develop a strong link between the department and community
- Get to know employees
- Build relationships based on trust and respect
- Be willing to provide a ministry of service whenever needed
- Provide independent confidential support to all members of staff.
- Seek to provide comfort with complete confidence
- Promote local support and involvement
- Enhance neighborhood policing relationships
- Respond to major incidents
- Network with other faith based groups

Chaplains possess qualities that make them valuable to the police profession bringing peace and humanitarian relief to any situation. Chaplains possess extensive training in humanitarian issues and have the desire to bring an end to suffering and pain in people's lives.

While involvement will never become the primary role of the police chaplain, possessing skills to bring peace to any situation at a time that requires a chaplain who will contribute significantly to the success of the situation.

Communication beyond traditional goals offer the chaplain status as “members of the clergy” provides them with access to leaders, populations and locations that most non-clergy people fear to go.

There are times when a chaplain is asked to be in situations that are strictly outside of the “religious” circle and during those times, a chaplain will play a role in a humanitarian intervention.

Police work is a very difficult profession, often daunting and dangerous. Chaplains are not spiritual welfare officers, counselors and psychologists. Their jobs are to be available to anyone who needs them in whatever situation that might be. The role is unique and they seek to support the staff and families by being alongside them in any way they may be needed.

Chaplains have clarity about their missions in police operations and the missions of the police officers. A chaplain’s mission is spiritually based and they rest in God and from the working of God through their lives.

Chaplains realize that they play two completely different roles and have the heartfelt understanding to realize that without determination and appreciation for those of authority, that mission will be thwarted.

As a police chaplain and pastoral leader within the department, the chaplain helps members of the department to clarify their faith and purpose in life, through life’s experiences that would otherwise make a police officer question his purpose and true meaning.

Chaplains are a part of an organization that is subject to immediate responsibilities, decisions and challenges where proper perspective is based upon God’s word and intentions and chaplains share a common ground for professional responsibility in the face of danger, death and dying by encouraging moral judgments regardless of one’s faith.

Chaplaincy is an institution and chaplains not only serve the individual but groups as well, in a manner as to not dehumanize people within that institution by respecting the dignity and privacy of those during what could be the worst times in their life.

Law enforcement officers have the same feelings and tensions as the people they serve. Law enforcement work is considered one of the highest stress related professions today that involve considerable provocation each day.

Today, more than ever, with increasing crime, terrorist attacks, and disaster situations the pressures in a police profession is one that requires an innate amount of strength, emotional and physical, good morals, values, empathy and honesty.

Sometimes that requirement is difficult to attest to, without the humanitarian influence of someone who they can count on when those difficult questions arise. The police chaplain is there.

The chaplain's role, reactive or proactive, is focused on love and caring for each other. To assist members of the police profession and the community during the time of need, joy or in pain and unless a chaplain can get past that thin blue line, they will never be anything but another chaplain.

NOTES

CHAPTER 6: ROLE OF A CHAPLAIN

Spiritual Care:

1. Chaplain organizations are obligated to respond to spiritual needs because officers, their families and those in need, have a right to such services

All Persons have a fundamental right to considerate care that safeguards their personal dignity and respects their cultural, psychosocial, and spiritual values. Such regulations, and efforts to meet them, flow from the belief that attention to the human spirit, including mind, heart, and soul.

2. Fear and loneliness expressed during traumatic events generate spiritual crises that require spiritual care.
3. Spiritual care plays a significant role when life is not possible and persons question the meaning of life.
4. Workplace cultures generate or reveal the spiritual needs of officers, their families and staff members and making spiritual care vital to the organization.
5. Spiritual care is important in all matters of life when allocation of limited resources leads to moral, ethical and spiritual concerns.

QUALIFICATIONS OF PROFESSIONAL CHAPLAINS

Chaplains must be:

- Endorsement by a faith group or a denomination connection to a recognized religious community.
- Pastoral education equivalent to one year of postgraduate training in an accredited program recognized by the constituent organizations.
- Demonstrated spiritual competency
- Completing annual continuing education requirements
- Adherence to a code of professional ethics for chaplains
- Professional growth in competencies demonstrated by peer review

FUNCTIONS AND ACTIVITIES OF PROFESSIONAL CHAPLAINS

1. Provide a powerful reminder of the healing, sustaining, guiding, and reconciling power of religious faith.
2. Acting on behalf of their departments and agencies, they also seek to protect officers, their families and victims from spiritual intrusion.
3. Provide supportive spiritual care through empathic listening, demonstrating and understanding of persons in distress, including:
 - Grief and loss
 - Risk screening, identifying individuals whose religious/spiritual conflicts may compromise recovery or satisfactory adjustment
 - Facilitation of spiritual issues related to Crisis intervention/Critical Incident Stress Debriefing
 - Spiritual Assessment
 - Communication
 - Conflict resolution among department staff, officers, family members and victims
 - Referral and linkage to internal and external resources
 - Assistance with decision making and communication regarding decedent affairs, Staff support relative to personal crises or work stress
 - Institutional support during organizational change or crisis
4. Serve as members of victim care teams by:
 - Participation in victim care conferences
 - Offering perspectives on the spiritual status of officers, family members and department staff
 - Participation in multidisciplinary education
 - Charting spiritual care interventions.
5. Design and lead religious ceremonies of worship and ritual, such as:
 - Prayer, meditation and reading of holy texts
 - Worship and observance of holy days
 - Blessings and sacraments; memorial services and funerals
 - Rituals at the time of birth or other significant times of life cycle transition
 - Holiday observances.
6. Lead or participate in mental healthcare ethics programs by:
 - Assisting officers and families in completing advance directives

- Clarifying value issues with officers, family members, department staff and victims in the organization
 - Participating in Ethics Committees and Institutional Review Boards
 - Consulting with staff about ethical concerns
 - Pointing to human value aspects of institutional policies and behaviors
 - Conducting in-service education.
7. Educate the Chaplain Team and community regarding the relationship of religious and spiritual issues to services in the following ways:
- Interpreting and analyzing multi-faith and multi-cultural traditions as they impact emergency services
 - Making presentations concerning spirituality and crisis issues
 - Training of community religious representatives regarding cultural sensitivity
 - Training and supervising volunteers from religious communities who provide spiritual support to those in crisis
 - Conducting professional chaplain education programs
 - Developing congregational department when requested
 - Educating students in the Chaplain profession regarding the interface of religion and Spirituality.
8. Act as mediator and reconciler, functioning in the following ways for those who need a voice in the law enforcement chaplain system:
- As advocates or “cultural brokers” between institutions, agencies and victims, family members, and clergy staff
 - Clarifying and interpreting institutional and agency policies to officers, their families, and the department staff.
 - Offering officers, family members, and department staff an emotionally and spiritually “safe” professional from whom they can seek counsel or guidance
 - Representing community issues and concerns to the organization
9. May serve as contact persons to arrange assessment for the appropriateness and coordination of complementary therapies.
10. Encourage and support activities to assess the effectiveness of providing spiritual care.

THE REACTIVE ROLE

The need for a Chaplain to take a reactive role is unparalleled to any other need for the Law Enforcement Officer because, without extreme spiritual motivation the officer will begin a downward spiral of emotions that can have a disastrous outcome.

Many people in the community feel that Law Enforcement Officers enforce the law with no human emotion or feeling. This is simply not true. One of the reasons men and women choose Law Enforcement as a career is because they do possess a huge amount of emotion, compassion and humanity for their fellow man.

If you ask a police officer, most of them will say that they have the need to make a difference in the world.

Without compassion, emotion and humanity it would be virtually impossible for a police officer to do the job at all, and if the officer has had a troubled, unstable or traumatic past, the downward spiral can cause many toxic situations.

Using the God given compassion, emotion and humanity that an officer must possess, it does not come without a price. The job of a police officer makes them more susceptible to extreme stress that is unparalleled in any other profession.

While caring for others during deaths, child abuse, suicides, and any traumatic incident the Law Enforcement Officer is trained to “do the job” and has a tendency to ignore their own feelings, using the survival mechanism built in to their own psyche.

However, just because they choose to ignore the feelings, does not mean they go away. They have a tendency to self destruct from the inside out. The damage they can cause to themselves, not to mention those closest around them, is often irreversible.

Chaplains are there to ensure the officer has comfort and a sense of security which can avoid a disastrous outcome physically and emotionally. Spirituality plays a big role in the lives of many law enforcement officers and a Chaplain assists them with spiritual and emotional health when they are unable to distinguish the difference during a time of crisis stress.

Spiritual stress is like emotional stress, it scars the soul from the inside out and the success of a law enforcement officer depends on strength, instinct, intensity and clarity of spiritual values. Chaplains help to motivate and eliminate emotional, physical and spiritual distress.

It is vital that the Law Enforcement Chaplain play a reactive role in the lives of the Law Enforcement officer to motivate healing spiritually, physically and emotionally.

The stress of a profession in Law Enforcement can “break a spirit” so to speak with-in the psychological inner compounds of the mind when you deal with death, dying and violence on a daily basis.

Once that spirit has been broken, the officer loses many things. Among those are confidence in him/herself and confidence in anyone else, meaning, hope, self esteem, and enthusiasm for life.

It is hard for someone who suffers from a broken spirit to have the “will” to go on and the statistics for Officer suicides, divorce, illness, alcohol and drug addiction are proof enough to show that once a spirit has been broken it is difficult to recover because life loses all meaning and it is hard for an officer to envision that life will get better or that there is still good in the world.

Most officers see the spiritual side of life daily. It is all around them, in everything they do and every call they go on.

They see firsthand, the destruction of life and then the miracle of re-birth, sometimes all in one day. The demand gets more evident that one must have a reserve of spirituality to draw from, so control is not totally lost in the midst of the battle.

The duty of a Chaplain is one of extreme responsibility. A Chaplain must offer care, compassion, humanity, humility and a tireless effort to bring about necessary changes for an officer to feel that they have something they can hang onto. It is imperative that the Chaplain play a reactive role as soon as possible.

The Chaplain will have a lot of responsibilities with the community but the Law Enforcement Chaplain has a responsibility first, to the Law Enforcement officer on the street. To attempt to restore and rebuild what is lost daily for the spiritual health of all of those involved.

The Law Enforcement Chaplain must be willing to work with the spiritual, human side of life if they are to restore what is lost. A reactive attitude is a must for the Law Enforcement Chaplain and these are the things that a Chaplain will have to be involved in to be a success.

There has been controversy over the Proactive and Reactive nature of Law Enforcement Chaplaincy. Depending upon the department and what works for that department, either one is beneficial to the spiritual wellness of the officers.

A Law Enforcement Chaplaincy team is made up of priests and ministers from a number of mainstream Christian denominations and have excellent contacts with many local religious leaders from Christian and other faiths.

It is imperative that a properly trained Chaplain know the standards which address spiritual care. Taking into consideration agency ethics, spiritual care should be addressed in that:

- Law Enforcement Officers have a fundamental right to considerate spiritual healthcare that safeguards their personal dignity and respects their cultural, psychosocial, and spiritual values.
- The Officer's right to spiritual healthcare that is considerate and respectful of his or her personal values and beliefs.
- The Officer's psychosocial, spiritual, and cultural values affect how they respond to their situation.

- Depending on the agency, the agency allows officers and their families to express their spiritual beliefs and cultural practices, as long as these do not harm others or interfere with their own or anyone else's professional duties.
- Chaplaincy policy directs Officers, family members and people from the community to refer members to appropriate clergy or other organization spiritual advisor if necessary.
- The Agencies concern for addressing issues related to spiritual healthcare during a time of crisis provides knowledge for respecting the officer's values, religion, and philosophy. Responding to the psychological, social, emotional, spiritual, and cultural concerns of the officer and their families.
- After taking into account personal, cultural, spiritual, and/or ethnic beliefs, communicating to officers and their families that spiritual healthcare management is an important part of their profession.
- The agency demonstrates respect for the police personnel and their needs in pastoral care and other spiritual services.
- The agency's staff exercises discretion and sensitivity to the circumstances, beliefs, and professional needs of the officers and their families.

REACTIVE ACTIVITIES

EMERGENCY CRISIS RESPONSE

Emergency call outs relating to but not limited to:

- Deaths Natural or accidental
- Domestic violence
- Line of duty deaths
- Line of duty accidents
- Officer and family traumatic and crisis situations

CRITICAL INCIDENT STRESS MANAGEMENT TEAMS

Situations and call outs relating to but not limited to:

- Negotiations
- SWAT emergencies
- Stress debriefings and de-fusing
- Mental health, and group debriefings crisis management

CRISIS INTERVENTION:

- Mediations
- Suicide prevention

- Traumatic crime scenes
- Trauma and crisis for both citizen and officers
- Counseling

DEATH NOTIFICATIONS:

- Citizens and community
- Officers and family members
- Notification at hospital in fatal accidents

FOLLOW UP:

- Injuries
- Sickesses
- Line of duty deaths
- Deaths involving family members and employees
- Active or retired.

FUNERAL/MEMORIAL SERVICES:

- For Line of duty deaths
- Family members/employees
- Citizens and community upon request

COUNSELING:

- Job related stress reduction
- marriage and family

THE PROACTIVE ROLE

Definition: (of a policy or person or action) controlling a situation by causing something to happen rather than waiting to respond to it after it happens.

The Law Enforcement Chaplin serves Law Enforcement Officers and their families regardless of race, creed or national origin without charge and assists the officer in applying his Christian faith to the darkest of the Law Enforcement profession.

Chaplains are dedicated in preserving the spiritual and emotional wellness of Law Enforcement officers who have dedicated their lives to protecting the community. Our Law Enforcement professionals have never been more important to our country and security than they are today.

The demand for more law enforcement has tripled since 9/11 and the attacks are not over yet. It's our Police Officers who will protect and defend us, even if it cost them their lives that is what they are trained to do and what they believe in.

- A skilled and dedicated Police Chaplain provides comfort to both the citizens and officers in crisis, life and death situations both official and un-official.
- Spiritual and emotional care for officers and their families
- Help improve morale, integrity and professionalism within the law enforcement community
- Offer care, support and assistance to those who encounter trauma, hostility and violence
- Offer assistance with situations where the distraught are found
- Help to reduce depression, substance abuse, divorce and suicide among police officers

Offer assistance to lessen the serious and painful conditions known as Post Traumatic Stress Disorder among officers.

Proactively through ongoing visits to the Agency and ride along programs educate and provide opportunities for Law Enforcement personnel and their families to maintain a healthy balance between spiritual and emotional health.

Reactively provides a Chaplain the chance for on-site care when called to a crisis 24 hours a day, seven days a week offering preventative care by responding to emergencies and traumatic events. When the public calls 911 for help, the law enforcement officer calls the Chaplain for help.

CHARACTERISTICS AND REQUIREMENTS

The Bible tells us, that peace officers are servants of the Lord and that we should all honor, support and pray for them (Romans 13:1-7, I Timothy 2:2). This is fundamentally the reason why Peace Officer Ministries exists.

One way we can “serve those who protect and serve us” is to be or provide them with competent Christian chaplains. What makes a good chaplain? :

QUALITY #1: – *Compassion*

Compassion is a form of *love*, which is the greatest of all human or divine characteristics (John 3:16, 1 Corinthians 13, 1 John 4:7-21). To have compassion is to have the desire and ability to understand and empathize with another person's situation or predicament, and to also want to help and be able to help.

Jesus had compassion for those around him (e.g. Matthew 9:36). As the compassionate Son of God, He took on the uniform of human flesh to become one of us. He understands us. He empathizes with us. He knows what we need.

He wants to help and is able to help (Hebrews 2:14-18; 4:14-16). Like Jesus' example, a good chaplain understands the culture of law enforcement, empathizes with the unique (and common) problems which officers and their families face, and brings a desire and ability to help from a spiritual perspective.

QUALITY #2: – *Character*

Law enforcement officers must have character – *integrity* – in order to function professionally. In order to be credible and effective, chaplains must also have unimpeachable character and integrity.

They must model the faith, virtues and hope they champion, or officers, fairly or unfairly, will often dismiss the message along with the messenger. The first and sometimes only sermon preached by a chaplain is a personal example of faith and life.

A huge part of character for a chaplain is honesty, honesty especially to admit failure, and to honestly deal with that failure in a positive way through forgiveness. Without honesty, integrity turns into hypocrisy, because no one is perfect. Officers sometime avoid admitting failure professionally because of liability issues, but this trait, carried over to their personal lives, can be devastating.

This is a big reason why they are at such high risk personally. A big part of a chaplain's ministry is modeling forgiveness, and it begins with a chaplain's honesty, self-forgiveness, and self acceptance because of Jesus Christ.

QUALITY #3: – *Common Sense*

The world of law enforcement requires common sense. An officer without common sense is a tragedy waiting to happen. Officers respect those with common sense and dismiss those without it. Therefore, chaplains must demonstrate "street smarts." Common sense for a chaplain consists of the following: basic intelligence, appropriately applied knowledge, and practical insight and wisdom.

QUALITY #4: – *Communication*

Like officers, chaplains must be skilled communicators. They must be situation ally aware. They must know when to listen and when to speak, when to do nothing and when to act. They need specific communication skills, such as active listening skills, to be effective. Chaplains have a bully pulpit, but it is always a pulpit labeled "By Invitation or Permission only."

A chaplain only goes where invited or permitted, and only speaks when invited or permitted. A chaplain who is a skilled communicator will be able to discern the appropriate moment to listen and speak, and will be ready with words and actions seasoned with wisdom and grace.

QUALITY #5: – *Courage*

Like officers need physical courage, chaplains need spiritual and moral courage (they sometimes need physical courage too). Law enforcement requires courage because it confronts evil and tragedy in a no-holds-barred battle.

There is no place for cowardice in law enforcement, and no room for cowardice in a law enforcement chaplain. A chaplain must be willing to sacrifice for the cause, whatever that sacrifices entails.

QUALITY #6: – *Conviction*

A chaplain must have basic beliefs that form a foundation of ministry. A chaplain needs convictions to be effective, and must be willing to “go to the mat” for them. A chaplain without conviction is a chaplain without conscience.

Officers may disagree with your convictions, but they will respect the fact that you have them. The standard or norm of conviction for a Christian chaplain is – of course – the Bible.

QUALITY #7: – *Commitment*

Commitment is a four-letter word spelled *T-I-M-E*. Effective chaplaincy – especially with officers - requires that trust be established. Trust requires building relationships – officers trust the chaplain because they know the chaplain.

Officers, with good reason, are suspicious and skeptical people. It takes time to overcome that suspicion and skepticism and develop trust. It takes time to demonstrate the qualities that will win people’s trust. Commitment of time is one of the biggest arguments for having full-time law enforcement chaplains. Effective chaplaincy takes time.

QUALITY #8: – *Congeniality*

Officers love a good sense of humor. Humor serves to temper the horrors they witness and the stresses they feel. They typically enjoy what others might consider to be inappropriate or “black” humor.

Chaplains must not let their boat get rocked too much by this humor, and must maintain amiability while avoiding becoming “just another one of the gang.”

A good chaplain is congenial and has a good sense of perspective and humor, without compromising integrity. Humor is a doorway to friendship – and ministry.

QUALITY #9: – Confidentiality

Officers are what I call “trained paranoids.” They must be to survive on the street. Typically they also carry this attitude off the street. They will not talk with a chaplain if they are not comfortable about confidentiality.

A chaplain is aided by the fact that the “bar” of confidentiality is set high for ministers. The need for confidentiality is a good reason to have licensed or ordained chaplains who are also associated with church bodies that formally support a high standard of confidentiality.

The legal definitions of and requirements for confidentiality vary from state to state, and even sometimes from jurisdiction to jurisdiction. A chaplain must have the courage to clearly articulate and practice appropriate confidentiality in this sea of confusion.

QUALITY #10: – The Cross of Christ

From a legal and law enforcement management perspective, I understand the need for chaplains of various religious persuasions.

Furthermore, it is always appropriate for a Christian chaplain to assist folks without prejudice, whether or not they agree with a chaplain’s Christian beliefs, or whether or not the chaplain is invited to bear witness to the Gospel of Jesus Christ.

Here there is no compromise with principle. A Christian chaplain renders aid and comfort at the level invited or permitted. This is in keeping with both legal and biblical principles (1 Peter 3:15).

Having said this, it is my strong conviction that only the cross of Christ offers ultimate hope for everyone – peace officers included.

Peace officers daily confront the failures of the human condition. They are inundated in a sea of sin and overwhelmed by a litany of loss. The necessary remedy they bring to the gross outbreak of sin is enforcement of the law.

But law has its limits, and finally, personally, it cannot save us from our human condition that infects each one of us. We need a Physician who can heal us. We need a Peace Officer who can give us peace. We need a Savior who can save us.

I have yet to find a better answer to our situation than the Gospel of Christ, a better idea than the free gift of forgiveness and eternal life won at the cross for helpless sinners, or a better person than the holy and loving Son of God, Jesus Christ. “Indeed, we can be saved only by the power of the one named Jesus and not by any other person” (*Acts*

4:12). A Christian chaplain both lives and speaks the cross of Christ. There is no other way (John 14:6).

Let me conclude by pointing out that there is a growing recognition in the law enforcement community of the need for professional and dedicated chaplains. There are many wonderful part time volunteer chaplains who, in addition to serving long hours at their churches as pastors, also devote much time and effort to chaplaincy.

We need to support their endeavors. At the same time, we need to also support the development and expansion of full-time law enforcement chaplaincy. There are not nearly enough full-time law enforcement chaplains today, and many of the demands of chaplaincy require full-time attention.

The job of Law Enforcement Chaplain is a very rewarding job. It comes with an enormous amount of responsibility but it's also one that comes with a lot of personal rewards.

NOTES

CHAPTER 7: THE LAW ENFORCEMENT CHAPLAIN

More than ever in the history of law enforcement, the demand for religious guidance and assistance to department officers is great. With each call, the potential of danger, death and dying becomes a reality.

Officers must make split-second decisions that are just and right according to department, state, federal and local laws and officers must stay prepared to pay the consequences if those decisions are incorrect.

After the decisions are made and the call is over, the officer often questions if the decisions were the right ones and feels as though his emotions are running like a snowboard headed downhill and needs someone trustworthy and non-judgmental to “unload” his feelings on. At that time, he/she needs someone who understands the circumstances surrounding the decisions that were made.

Often an officer hesitates talking to a supervisor because of the stigma of “weakness” or not being about the “do the job” and they don’t want to take the problem home because of job related problem within the marriage.

Some department heads feel that if an officer shows emotion during or after calls that they are not “cut out” to do the job. Many officers hesitate talking about their feelings in fear of losing their jobs. So, in essence, they turn to violence, drugs/alcohol, or suicide.

The police chaplain is someone who can listen with empathy, understanding, calmness, patience and either advice or just listen according. They need to know that the conversation will be held to the strictness confidentiality 24/7.

A police chaplain must be someone who is truly concerned for the department and its officers for spiritual and emotional support without becoming a preacher or pastor. The last thing an officer normally wants is to be preached to during a time of personal crisis.

ACCEPTANCE

A police chaplain cares about all members of a department because they are human beings. Members don't have to be of any religious order or fit any particular mold, measure or standard to be important.

They don't even have to go to a church or know the Bible. A chaplain accepts them as they are, just because they are one of God's children. A chaplain doesn't have to agree with or condone whatever an officer does or says he accepts a person without judgment for they are an important being.

AVAILABILITY

To be a law enforcement chaplain means you must be willing to go whenever and where ever you're needed. This may include getting out of bed in the middle of the night, leaving a hot dinner on the table or leaving an important family function.

Chaplains are committed to responding when requested or needed. There will be times when a chaplain cannot respond immediately, and when that happens, advise them of the estimated time of arrival and get there as soon as you can.

If someone needs to talk personally with a chaplain, they should be able to get a prompt response. However, don't expect the chaplain to be a mind-reader. He may not realize that when you propose, "would you like to ride with me sometime, or "would you like to go have coffee" that what you really want is to talk with him privately.

CREDIBILITY

The department must be able to expect correct ethical behavior from their chaplain. They can expect a chaplain to stand up for what is right and just, even when it pertains to prisoners. It takes several things to be credible in the eyes of a police officer. Integrity, honesty, compassion, and empathy are just a few.

The department should be able to depend on the chaplain to do what he says he will do. A chaplain's actions should square with his words. He should not only talk a good game, but live one.

FAITH

A chaplain must be a person of faith. This does not mean that a chaplain will always be preaching or quoting the Bible, but it does mean that his belief shines through in the kind of life that he lives and the things he says.

YOUR INTEREST

A chaplain is genuinely interested in all the members of a department and their families. What they and their families do, and their successes or failures are important to the chaplain. He will be pleased to share both the joys and sorrows of their lives.

During a crises with-in the family, the officers and their families need to know that they can count on the Chaplain for support.

INTRODUCING THE NEW CHAPLAIN

After 9/11 and the terrorist attacks on this nation, more than ever in the history of law enforcement agencies, the need for religious guidance and assistance to law enforcement officers is increasingly demanding. Every day a police officer is faced with potentially dangerous, life and death situations as they come into contact with the worst elements of society.

They are trained to make split-second decisions that are just and right and are trained to know a situation should be handled all with the expertise of an armchair quarterback.

Many times after such a situation the officer has the feeling they are coming apart at the seams and need someone trustworthy to "dump on." That person has to be one who fully understands the circumstances surrounding the decisions that were made.

There is a great need to be able to "let it all hang out" with someone who will not be judgmental, but understanding. Someone needs to be there to hear what the officer is up against, yet is detached enough not to become personally involved in the situation.

In most cases, police officers are not over accepting of anyone new to the department and when someone new enters the department, regardless of the reason, that person will have to prove themselves and in most cases, that could prove to be one of the hardest things a "rookie officer", or "Chaplain", can do.

It can take up to a year for an officer to "trust" someone new. Attitudes tend to be "resentful" at first, due to the amount of people that come and go from a department and new employees who have proven to be "distrustful" from the beginning.

Police Officers consider other police officers within the department as "family" and have a tendency to be over protective of each other and whenever there is a new officer; Chaplain or dispatcher "trust" must be earned before they will let their guard down enough to fully accept anyone.

For a new Chaplain, the key to being accepted is "patience" with the officers. For a Chaplain that has no patience, nerves or tolerance to bad attitudes, the appointment of Chaplain can be a miserable position to be in, especially if they try and "force" themselves in the officers. For the Chaplain who is able to survive and endure the attitudes, the position can be a valued one.

UNDERSTANDING “THE THIN BLUE LINE”

(THE BROTHERHOOD)

The term “Thin Blue Line” is a term used by Police Officers to describe a “bond” with each other, the only place police officers can share the loneliness, heartache, frustration, anger and joy and even guilt.

The term derives from the “The thin red line” and suggests that a thin line of police officers is all that prevents civilized society from descending into anarchy.

The term is sometimes used as a pejorative against police who cover up criminal activity of fellow police officers. Unless you have ever been a police officer, you really can’t understand the emotion of what those four words mean.

The thin blue line is a “brotherhood” between officers but it’s not a physical structure. It is a unique social and psychological barrier that separates police officers from society in general, it’s “where the police officers live”.

Lawyers, Doctors, Ministers, Politicians, Housewives, Drug users, and Alcoholics will separate themselves from others at some point. The thin blue line links people together who share some type of commonality. They tend to withdraw behind that thin blue line that keeps others out, due to the lack of understanding. An emotion (closed to society) so to speak.

The thin blue line that sets police officers apart from all others is usually an intentional act on the part of the police officer. The police officer builds the wall and maintains it. No one crosses that thin blue line without the approval of the officer.

The thin blue line is the emotion of giving a part of themselves that protect other officers and help protect others. The thin blue line will stay with an officer far past the years in the force. It is a mental agreement within one self that will stay with you for life. It may become a “way of life” for many.

The thin blue line helps officers find the peaceful truth within themselves and helps them find that it is not what you do that is important it’s who you are. It’s a rebuilding phase of a person and a modification of self with secret means and understanding that is strictly private.

Many officers have the “thin blue line” etched in their hearts and memories forever. It is a constant reminder of all the blood sweat and tears that were shed by an officer to keep someone safe. The thin blue line pays homage to the men and women who were lost in the line of duty and the ones yet to come.

Police officers place the clergy out of the realm of the thin blue line. Like many persons, police officers view others from a stereotypical frame of reference.

They see clergy as not being able to see that there are bad people in the world and they feel they are isolated from the real world.

If a chaplain is placed in the police profession, unless he is an ex-police officer, the initial reception maybe cold rejection. Only after the chaplain shows that he is trustworthy and he is not going to preach to an officer, he will be accepted within the boundaries of the thin blue line (maybe).

Police deal with a variety of cultures and an insurmountable amount of negatives and unpleasantness in the line of duty. Their task is to restore peace and a positive balance in circumstances that are less than desirable. Thus, "the beginning of the thin blue line".

CODE OF SILENCE:

Some experts say that people become police officers because they seek the power and status of the job. Others say that recruits join because they have a desire to help people, but over time they become cynical and corrupted. The police cultures instill a sense of entitlement to power and authority over the rest of society.

Police training especially is designed to strip the individual's previous identity and "make" a police officer. The police uniform, badge and gun are universal symbols of power and authority. When the individual puts on the uniform, *personal account*, he assumes the authority that goes with it. He expects and commands obedience and respect from the public.

Donning the uniform and wielding the power of the job contribute to what is known as the "police personality." Some officers leave the police personality on the job, while others carry it everywhere, all the time.

GOOD VS BAD GUYS

The police personality serves to insulate officers from the rest of society. It fosters an "us versus them" mentality.

The cops are the good guys and everyone else is a potential bad guy. There is a constant power struggle between the good and bad guys. Police believe that societal order depends on the good guys winning, at any cost.

When anyone challenges the police, the police defend their right to enforce control and authority. Officers must trust each other to provide assistance and back-up in their struggle to maintain control. They develop strong bonds of loyalty that ensure they will be there for each other. The Brotherhood must be reliable in life and death situations. Cops stick together.

HOW IT WORKS

When an officer is in trouble on the job or in trouble with his wife or girlfriend at home, he counts on his buddies to cover for him. He gives them a story that explains why he "had to do" whatever he did.

They repeat his version of the story and they stick to that version. They put themselves on the line with their fellow officer. That's what the brotherhood is all about.

Whether testifying in court or smoothing things out at home, the rules are simple for them:

- Say as little as possible.
- Answer only the question asked.
- Don't give details.
- Deny all accusations.
- Say "I don't remember, I didn't see that, or I don't know."

POLICE DISCRETION

When a cop stops someone for a traffic violation or responds to a call about a disturbance, and that person flashes a police ID, things usually relax. Responding officers and traffic cops have a great deal of leeway in choosing what laws to enforce, with whom to enforce them, and the manner in which they uphold the law.

The symbol of the brotherhood entitles the offender to "professional courtesy." The responding officers usually apologize for the intrusion and any inconvenience, and it's understood that "nothing happened here."

DISCRIMINATION

It is no secret that many police departments have problems with racism, homophobia and sexism. While departments seek new recruits from the general population, official rosters rarely reflect the community's demographics.

Minorities and women still fight for admission into the club; few are at command level, and many report sexual harassment and discrimination.

A police officer said to me, "Ninety-eight percent of the people in the world are sorry S.O.B.'s and the two percent that are good are cops." He didn't include anyone above the rank of sergeant in the two percent and only about half of them were included. An extreme statement Yes! A unique attitude, No! That officer succinctly stated a common conclusion of a prevalent value system in police-the tribal value system in the world of police stress.

Ethics in law enforcement related to police stress has become a popular topic in police literature and courses.

Ethical behavior by police is important and more, it is crucial. But the concern about the approach taken in the published articles and the seminars, have left some baffled about the attitude toward the internal and external approach.

The approach has followed a legal model. Authorities make pronouncements about how officers "shall" or "will" behave and what they "shall not" or "will not" do. The language is in the imperative voice with an expectation that officers will follow these ethical imperatives because they have been officially stated. The motivation for following is similar to obeying the law.

Laws must be obeyed and ethical principles should be heeded, but the two are not the same. The legal model assumes that there is only one system of values, the authority based system, and that assumption is false. Notice the change in wording from "ethics" to "values". The two are not the same, but they can't be separated. People's ethics reflect their values and in turn affect police stress.

There are several value systems by which people decide right and wrong, and the authority value system is only one means by which people build ethics. Each system exists in all people at varying degrees in different circumstances and times in their lives. For example, one system may predominate at home and another at work. Likewise, the values most affecting a police rookie are not the same as the predominant values in an officer of ten years.

The concept of values emphasizes a living process through which people come to their ethical conclusions. The things important to people change throughout their lives, and as a result, their ethical understandings change.

The legal model of ethics assumes a static authority value system in all officers in all phases of their careers and is weak because officers do in fact change. Authoritative pronouncements will not and cannot determine the ethical standards and behavior of officers. If the current dialogue in ethics is going to have any real effect, we must deal with the realities of police-who they are and where they live.

I want to focus on the tribal value system-the one that allows an officer to believe that almost all people are bad, as expressed in the first sentence. This system dominates in almost all officers at some point in their careers. Keep in mind that very few people are aware of different value systems in them vying for dominance. They are just aware of struggling with right and wrong without being able to articulate the process going on in them.

TRIBAL VALUES

New officers come into law enforcement with different backgrounds and value systems. Since the nature of police work is enforcing laws, it is safe to assume that the authority system is strong in them.

However, they soon feel the power of the tribal value system. Phrases such as "the police family", "the police brotherhood", and "the blue code of silence" reflect the tribal system.

Briefly, there are three universal characteristics of tribal values:

- First, tribal values focus on an identifiable group. Membership in the group provides emotional support and security.
- Second, members are expected to observe a certain way of life in which they find emotional identity.
- Third, the tribe needs an enemy. An enemy provides strong motivation, with emotions going deeply to the level of survival that keep the tribe in existence. Let's look closer at how these characteristics fit police.

IDENTIFIABLE GROUP

Obviously, police officers are an identifiable group. Go into any crowd and you can pick out the police officers-they are the ones wearing uniforms, badges and guns. Even out of uniform, many people can spot officers by their demeanor. Officers identify with their work more like a calling than a job.

Ask a woman where she works, and she might reply, "I work for Sears." Ask an officer where she works, and she will reply, "I am a police officer." Officers identify strongly with an identifiable group, and people tend to treat and to react to officers differently.

WAY OF LIFE

An identifiable group has identifiable behavior, and new officers soon realize how strong beliefs are about the way an officer should behave. If an officer doesn't fit the mold, he will be pressured to conform and even ostracized if he doesn't. The emotional pressure to conform is strong because officers find emotional identity and security in being officers. This emotional identity is another reason why an officer says, "I am a police officer."

I once counseled a deputy sheriff from a large jail who had recently completed his rookie status. One thing that came up several times was the conflict in him as he saw fellow deputies treat prisoners in ways that he initially thought was illegal and wrong. He was struggling with accepting these actions that were contrary to his understanding of the law and his beliefs about right and wrong.

His ethics were based on an authority value system when he entered law enforcement. But now he was seeing that deputies live in hard circumstances that don't seem so black and white. He was dealing with a conflict between his ethics and the need to protect the brotherhood of deputies. There was a code of silence among the deputies about what was acceptable behavior even though it did not fit the rules and regulations.

He was confronting the tribal value system, also called the emotional value system, and was experiencing strong emotions as his ethics changed to fit the tribal system so that he could belong to his tribe, deputies. He disclosed many internal conflicts-some of which had been resolved satisfactorily and all which were emotionally charged.

His emotions became much stronger as he began to talk about what he would do if a deputy were to bring drugs to inmates, "I would get him immediately. The inmates would be in danger." Then his entire countenance became more intense and his emotions became the strongest that I saw. His face contorted with fervency as he said, "A guy like that would do anything. Deputies would be in danger. A deputy could get killed." He told me that his brother deputies felt the same way.

Tribal values were dominating. When he began to talk about such despicable behavior by a deputy, he was upset and expressed concern about the safety of his wards. But the real basis of his anger was expressed when he described the danger to deputies.

Such a deputy endangered the tribe-the most important entity in tribal values. All deputies felt the same. This strong attitude was a tribal value with strong emotions.

ENEMY

Every tribe must have a common enemy to provide strong motivation to live and work in concert. Members form an "us versus them" attitude.

They feel that their very survival is at stake-strong motivation indeed. This fear in each member is a strong reason why members submit to behavior demands of the tribe and change their ethics to allow them to stay in the tribe.

Without question, police officers have an "us versus them" attitude. Most people just assume that criminals are the enemy, but sadly, criminals are not the only enemy. Police administrators, city administrators, the media and the general public are enemies for many officers even more than criminals. Officers see more threat from these sources daily than they do criminals.

In addition administrators, media and citizens discourage officers from viewing criminals as enemies. After all, they are citizens fully protected by the Constitution and the laws of the land. Officers should treat these errant people as fellow citizens-even friends-who have just made a mistake.

Don't confuse issues. The issue is not whether or not officers should have tribal values that require an enemy.

The issue is that officers are indeed strongly influenced by tribal values-now what are administrators, media, citizens and even the police themselves going to do with this reality?

ADMINISTRATORS, TRIBAL ENEMIES

For any group to accomplish meaningful goals over time, the members must have guidelines they will follow. Administrators should make policies that police will follow allowing their efforts to be coordinated with other community efforts and resulting in a more effective war against crime. Administrators who provide policies and standards by fiat are doomed to failure for a couple of reasons.

One, administrators are the enemy. Officers question anything that comes from them. When the Soviet Union was considered the "evil empire," Americans certainly wouldn't establish defense strategies according to suggestions from Russia. As long as officers perceive administrators as enemies, they won't heed their policies.

Two, any decrees contrary to tribal values will not be followed. Orders based on an abstract chain of command don't stand a chance against tribal values. Abstract logic typically loses to emotions in determining people's behavior.

In several surveys, police have consistently reported that their main stresses and problems come from their own administrations, not criminals or the justice system. People usually consider others who cause them problems to be enemies.

By analogy, ranchers in America are vehement in their war against wolves. They strongly resist conservationist efforts to allow wolves to live. Do they inherently hate wolves? No!

Most ranchers have canines around their home and barns who are trusted allies. The canines, the wolves, causing them problems by attacking their herds are the enemy. If wolves didn't cause them problems, then ranchers wouldn't care about them.

If administrators want to effectively lead officers, then they must stop acting like an enemy—an enemy according to officers' perceptions. Administrators need to help officers feel like they are an integral part of the larger tribe, the entire work force of public servants. Even if administrators are never accepted in the same tribe as officers, they can be friends or allies of the tribe instead of enemies.

ADMINISTRATORS, TRIBAL ALLIES

Obviously there are many avenues to follow in building relationships and trust in people. Here are a few that are particularly relevant to police.

PERSONAL CONTACT

Police officers need personal contact with administrators if they are going to have confidence in policies that seem to run counter to hectic situations in the field. For

example, a new policy about family violence based on solid evidence might work after being implemented faithfully over time.

However, officers in the midst of flying objects and words among family members are hard pressed to see the effectiveness of a new policy that is abstract to them and doesn't seem to deal the present situation. Officers are much more likely to follow policies from someone they know and trust than policies handed down through an abstract chain of administrators whom they believe don't care about them.

Administrators need to admit that police officers are alienated from them more than other employees. Since administrators are the leaders, they need to take the initiative in building trust and confidence.

As administrators meet with officers sincerely and personally, they will appreciate the resource they have in officers and will better understand the unique needs of police. They will see the faces of friends when they set policies affecting the safety of officers and the security of their families.

As officers realize that administrators do care about them, they will have more confidence in policies. It is hard for officers to consider someone an enemy who has sat down with them, talked sincerely and taken steps to protect them and their families.

REAL DIALOGUE

Police work is unique. Not all problems and stresses in police work are unique, but having all of them in one occupation is. Officers should have a real, meaningful and strong voice in establishing all the policies they are expected to heed.

Who better knows the actual interactions with citizens on a day to day basis than the officers interacting daily? Is anyone more aware of crime and criminal problems than the officers answering calls every hour?

All officers should be a crucial part of the process of setting policies that affect them and their service to the community. In short, the concepts of task quality management are particularly appropriate to police.

COMPLETE CARE

Administrators and the public want officers to protect them fully, even when the safety of officers is at risk. That is their job, isn't it? Yet too often the policies of communities do not provide for the care of officers and their families-especially when officers are seriously injured or killed. The military understands how important it is to care for its members.

The military provides complete care and services for its members and families. A person in the military can do a good job and expect reasonable promotions, pay increases and retirement security to match service and seniority. But more important than proper reward for dedicated work, is total care for supreme sacrifice.

A military member knows that if he is killed while defending his country, his family will be cared for. He doesn't have to worry about these mundane matters. He can give full attention to serving and fighting for his country without being distracted. Not so for many police officers in America.

Many families live at poverty level after an officer is killed or permanently injured in the line of duty. Many officers have to live with this concern on their minds at all times. They often can't give full attention to duty because they are worrying about part-time jobs and ways to ensure the security of their families if the worst happens.

Administrators need to find out what the real world needs of a police family are when an officer is killed or permanently injured. They need to devise policies with input from officers and families that will meet real world needs. When administrators demonstrate such real concern for officers, then officers will accept them as friends-not enemies-and will be able to give full attention to serving the public.

ALLOW MISTAKES

People cannot do any job without making mistakes. Police officers are going to make mistakes that hurt and affect people's lives. They must be allowed leeway to make mistakes. Judgment about an officer's actions should be based on the action itself-not the consequence.

For example, a clerk can make a minor mistake and a supervisor might be embarrassed when a letter goes to a superior with a typographical error. A police officer can make a similar mistake and a rapist might go free on a technicality in court proceedings.

Another example, a clerk can become frustrated in the pressures of a moment and throw a pen in his hand. The result might be that a pen or some other object in the office is broken. A police officer can become scared and flustered in dangerous circumstances and swing a flashlight in his hand. The result might be that a person goes to the hospital.

Though the mistakes of the clerk and the officer are basically the same, they won't be treated the same. In the example of throwing and swinging, the worst that will happen to the clerk is that he will have to replace the broken object; whereas the worst that will happen to the officer is that he will be convicted of criminal charges and be sent to the pen. The reason for the difference is that policies and people judging officers' actions focus on consequences rather than actions.

There is no argument that the consequences of an officer's actions are usually more important than the consequences of a clerk's actions. There is also no argument that both of them are humans and will make the same mistakes. Mistakes are inevitable and officers should not be punished for being humans.

Policies need to distinguish between mistakes in the heat of the moment and premeditated wrongs. They need to work with deeds of exuberance as opposed to actions of wrong intent. Police officers must act, and often they must act without time to consider their actions and all options.

For example, if a citizen drives up on a robbery in progress, he doesn't have to do anything to stop it. In fact, it is commonly accepted that if he calls the police he has fulfilled his obligations. If an officer drives up on a robbery in progress, he must take action. He doesn't have the luxury of time or the option to do nothing. To top it off, he better not make mistakes, because he will be attacked by the media, condemned by the public and decimated by imperative policies.

All of these attacks can happen to officers when they are merely being who they are and cannot help being-imperfect humans sent to do tasks that often are impossible and sent with the foreknowledge that they can't possibly keep from making mistakes. Yet many people in administration, the media and the public would rather sacrifice officers than officially deal with the realities of police work.

It seems easier to them to live behind the illusions of a legal model of ethics with its imperatives than to live in a real world. This issue of mistakes needs to be official, because officers suffer emotionally as long as it is handled unofficially.

If leaders want to positively affect the behavior of police officers, they must acknowledge the reality of the police tribe and lead accordingly.

Police officers struggling to be at peace with their actions and beliefs must recognize the struggle among competing value systems within them. When all people deal with the reality of police as humans instead of the illusion of them as automatons, the war against crime and the safety of citizens will take a giant step forward.

NOTES

CHAPTER 8: 10 REASONS POLICE OFFICERS ARE DIFFERENT:

And how these differences impact on their stress!

PERHAPS IT WEIGHS only 2 ounces overall. Large ones may run to 4 ounces. But when that badge is pinned on, there is a weight unknown to most law enforcement officers. The true weight of the badge is not overcome by muscle, not found in the gym, not measured on a scale. This weight requires a strength and conditioning for which few officers are trained.

The badge is not just pinned on a chest; it is pinned on a lifestyle. The heaviness of the badge makes the law enforcement officer different from other professionals. Over the course of the last ten years, working as psychologists with police officers, we have identified ten areas which make the badge heavy.

1) Law enforcement officers are seen as authority figures. People deal with them differently and treat them differently, even when they are not working. When a problem occurs, everyone looks to the officer to "take charge," to "solve the problem." Some say the cop is never off duty. Even when the officer is not working there is a tendency to attack problems and take charge.

Sometimes taking charge is not preferable, and can cause particular strains in our world where many people like to linger with problems, never really solving anything. Recognizing the difference between a "problem solving" situation, where action is desirable, and a more passive situation, where action may alienate others, is difficult for the cop.

2) They are isolated. The wearing of a badge, uniform and gun makes a law officer separate from society. This segregation leads to many psychological effects which research shows can create negative personality traits. For example, psychological research shows the wearing of a uniform will tend to make any person de-humanize people who are without a uniform. Just wearing a badge or a gun can cause people to act more aggressively.

These are changes that could happen to anyone wearing a uniform, badge and gun, thus these factors are expected to operate in some way on the police officer.

Many officers suggest there is a "role," or "mask" which they put on along with their uniform. Sometimes this role leaks into their personal lives and changes the course of their relationships and leisure time.

3) Law enforcement officers work in a quasi-military, structured institution. There are mental health concerns associated with working within a "quasi-military structure" and other mental health concerns of working in an "institution."

Military organizations require the sacrifice of the individual for the good of society. The "individual" is not a consideration; the "goal" of the group is paramount.

In a military organization, the focus is on punishing the individual if he is not up to standards. It is a de-humanizing process to recognize that you are only valued as a part of a machine. The 'institution' takes the same attitude, only a step further. In an institution, you are locked in a set process and the process is more important many times than, not only the individual, but also the goal.

When an officer does a remarkable job of police work, perhaps even saves a life, he can still be reprimanded if he doesn't file the proper paperwork. The paperwork describing an action in many cases is more important to the institution than the action itself. Both the quasi-military nature of police work and the functioning within an institution combine for a mental health situation that is quite undesirable and very stressful.

4) Shift work is not normal. The "rotating shift" schedule is very taxing on an officer's life. Our bodies are adjusted on what is called "circadian schedules" which is a repetitive daily cycle. Our bodies like to have a regular eating time, sleeping time, waking time, etc. An officer doing shift work never gets a chance to stay on a schedule. This upsets his physical and mental balance in life.

The changing work schedule also upsets the routine patterns that are needed in healthy marriage and family development. Strong marital and family development is based on rituals, like dinners together, "inside jokes," repeated activities, etc. The rotating shift worker has less chance to develop these rituals and his relationships suffer. This predisposes the officer's family to potential problems ranging from divorces, to children acting-out.

5) Camaraderie can be a two edged sword. The law enforcement job nurtures a sense of teamwork and unity with co-workers, what was once called "esprit de corps." The fraternity helps the officer on the job feel secure about getting the needed support in dangerous situations. It also stimulates a sense of belonging that can create an "us and them" view of the world.

This makes the law enforcement "clique" harder to leave when retiring and makes officers more protective of each other.

It also makes it more difficult to accept someone within the fraternal organization leaving or being killed. This adds to the stress of an officer.

6) Even the stress is different. Officers have a different kind of stress in their jobs, called "burst stress." Burst stress means there is not always a steady stressor, but at times, there is an immediate "burst" from low stress to a high stress state.

In other words, officers go from complete calm, to high activity and pressure in one "burst."

The normal stress situation for most of the rest of the work force consists of a stress building process that can be either reduced or adapted to before it gets "out of control." This is not the case for the officer, because "out of control" can happen in seconds.

The law enforcement job is reactive, not proactive. Officers cannot usually control entrance into most situations they face, unlike most people who get warnings. They have to react, not prevent problems. It is difficult to defend against burst stress.

7) The need to be in constant emotional control. Law enforcement officers have a job that requires extreme restraint under highly emotional circumstances. They are told when they are extremely excited, they have to act calm. They are told when they are nervous; they have to be in charge. They are taught to be stoic when emotional. They are to interact with the world in a role.

The emotional constraint of the role takes tremendous mental energy, much more energy than expressing true emotions. When the energy drain is very strong, it may make the officer more prone to exhaustion outside of work, such as not wanting to participate in social or family life. This energy drain can also create a sense of job and social burnout.

8) No gray areas. The law enforcement officer works in a fact-based world with everything compared to written law. Right and wrong is determined by a standard. They have a set way of going about gathering the proper evidence for the law and can justify their actions because they represent the "good and right side." In the real world, clear rights and wrongs are not as likely to occur.

The newspapers are an opinion-based system, the court system is an opinion-based system and, needless to say, relationship decisions and proper parenting techniques are opinion-based systems.

Adjusting from right and wrong, from black-and-white systems, to opinion-based systems is very difficult and requires a complete change in mental attitude.

9) The "at work" world of the officer is very negative. He sees the bad part of society - the criminal, the abuser of the rules.

This may skew the officer's opinions on the character of the average human being. It creates a cynicism, a critical view of the world. It is hard to adjust to trusting a fellow human being when so much of the day is spent with people who are not trustworthy.

It is hard to believe in positive intentions of people, when the day is spent with people who are intending to hurt each other. This lack of trust can show up in the way the officer deals with people on a personal level, with neighbors, with a spouse. It can even show up in the way children are raised, as police parents may tend to be stricter in discipline and more careful with privilege.

10) Even the children are affected. The children of law enforcement officers have a more difficult adjustment. As a young child, the police officer parent is seen as holding a prestigious, desirable position. The young child and his friends look up to the police officer as a minor celebrity, a person of great respect.

As a teen-ager, their parent is part of the authority of society. Since teens rebel against authority anyway, this can cause a double rebellion against the parent both in their role as caretaker and as a symbol of the authority of society.

Frequently, the officer's child is either overly compliant because of the rules imposed, thus causing depressive problems or personality restriction, or the teen becomes overly rebellious of the rule-oriented parent - the best child or the worst.

THE OFFICER BEHIND THE BADGE

Personality Traits of Officers:

OBSESSIVE COMPULSIVE PERSONALITY:

- a. Excellent attention to detail
- b. Perfectionist
- c. Don't take criticism well
- d. Cynical

HISTRIONIC: Someone not affected by a tragedy at the time of the tragedy.

- a. Aggressive
- b. Domineering
- c. Confronting
- d. Easy and quick to anger

CONTROLLER:

- a. Control People: Police Officers are trained to take control.
- b. We learn that we can't control everything in our life.

KNOW THE 3 STEP PLAN:

- 1. I Can't
- 2. God can
- 3. Let Him!!

TRAINED TO BE ACTION ORIENTED:

- a. Trained to use hands and fists not minds

- b. Seek immediate gratification
- c. They long to be needed
- d. They have strong, ethical values
- e. They see life black and white
- f. Either good guys or Bad
- g. Often disillusioned by what they see
- h. Extremely loyal
- i. They have a need to be one of the guys

PHYSIOLOGICALLY IMMATURE EMOTIONALLY:

- a. Often are immature in relationships
- b. 70% of police officers are divorced and on 3rd marriage only after 3 years
- c. They don't talk to their wife or family
- d. Police Officers make lousy partners but good caretakers
- e. 65% to 70% of adult children of alcoholics go into service organizations

WHY THEY BECAME POLICE OFFICERS:

- a. I want to help people and make a difference
- b. I want to catch criminals and crooks and see justice served
- c. I want to be somebody
- d. I need a job

THE PERCEPTION CONTROLS THE STRESS LEVEL

- a. Stress is how the situation is perceived
- b. They see the situation as "against them"
- c. Chaplains can help them change the perception
- d. They need strong support
- e. We help them develop team work

A Chaplain can help a police officer see certain situations in a different meaning and may even help to change the outlook and in essence the outcome.

When volunteering to be a Police Chaplain, it is absolutely necessary that the Chaplain ride along with the officers and develop a strong bond within the bounds of the job. A police Chaplain must have the "want" to help these officers before that will ever be accomplished. An officer will know from the get-go if the Chaplain is serious about his/her responsibilities, simply by the perception that he/she gets the very first time they are around the Chaplain.

Once the Chaplain establishes credibility with the officers, then he/she must carry through with the responsibilities of the job. If the Chaplain does not establish credibility from the beginning chances are, that the Chaplain will never get another chance.

TRAINING

Another important aspect in the fight against police crisis is training. Officers require all the information they need to fight stress.

They need to be taught that they might have trauma symptoms. Whatever mechanism they have used to try and overcome is overwhelmed. The major educational piece is spending time teaching police about mental health in general. "We need to get the word out about how to respond and support each other.

Supervisors need to be trained to identify and respond to officers in need. Families also need to be included in department suicide prevention. Family is the No. 1 support for officer stress. Anyone of importance in an officer's life must have an understanding of what an officer deals with on a daily basis and know how to get them to open up.

However the training is constructed, the main thing is that officers need to feel comfortable talking to someone, somewhere, if they need to. Also, officers must be trained to recognize symptoms of stress and indicators of suicide. They need to know that if you see someone struggling, that it's okay to reach out to that person. And if you don't have the skills or tools, find people to help that person."

Fellow officers must be willing to get involved. Officers can take a number of approaches in this effort. They might take the onus off themselves and relate an instance where they were having problems and talked to their priest, chaplain, therapist or wife. Or they might say, "I noticed you're not quite on your game and what you went through was pretty big. Do you want to talk?

Like most problems, a little communication goes a long way. Supervisors, coworkers, chaplains and family members must be trained and willing to talk. Supervisors must be encouraged to deal with solvable stress-related problems at an administrative level. Resources should be offered and followed up on, but unless an officer commits an act contrary to his oath, disciplinary action should be avoided. This is especially important if a department wants to quell officers' fears of seeking help and losing their job.

Even though quantification of police suicide has divided many professionals, they all have one thing in common: saving lives. "We are killing ourselves faster than the bad guys are, it's such a tragedy. Just open your eyes and heart for just a minute.

Many police suicides can be prevented with awareness and access to accurate information and support services. Unfortunately, until we can talk about this in an open form, sit down and talk about what is going on in our family, we won't be able to resolve any issues. If breaking through stigma and old ways of perception can save the life of just one of our brothers or sisters, it is worth the effort.

NOTES

CHAPTER 9: DEDICATED CHAPLAINS

The Law Enforcement Chaplaincy Team is comprised of dedicated ordained ministers possessing formal theological training at the college or graduate level, combined with seasoned pastoral experience.

Each applicant undergoes a comprehensive background investigation and must fulfill a rigorous training program.

Qualified Chaplains then continue to receive regular monthly training in a broad range of subjects related to Law Enforcement and crisis response issues. A partial list of our training subjects includes:

- Critical Incident Stress Management or QPR Crisis Counseling, CISD or EFT.
- Death Notifications
- Officer Involved Shootings/Post-Shooting
- Trauma
- Line of Duty Deaths
- Officer Retirement Issues
- Terrorism
- Confidentiality and Evidence Codes
- Homicides
- Corner Cases
- Child Abuse
- Suicide Intervention and Postvention
- Grief and Bereavement
- Ethics
- Crime Scene Logistics
- Hostage/Barricade Situations
- School Tragedies
- Law Enforcement Procedures
- Familiarization (ride-along(s), weapons familiarization, self-defense, radio operations)
- Hazmat Incidents NIMS (National Incident Management System) training
- Cultural Awareness
- CLETS Familiarization
- Airborne/Blood borne Pathogens
- Rape Trauma and Sex Crimes
- Citizen Assists
- Search and Rescue
- Child and SIDS Deaths
- Police Funeral Protocols
- SET Team Logistics
- Compassion Fatigue and Burnout
- CPR and AED Certification

- Public Ceremonies
- Organ/Tissue Donation
- Domestic Violence
- Elder Abuse
- Mass Casualty Incidents, Terror and Natural

On call 24 hours a day, 7 days a week, chaplains offer comfort, advice, spiritual support, or a shoulder to cry on when lives are affected by crimes or tragedy. They intervene to resolve conflicts, pray with accident victims and their families etc; and are there through maybe the worst time of someone's life.

They help citizens and simply provide a calming influence when tensions arise. Though they come from specific religious backgrounds, when chaplains are working, each is "chaplain" for any person, regardless of faith or religion.

God loves a man or women who put everything on the line for others. Police chaplains across the nation are fine examples of selfless, courageous service. Spirituality has its place in every corner of society. God bless those who risk their lives to bring light into even the darkest of corners.

Chaplains ride with officers on patrol and are on call to assist in those cases where officers feel their assistance and counsel may be helpful. This includes help in: death notifications, domestic violence, suicide attempts, suicides, bereavement counseling or despondent persons.

Chaplain Programs are designed as an innovative approach to meeting needs in the community. Chaplains of all faiths work with law enforcement personnel on a professional level by making themselves immediately available as trained and caring professionals who can assist in times of loss, confusion, depression, or grief to people in crisis situations.

The Law Enforcement Chaplain must represent to all members of the law enforcement agency morality, justice, fidelity and peace. Therefore, to all officers he/she shall guide and direct them through counseling and personal example to that end; and to the recruits, he/she shall impart the principles of law enforcement ethics as fundamental to their functioning as a law enforcement officer and as essential for their personal career.

The Law Enforcement Chaplain shall assiduously apply himself/herself to a greater understanding of moral laws (including ethnic differences) and departmental regulations, as well as the ethics by which he/she must live and guide others.

The Law Enforcement Chaplain will make certain his/her responsibilities in these particulars, seeking aid, advice and enlightenment from his/her religious and civil superiors in matters of their respective fields.

A Law Enforcement Chaplain should always remain mindful of his/her responsibility to pay strict attention to the selection of proper means on the discharge of the chaplain's office.

Violating the laws of God and/or department regulations may instill in the minds of departmental personnel and their community. If laws and regulations are to be honored by others, they must be honored by the chaplain who represents morality and justice.

A Law Enforcement Chaplain will cooperate with department and other religious officials in the discharge of his/her duties, regardless of affiliation.

The Law Enforcement Chaplain shall be meticulous in guarding against the use of his/her office or person in a way that may bring disrepute to him/her, the chaplaincy program or the department.

The Law Enforcement Chaplain, while performing his/her duties, shall inevitably deal with members of the community. The Law Enforcement Chaplain will be called upon and shall perform ministerial services in such a manner as becomes the office of the chaplain.

The chaplain will give service to the community where he/she can without interfering with police procedure or infringing upon the ministry of others.

While dedicated to the service of the law enforcement officers, their families, and other members of the department, a chaplain also has a responsibility of service to all humanity.

Because of the nature of the information received in personal counseling and through confidential reports or observations, the Law Enforcement Chaplain will maintain strict professional privilege in these matters.

The Law Enforcement Chaplain's own personal convictions do not give him/her the right to neither disdain the faith of others nor attempt to proselytize them for his/her own church.

The chaplain shall strive for an unbiased understanding of all faiths and be acquainted with their liturgies. The Law Enforcement Chaplain shall conduct himself/herself in a manner that will foster great ecumenism with churches other than his/her own and will attempt to win the goodwill of all.

Chaplains work hard to develop a bond with officers and families by sponsoring outdoor cookouts and participating in ride-along (s) with officers.

Officers are encouraged to ask distressed persons if they would like the assistance of a chaplain, as troubled people oftentimes are interested in spiritual advice.

Circumstances are often unpleasant, such as death scenes, sexual assaults, and domestic problems. Upon being asked, these people quite often wish for a chaplain to respond.

No one is confronted with more situations that demoralize and create emotional, mental and spiritual burdens than today's law enforcement officer. These burdens also affect the officer's family and other members of his or her department.

Law enforcement agencies need the specialized guidance, counseling and assistance that Police Chaplains can provide.

A law enforcement chaplain is a member of the clergy, who is passionate about what he does and has specialized training for pastoral care in the dangerous world of law enforcement. This pastoral care is offered to all people, regardless of race, gender, sexual orientation, national origin, creed, or religion. It is offered without cost or proselytizing.

The law enforcement chaplain is led in his or her own faith to be available and ready to serve those in need. The chaplain's ministry provides a source of strength to the law enforcement officers and their families, other department members, the community, and the incarcerated.

Chaplains are available to listen, assist and participate, not only in the field alongside the law enforcement officer but their families and the community, with empathy and experience, advising calmly in the midst of turmoil and danger, and offering assistance when appropriate or requested.

SERVICES OFFERED BY CHAPLAINS MAY INCLUDE:

- Making death notifications - Assisting department personnel in making notification to families of officers or citizens who have received serious injury, or upon death.
- Visiting or otherwise maintaining contact with sick or injured police personnel or their families.
- Providing counseling services for law enforcement officers, their families and other department personnel if requested.
- Providing sources of emotional and spiritual encouragement, which may include devotionals, classes on marriage, parenting, finances, etc.
- Assisting department personnel in emergency situations such as threatened or attempted suicides, barricaded gunman, etc.
- Assisting department personnel as a referral source in handling domestic situations, family disputes, etc.
- Assisting department personnel in the development and implementation of programs to address problems or needs in the community.
- Conducting and/or participating in religious services for deceased members when requested by the family.
- Attending funerals of deceased personnel.
- Serving as a mediator between citizens and the department or its various components and units.

- Attending and providing invocations/benedictions at department functions such as award ceremonies, graduations, etc.
- Representing the department before official gatherings.
- Serving as part of a department's Crisis Response Team
- Furnishing expert responses to religious questions
- Being on call during any major disturbance, event or demonstration in the city requiring the presence of a large number of police officers.
- Responding to all major disasters in the city: bombings, airplane crashes, multiple alarm fires, etc.
- Providing a liaison for the city with other religious leaders in the community.
- Making presentations for the Police Academy, the Citizen's Police Academy, Briefing, New Employees or other requested events.
- Providing other services as requested such as baptisms, weddings and funerals.

GUIDELINES FOR EFFECTIVE SERVICE

DO'S

- Learn to tolerate teasing don't take it personal.
- Ride with the officers; visit roll call sites (post, stations, as these are good places and times to get acquainted and to learn things about the officers.
- Attend social functions.
- Get to know the ministers, pastors, priests or rabbis of the officer.
- Develop a basic knowledge of the officer's work responsibilities.
- Learn the language, radio codes and procedures, legal jargon peculiar to the respective department.
- Develop a working knowledge of the organizational structure of the department.
- Be able to identify the various rank insignias within the respective departments.
- Congratulate personnel on birthdays, weddings, anniversaries, promotions, positions, etc., as is appropriate.
- Be Visible, Available, and Adaptable and maintain Credibility.
- Volunteer to assist.
- Listen to radio and/or scanner if available.
- Go on calls – do not interfere.
- Be loyal to the officer and his superior, serving as a bridge or link between them.
- Respect the officer's religious views or lack of them.
- Earn the officer's personal respect and confidence.
- Be contagiously honest.
- Identify with the person-problem. (be prepared to advise a solution to a problem)
- Be positive and optimistic.
- Be a good friend
- Be aware of community agencies for referral purposes.
- Be "real" remember actions speak louder than words.

- Maintain confidentiality.
- Be a good listener. (There are at least two sides to every story).
- Be trustworthy. Be a team player.
- Be neat and clean in appearance.
- Keep informed.
- Be the spiritual leader - by example.
- Carry an easy, confident manner balanced with humility.
- Remember: if you lose your credibility, you have nothing to offer.

DON'TS

- Do not get involved in inter-department politics.
- Do not over identify with the situation; remain objective.
- Do not interfere with management operations (setting policy, arranging transfers, etc.)
- Do not confuse the role of the Chaplain with that of the officer.
- Do not try to throw your weight around; status must be earned.
- Do not appear to have all the answers.
- Do not get your exercise by jumping to conclusions.
- Don't "should" yourself in the end, know what you are doing.
- Don't disregard anyone's feelings because of personal feelings
- Don't lose sight of who you are.
- Don't abuse the system
- Don't go from a ride out, briefing or breakfast, to the Chief's office.
- Don't use your badge to by-step the law
- Don't show judgment in any area, habit or addiction

WHO ARE WE, "POLICE" CHAPLAINS

- Police Officers: Get to know them
- Ride as often as you can.
- 75% of all counseling is done in the Patrol Car.

In a patrol car the Officer is in total control. An officer normally feels that nobody understands a Cop except another Cop so ride along(s) with the officer help build a trusting relationship.

THE "HUMAN" SIDE OF WHO YOU ARE

When someone answers the call of God on their life and become a person of the clergy you meet a host of life's changes and opinions. There are your opinions of yourself and those of society, which are entirely different.

Some Chaplains, tend to lose sight of reality for themselves and everyone else even if it means judging someone for their actions because you feel that God has placed you above the rest, because he called you and because your opinion is that a Clergy person should be perfect.

Some Chaplains go from reality to a super spiritual mindset. Spirituality is what you are and what you need to be. However, if a Chaplain loses the “human” side of life it can be detrimental to their ministry, especially in Law Enforcement.

The “human” side of life for the officers you work with and society in general, means people will do things you don’t like and if you will remember that it’s not your opinion of their habits or actions that matter but your reaction to it that makes the difference.

The most important thing as a Chaplain that you can remember is that “you are real!” just like the officer’s you work with, with real human emotions, habits and feelings however there is a right and wrong way to act to gain respect from the officers .

As a Police Chaplain you will have the opportunity to minister to hundreds of people yearly. Not only will you minister to the officers in the department but the general public as well.

The impression that you leave will be a lasting one. If you act as a Chaplain, that is the way they will remember you but if you don’t act as a Chaplain, it can be detrimental for all that is involved spiritually and emotionally.

When you are working with law enforcement it is important that you become “one of them” to gain the respect as a person of Clergy, however, your actions will either earn you the respect you deserve or derail every effort you put into it.

SOME ACTIONS THAT CAN CAUSE A DERAIL ARE:

- Telling raunchy jokes
- Judging someone else for telling raunchy jokes
- Flirting
- Cursing
- Intoxication
- Theft
- Lying
- Showing no respect for persons in the department
- Negativity
- Pessimistic attitude
- Gossip or rumors
- Being a tattletale
- Dishonesty
- Embarrassing officer

- Judging an officer for their actions or habits.

We must first earn the right to ask questions and let them get to know you. An officer won't normally illicit your help unless they know how you operate and what kind of person you are and if they feel that you are not a "real Chaplain" they won't illicit your help at all.

Once the police officer gets to know and respect you, it is the Chaplain's responsibility to act in a way that would not embarrass them or the department.

As a police Chaplain you only have one chance to make it right. ***Once you lose the respect of those you work with, the chance to regain it back is next to impossible, because once it's gone, it's gone!***

KNOWING THE PROCEDURES

It is the responsibility of the Chaplain to know procedures for calls such as:

- Swat callouts
- Traffic accidents
- Suicide
- Disasters
- Domestic Violence
- Death Notifications
- Terrorist events
- Funerals
- Line of duty deaths
- Trauma deaths, (car accidents, drowning, industrial accidents etc).

It is imperative that all Law Enforcement Chaplains obtain proper training **prior** to riding, assisting or counseling anyone. Because of the liability surrounding law enforcement, the law enforcement Chaplain must adhere to the rules and regulations.

Once a police Chaplain has been assigned to a department, copies of department policies and procedures for call outs should be given to the Chaplain for review. It is important that the Chaplain follow all directives concerning calls and radio traffic. The Chaplain Coordinator for the department should advise the Chaplain(s) of any updates or policy changes in writing.

The Chaplains should be given call out information for disasters that may occur. The Chaplain wears many hats and one responsibility is that of assisting the department during times of disasters or terrorist attacks.

Most departments don't have time to make necessary calls during these events so the Chaplain should have the necessary information to assist

CHAPLAINS ON THE ROAD

- Must be able to relate to all people
- Maintain high spiritual and moral standards
- Manifest maturity in judgment, emotional stability, and personal flexibility
- Be tactful and considerate with people of every race, creed and religion
- Be willing to become involved in training that will enhance effectiveness in dealing with people and crises.
- Be familiar with the various helping agencies in the community to which referrals can be made.
- Be willing to respond to any and all situations where his presence as a chaplain is indicated
- Never have been convicted of a criminal offense, or of offenses involving moral turpitude. (Minor traffic offenses are excluded).

The police chaplain must have a deep concern for the spiritual and emotional well-being of law enforcement personnel. The chaplain may or may not have received the basic law enforcement training given to new officers, although some chaplains have become sworn officers usually serving as reserve officers, and some may carry weapons.

The chaplain must not preach or place themselves on a higher level to an officer when riding with them, or when speaking with them in the office. The chaplain should just be there accepting the officer as he or she is, but not trying to be "one of the guys." The chaplain must remember that he is God's representative to a hurting people and act accordingly.

Law Enforcement Officers are a special breed of person. They have a hard time accepting someone from the outside. If the Chaplain attempts to "push" their way in to the department, most of the officers will pull away, refusing to even give them a chance.

There are several things that the Chaplain will have to prove before the officers will accept them as one of their own:

- Trustworthiness
- His/her Integrity
- Isn't pushy
- Will accept you for who you are
- Will not judge or preach to them
- Available
- A team player

CALL PROCEDURES

There are many calls that the Police Chaplain must prepare for. These calls are examples of the many, however, but not limited to:

- Line of Duty deaths
- Death Notification
- Domestic Violence
- Assaults
- Rapes and Sexual Assault
- Child Abuse
- Disasters
- Drowning
- Suicides
- Fatality Accident

It is absolutely necessary for the Chaplain to know the department procedures for such calls. It is also necessary that the Chaplain to know proper “Chaplain” protocol for such an incident.

For the Officer on the street, the Chaplain will be depended upon during these calls and the officer must be comfortable to knowing that the Chaplain is not only willing to work side by side with the officer, families and emergency workers but they need to be assured that the Chaplain is not only knowledgeable but capable, mentally and physically, of handling such an incident.

For liability reasons, it should be mandatory that the department have a trained, seasoned, Chaplain on staff that is knowledgeable in taking over the mental well-being of family, witnesses and police personnel during traumatic situations.

An untrained Chaplain can be detrimental to those involved if they attempt to help in a situation where they have no training. Law suits have increased over the years for such carelessness by the departments.

An untrained Chaplain can take a semi- stable victim of a traumatic incident and virtually cause the mental stability of that person to deteriorate right before his/her eyes by giving wrong information, help or advice.

In this module, procedures for such calls will be discussed. This information is not to change, replace or over-ride department policy in any way but it has been designed as a general guideline for such events.

NOTES

CHAPTER 10: GUIDELINES FOR PUBLIC PRAYER

CIVIC OCCASIONS

Praying is common in public during civic activities such as club organizations, legislative sessions, graduations, political rallies, award dinners and ceremonies and community forums. Prayer in settings which are primarily secular should bind a group together in a common concern. However, it can become divisive when forms or language exclude some persons.

Chaplains who lead the general public in prayer are responsible to be clear about the purpose as well as the nature of the occasion. Prayer on behalf of the general community should be general prayer.

General prayer is inclusive, non sectarian and carefully planned to avoid embarrassments and misunderstandings. Those who are reluctant to offer general prayer should be given the option of declining an invitation.

General public prayer on civic occasions is authentic prayer that also enables people to recognize the pluralism of American society.

Prayer of any kind may be inappropriate on some civic occasions. Decisions should show respect both for public diversity and for the serious nature of prayer.

GENERAL PUBLIC PRAYER

General public prayer holds the highest common denominator without compromise of conscience. It calls upon God on behalf of the particular public gathered and it avoids any particular individual or groups.

Write or plan the prayer you will use. Use forms and vocabulary that allow persons of different faiths and cultures to give assent to what is said. Prior to the prayer check with the person in charge to get the group diversity.

Use universal, inclusive terms for deity rather than particular proper names for divine manifestations. Some opening ascriptions are "Mighty God," "Our Father in Heaven," "Source of all Being" or "Creator and Sustainer." Possible closing words are "Hear Our Prayer," "In Thy Name," "May Goodness Flourish," or, simply, "Amen."

Use the language most widely understood in the audience, unless one purpose of the event is to express ethnic/cultural diversity, in which case multiple languages can be effective. Consider other creative alternatives, including a moment of silence.

Stay faithful to the purpose of acknowledging divine presence and seeking blessing, not as opportunity to preach, argue or testify.

These guidelines for inclusiveness and sensitivity on prayer should also apply to the content of meditations or addresses on civic occasions, and to the selection and performance of music.

PUBLIC PRAYER

A common question for some chaplains have is whether it is appropriate for chaplains to participate in "civil ceremonies" or participate in public prayer at all. For some chaplains prayers made public "water down" the true faith and open up the dangers of "civil religion."

The feeling is that there is a danger of the secular world and religious scrutiny in that it will be a place of no religion at all. A word of prayer at a civil or secular occasion can be a reminder that faith is not relegated to a church. The concern is not that people do not pray in the best way possible; it is that they do not pray at all but some people have no relationship to prayer.

The fear of "watered-down" prayer is not that most people do not pray it's that everyone that prays, pray differently. If we fear the specter of "civil religion," we should fear the nearer danger of secularism even more in a world where religion is relegated to the confines of the church or synagogue and kept entirely away from the "real world."

A Chaplain's participation in public events can be a reminder of God's presence, a reminder of something holy, even a reminder of the idea of the holy for those who have forgotten how to pray or how to dream.

We emphasize within our own faith organizations our particular beliefs and approaches to God. Before men and women of all faiths, we stress the ties that bind through a moment of awareness of the Presence of something larger than ourselves.

We need not begin with the founders of America to understand that there are times to speak of God in general terms. Millennia before the founding fathers celebrated this truth, it was a Biblical prophet Malachi who saw the cruelty of fighting in his time and cried out, "Have we not all one Father? Did not one God create us all?" (Malachi 2:10).

Malachi had a fear that he might water down God's word or forget the different cultic responsibilities of Jews and non-Jews. He wanted to remind the world of God's existence and the way that God's care binds all humanity together by helping one another through all faiths.

Religion has been abused so as to tear God's word apart. Through a moment of prayer we can remind a cynical world that faith can and must be used to bring the world together.

When entire faith groups are excluded from our prayers, then a chance to face God together is lost.

An opportunity to touch people of all faiths has become an occasion to relate to our faith group alone. Without prayer which includes all, an opportunity to teach that despite differences we must work together for common good remains a reminder of how separate we stand.

Each Chaplain wears the cross or tablets which identify us as a minister and child of God. In public prayer we have the opportunity to say that our religion, Christianity and Judaism, teaches us to care for others, regardless of their origin. Whatever a public prayer should be, it should not be cruel or uncaring.

One of the most "general" prayers in the Bible is Psalm 117, the Bible's shortest book: O praise the Lord, all you nations; Praise Him all you peoples; For His love for us is great; And the truth of the Lord endures forever. Hallelujah. Would such a prayer water down our faith?

RIGHTS AND RESPONSIBILITIES

Each of us has the right to pray as he or she pleases? We can never be denied the right, or the ability, to pray. In our Country, we enjoy religious freedom as groups within our houses of worship, speaking to those who share our faiths.

When we accept the invitation or the assignment to participate in a public ceremony by offering a word of prayer we accept the responsibility to understand that we have been asked to add a reminder of the holy and inspire those present through a moment of shared prayer. We have not been asked to preach but we also have a responsibility to those before whom we stand. Neither can be ignored.

When there is a right involved, it is not the right to word the prayers as we please, but a right to be exercised much before the occasion: the right to decline to participate. It is the right of the chaplain who cannot offer a "general" prayer to decline, in the same way that we may choose not to participate in baptisms, weddings, or funerals.

PRACTICAL CONSIDERATIONS

At the most practical level, we need to remember that participation in a civil ceremony may be only a small part of our ministry, but it often lays the groundwork for much of what follows.

Soldiers will enter the military with the reminder from Parents that if problems arise they are to go "see the chaplain." What a wonderful basis for ministry. Because we are "religious," our people believe we must care about others.

Often civilian Chaplains or the men and women of the clergy do not enjoy such good publicity. In Religion, we learn from the prophets, including the demand for justice-and so it is appropriate that chaplains are sought out when life seems unfair.

We are men and women of faith, and so we are approached when others feel loneliness or pain or seek reason for hope.

When a Chaplain offers a public prayer, we are often being "sized up" by men and women who may one day need us. When our prayers disappoint or bore listeners, they may never give us another chance.

On the other hand, we should not underestimate the impact of inclusive prayers. We might think it is a neutral act to offer a general public prayer, but it is not. It is understood, at least by many, as a positive action: a careful and inclusive word of prayer is an act of love.

THEOLOGICAL CONSIDERATIONS

For many Christians, the New Testament gives a scriptural basis for "general" prayers. They point to Jesus' prayer as an example. When asked how to pray, Jesus began, "Our Father, who art in heaven..." (Matthew 6:9 and Luke 11:2). For another illustration of "general" prayers, they point to the words of Stephen recorded in Acts 7:60, "Lord, lay not this sin to their charge." Or "God, be merciful to me, a sinner," written in Luke 18:13

Many of the New Testament epistles end prayers offering "in the name of Jesus", but in the Epistle to the Hebrews there is a simple prayer we might emulate today when ending an invocation or benediction, "Grace be with you all, Amen." (Hebrews 22:25)

There are verses in the New Testament that Christians understand to teach that the Christian faith requires prayer to be offered in Jesus' name. "Whatsoever you shall ask of the Father in my name, He will give it to you." (John 16:23-26).

Depending on the religion and which Bible you have, the verse is sometimes translated a different way: "Whatsoever you shall ask of the Father, in my name He will give it to you." This rendering seems to teach something quite different.

For some Christians, the idea of praying with a phrase as "In His Name," "In Your Name," or "In the name of the Jesus," allows them to remain true to the verse and yet open enough to allow others to accept the prayer as well.

Others accept the Trinitarian understanding that where one person of the trinity is present, all are present. A prayer to the Father, or to God's Holy Spirit, invokes Jesus as well. As for other Christians, any prayer rooted in the love and faith of Christianity is in fact a prayer asked "in Jesus' name," regardless of what words are used. Praying in His name means praying as His representative, praying as a person filled with His Love.

If the verse means that prayers asking for something must be offered in the name of Jesus, is it not acceptable to offer prayers which are not petitions in a different manner?

Can we not touch or inspire persons of all faiths through a word or prayer of praise?

("Whoever offers praise glorifies me." Psalms 50:23)

Can we not offer a word of thanksgiving? ("This is the day the Lord has made; we will rejoice and be glad in it." Psalms 118:23)

For some Christians sharing the proclamation that "Jesus is Lord" becomes the proof of faith. "No one can say Jesus is Lord except by the Holy Spirit." (I Corinthians 12:3)

Speaking these words becomes a way of invoking the presence of the Holy Spirit and therefore an important part of Christian prayer.

When there is an opportunity to offer public prayer, to people from all faiths, is a privilege and not a right. The struggle must be to find other ways to proclaim our faith and other ways to make the moment holy.

If it is a choice between an imperfect prayer or an action which will divide us at the very moment given to bring us together, then let us opt for the caring word and trust that God will understand.

"The Spirit helps us in our weakness; for we do not know how to pray as we ought; but the Spirit himself intercedes for us with sighs too deep for words." (Romans 8:26) From the thirteenth chapter of I Corinthians, we learn that love is better than prayer...even better than prophecy.

JEWISH THEOLOGICAL CONSIDERATIONS

In some ways it may be easier for a Jewish chaplain who is invited to participate in public prayer to offer an inclusive or general prayer. There are many verses in the Hebrew

Scriptures assure us that there is no specific formula for prayer. From the shortest prayer in the Bible (Numbers 12:13-five Hebrew words) to the longest (Deuteronomy 9:25- one that lasted forty days and forty nights), we understand prayer as a cry from the heart.

"The Lord is near to all who call upon Him," Psalms 145), and so the exact words are less important than the act of prayer itself. After all, God hears us even when we do not use words at all. He hears and heeds the pain of slaves (Genesis 3:7) and the sighs of prisoners (Psalms 79:11).

This is not to say that the wording of public prayer is not a problem or challenge for the Jewish chaplain. Many of the prayers I regularly offered within Jewish settings would simply be inappropriate for interfaith groups. A widespread myth has it that Jewish chaplains are not asked to change their prayers and so it is "unfair" to expect such action on the part of Christians.

The fact is that Rabbis, like the Christian clergy with whom we serve, must choose words carefully in interfaith groups. If the prayers offered by Jewish chaplains seem "acceptable" then perhaps we tread more softly, for we, like other minorities, know the pain of being ignored.

Some rabbis believe we they compose their own public prayers, but that they are restricted to those handed down to us from the past. When these rabbis are asked to offer public prayer, they often choose to read lessons instead of prayer.

Today it is also important for Jewish Rabbis to recognize that there are other questions of sensitivity which challenge us to be sensitive to the feelings of those gathered for prayer. An immediate example is language which does not recognize racial integrity or which excludes or hurts women.

LANGUAGE THAT HURTS

The intention of public prayer is basic and we should maintain that the intention is all that is important, not the impact on the hearers. If the intention is not to hurt then it is not important that we do for the problem, if there is one in the minds of the hearers.

Neither life nor prayer is that simple. When we understand that an action or a word hurts someone, it is not a question of right and wrong alone. It is a question of causing pain or trying not to do so as we sometimes misuse language innocently and if that occurs, an apology will be necessary. We are here for one another, in the name of God and not to hurt anyone.

FINDING A WAY

The faith and the conscience of some chaplains allow them to choose words for public prayers that can easily touch everyone. Other chaplains, who are unwilling or unable to change the exclusivity of their prayers, choose not to participate in an interfaith prayer setting.

For those Chaplains who struggle with this problem, feeling that there is a tension between the responsibilities of one's faith and the responsibility to those we serve, the following ideas are offered as suggestions.

In Your Name: Phrases such as "For you name's sake." and "For the glory of your name," are found throughout the Bible Psalm 79 uses both. Another simple, scriptural ending for prayers can be taken from Psalm 72: "Blessed be His glorious name forever."

Silent Ending: Psalm 19 speaks of prayer as "the words of my mouth, and the meditation of my heart." God hears both. The Bible offers many shared images. So we may pray

together to God as savior, redeemer, shepherd, creator, and king. Chaplains should offer appropriate words from the Bible as our contribution to the public ceremony.

Interfaith Endings: Although somewhat awkward, it is possible to use an ending which is both particular and universal. For example, "We who are Christians offer this prayer in the name of Jesus; but all of us-regardless of our individual religions - offer it in the name of the Almighty God, Creator of Heaven and Earth.

Personal Prayers: Most of this article deals with public prayer offered aloud - a prayer to which each listener can add a personal amen - there is one additional alternative. The possibility exists for a chaplain to see his or her participation as an opportunity to offer a simple, personal prayer, perhaps asking others to do the same, in silence.

This type of pray should require an introduction: "I thank you for the opportunity to offer a personal prayer from my tradition: It is my hope that something I say may touch you so that you may pray for a moment as well."

PRAYING TOGETHER

The idea of joining other human beings in prayer is seen as an action filled with power and hope. Setting aside our differences and praying together "opens the gates of Paradise." Someone should never be forced to pray. Chaplains should ask before they offer prayer but be prepared to offer prayer when requested.

NOTES

CHAPTER 11: CALL PROCEDURES:

DEATH NOTIFICATIONS

These are some of the cardinal principles of death notification. Some of the points overlap and all will be refined by the modifier's experience and judgment.

IN PERSON

Always make death notification in person, **NEVER** by telephone. It is very important to provide the survivor with a human presence or "presence of compassion" during an extremely stressful time.

Family members who are present can help if the survivor has a dangerous shock reaction which is not at all uncommon and they can help the survivor move through this most difficult moment.

Arrange notification in person even if the survivor lives far away. Contact a law enforcement department and/or local fire department, or Constable in the survivor's area to deliver the notification in person.

Never take death information over the radio. Get the information over the telephone, or it might leak out to family through the media or private parties listening to radio. If radio dispatchers start to give information over the radio, stop them and call in.

In the event of a line of duty death, the external monitoring of police frequencies may be extensive. Communications regarding notifications should be restricted to the telephone or cell phone whenever possible. Chaplains who have access to a radio shall keep **ALL TRANSMISSIONS off** of the radio until advised by a commanding officer.

The purpose of this information is to establish a procedure that will ensure support and emotional care for an officer's family following a line of duty death. The Law Enforcement Chaplain will accompany and assist the officer (s).

It is the responsibility of the Police Department to provide liaison assistance, including chaplains, to the immediate family of an officer who dies in the line of duty, whether feloniously or accidentally, while an active member of the department, to include tangible and intangible emotional support during this traumatic period of re-adjustment for the surviving family.

The department chaplain **SHALL NOT** act upon his/her own authority to make **ANY** a death notification without the express permission of the chief of commend and **SHALL NOT** make that notification without the attendance of other department officials.

It shall be the responsibility of the on-duty shift commander to properly direct and instruct the department chaplain before the notification is made.

The chaplain **SHALL NOT** release pertinent information regarding, names, facts or information regarding the incident, verbally, in writing, by radio, telephone or teletype, to the media or any other person. The chaplain will direct any and all questions to the department chief commanding officer.

If there is knowledge of a medical problem with an immediate survivor, medical personnel should be available at the residence to coincide with the death notification. The department chaplain will assist only if directed to do so, in the notification of emergency or other personnel.

Notification will always be made in person and never alone. The Chief of Police, division commander, other police officers and/or chaplain should accompany the notifying officer. If the aforementioned persons are not readily accessible, notification should not be delayed until these people can gather.

Death notification should not be made on the doorstep. Ask to be admitted into the house. Inform family members slowly and clearly of the information available. If specific information about the incident is known, the notifying officer should relay this information to the family. The chaplain shall not advise of specific information unless directed to do so by the notifying officer in command.

The person's name should be used during the notification. If the person has died, relay that information. Never give the family a false sense of hope. Use words such as "died" and "dead" rather than "gone away" or "passed away."

If the family requests to visit the hospital, they may be transported by police vehicles only or per department policy. It is recommended that the family not drive themselves to the hospital. If the family insists on driving the chaplain may accompany them in the family car.

The chaplain's responsibility in a line of duty death notification is to assist the department, notifying officer, and family any way you can. The department may direct the chaplain to deal with the family while department officials take care of the media, department crisis teams and emergency personnel. The chaplains shall be available when requested.

Prior to departing for the hospital, the notification officer or chaplain should notify the hospital staff (by telephone or cellular phone if possible) that a member(s) of the family

is in route. The deceased or severely injured officer's parents should also be afforded the courtesy of a personal notification if possible.

IN TIME AND WITH CERTAINTY

Provide notification as soon as possible but be absolutely sure, first, that there is positive identification of the victim. Notify next of kin and others who live in the same household, including roommates and unmarried partners.

Too many survivors are devastated by learning of the death of a loved one from the media. Mistaken death notifications also have caused enormous trauma. Before the notification is made try and quickly gather correct and pertinent information.

Be sure of the victim's identity. Determine the deceased person's next of kin and gather critical information. Obtain as much detail as possible about the circumstances of the death, about health considerations concerning the survivors to be notified, and whether other people are likely to be present at the notification.

IN PAIRS

Always try to have two people present to make the notification. Ideally, the persons would be a Police Officer, in uniform, and the other person such as a chaplain, victim assistance counselor, family doctor, clergy person, or close friend. A female/male team often is advantageous.

It is important to have two notifiers. Survivors may experience severe emotional or physical reactions. (Some even strike out at notifiers.) There may be several survivors present. Notifiers can also support one another before and after the notification.

Take separate vehicles if possible. The team never knows what they will encounter at the location. One might need to take a survivor in shock to a hospital while the other remains with others.

One notifier may be able to stay longer to help contact other family or friends for support. Having two vehicles gives notifiers maximum flexibility. Do not park the vehicle in front of the residence.

Plan the notification procedure. Before they arrive, the notifier team should decide who will speak, what will be said, how much can be said.

IN PLAIN LANGUAGE

Notifiers should clearly identify themselves, present their credentials and ask to come in. Do not make the notification at the doorstep. Ask to move inside, and get the survivor seated in the privacy of the home.

Be sure you are speaking to the right person. You may offer to tell children separately if that is desired by adult survivors. Relate the message directly and in plain language.

Survivors usually are served best by telling them directly what happened. The presence of the team already has alerted them of a problem. Inform the survivor of the death, speaking slowly and carefully giving any details that are available. Then, calmly answer any questions the survivor may have. Begin by saying, "I have some very bad news to tell you," or a similar statement. This gives the survivor an important moment to prepare for the shock

Then, avoid vague expressions such as "John was lost" or "passed away". Examples of plain language include:

- "Your daughter was in a Fire and she was killed."
- "Your husband was in an accident and he died."
- "Your father was in a fatal traffic accident and he is dead"

Call the victim by name -- rather than "the body." Patiently answer any questions about the cause of death, the location of the deceased's body, how the deceased's body will be released and transported to a funeral home and that an autopsy will probably be performed.

Inform the survivor that there could be a delay before the body is released due to:

- Remote location of incident
- Coroners availability in rural communities
- Multiple fatalities
- Investigation

If you don't know the answer to a question; don't be afraid to say so. State that you will get back to the survivor when more information is available, and be sure to follow through.

There are few consoling words that survivors find helpful but it is always appropriate to say, "I am sorry this happened."

WITH COMPASSION

Remember: Your presence and compassion are the most important resources you bring to death notification.

Accept the survivor's emotions and your own. It is better to let a tear fall than to appear cold and unfeeling. Never try to "talk survivors out of their grief" or offer false hope. Be careful not to impose your own religious beliefs.

Many survivors have reported later that statements like these were **not** helpful to them: “He died doing what he loved”, “She would have wanted to go this way”, “It was God’s will”, “She led a full life,” and “I understand what you are going through.”

Plan to take time to provide information, support, and direction. Never simply notify and leave. Do not take a victim’s personal items with you at the time of notification.

Survivors often need time, even days, before accepting the victim’s belongings. Eventually, survivors will want all items, however. (UNDER NO CIRCUMSTANCES should a victim’s belongings be delivered in a trash bag?) If at all possible we would suggest they be placed in a “red bag” for delivery to the family.

Tell survivors how to recover items if they are in the custody of law enforcement officials. *Give survivors helpful guidance and direction.*

Survivors bear the burden of inevitable responsibilities. You can help them begin to move through the mourning and grieving process by providing immediate direction in dealing with the death.

Offer to call a friend, family member, or religious official who will come to support the survivor and stay until the support person arrives. Inform the survivor that a family liaison has been contacted and will be arriving to continue assistance. Offer to help contact others who must be notified (until a support person arrives to help with this duty).

Survivors may have a hard time remembering what is done and said, so write down for them the names of all who are contacted. Inform the survivor of any chance to view the deceased’s body.

Be available to transport the survivor or representative for identification of the victim, if necessary. Explain the condition of the deceased’s body and any restrictions on contact that may apply if there are forensic concerns. Explain that an autopsy will probably be done.

Viewing the deceased’s body should be the survivor’s choice. Providing accurate information in advance will help a survivor make that decision. The condition of the body of some people killed is horrific. If the family desires to view the body, a discussion between the family and the medical examiner may be in order. ***(Denying access to see the body is not an act of kindness.)***

CITIZEN FOLLOW UP

Always leave a name and phone number with survivors. Plan to make a follow-up contact with the survivor the next day.

If the death occurred in another county or state, leave the name and phone number of a contact person at that location. Assure the families that a liaison will be coming to help assist them, if in fact; the death notification person is not the liaison.

Most survivors are confused and feel abandoned after the initial notification. Many will want clarifications or may need more direction on arrangements that are necessary. Following up can be the last step in completing a “person-centered” and sensitive death notification that is truly helpful to survivors. The notification team should be sure they are clear on any follow-up assignments they need to carry out.

DEATH NOTIFICATION IN THE WORK PLACE

- Survivors often must be notified at their work place. Here are several tips to help apply the basic principles described above to a work place notification:
- Ask to speak to the manager or supervisor, and ask if the person to be notified is available. It is not necessary to divulge any details regarding the purpose of your visit.
- Ask the manager or supervisor to arrange for a private room in which to make the notification.
- Follow the basic notification procedures described above: in person, in time, in pairs, in plain language, with compassion.

Allow the survivor time to react and offer your support. Transport the survivor to his or her home, or other location, if necessary. Let the survivor determine what he or she wishes to tell the manager or supervisor regarding the death. Offer to notify the supervisor, if that is what the survivor prefers.

DEATH NOTIFICATION IN A HOSPITAL SETTING

Police Officers and Chaplains may be called on to do death notification at a hospital after an accident or a burn over, for example.

It is a very good idea for hospitals and other officials to determine general procedures and protocols in advance, so all parties are familiar with their duties and roles. The principles of death notification described above all apply in the hospital setting. Here are a few points to be sure to remember:

- Find a quiet room for the notification and be sure survivors are seated. (Do not notify in a crowded hall or waiting room.)
- Arrange for a doctor to be present or available shortly to answer medical questions. Inform simply and directly. Provide assistance and guidance:
- Ask if survivors wish to spend time with the body of the deceased.

- Explain the procedure if identification of the deceased is necessary.
- Explain about autopsy or organ donation, if appropriate.
- Volunteer to help notify others. Make a list of any calls made.
- If there are media calls, refer them to the investigating officer or (if available) a victim service advocate.
- Do not leave survivors alone. Be sure someone is there to accompany them.
- Contact the survivor the next day.

RESPONSES TO DEATH NOTIFICATIONS

PHYSICAL SHOCK:

Persons learning of the death of a loved one may experience symptoms of shock such as tremors and a sudden decrease in blood pressure. Shock is a medical emergency and help should be summoned. Some of the factors that affect stress reactions are:

- The intensity of the event (for example, violent death vs. heart attack),
- The survivor's ability to understand what's happening,
- And the survivor's equilibrium.

Whenever possible, notifiers should be aware of any available background information about the survivors, including medical or emotional history.

Even if there is no physical shock response, death notification must be considered a crisis for the survivors. They will have a need to express feelings such as:

- A need for calm and reassuring authority;
- A need for help in determining what happens next;
- And a need to begin restoring control by making some choices
- Naming a support team
- Selecting a funeral home

These needs can be met through the humane, patient, and non-judgmental approach of notifiers. Allow survivors to express their grief freely. Take the time to give them adequate information about the death and about official procedures subsequent to the death.

Many survivors, regardless of background, find themselves numb and unable to take the next step. This is where the support person helps the most. Survivors need support persons to help them through the initial crisis. Before you leave a survivor, make sure such ongoing support is available.

It is imperative that a Chaplain have proper training in the area of Death Notifications. No department, at any time, should ever send an “untrained Chaplain” to do a death notification.

Regardless if an officer is present, the attending Chaplain must have knowledge of the procedures for proper death notifications, if for no other reason than liability.

Today, court rooms are full of cases where a public servant has been sent to do a job that they had no proper training to do. For liability reasons, department heads should make sure that the attending Chaplain(s) are properly trained to do what is expected of them.

A death notification is a serious, traumatic event for everyone involved and it is not for the faint of heart. A new Chaplain should have proper “on-hands” training before attempting to assist with a death notification.

As a Chaplain, when we are sent to give a death notification, you, at that moment, have the lives of the family in your hands. The sheer force of the message will change lives forever. There is no need to fear the message in itself, but we must regard the event with all reverence, humility and respect.

DEATH NOTIFICATIONS CREATE THE MAXIMUM AMOUNT OF STRESS ON A PERSON ON THREE LEVELS:

- Impact
- Recoil
- Recovery

GIVE DIRECTIVE, NOT SUGGESTIVE COMMANDS:

- We need to come in please
- You need to sit down
- Ask anyone else in the house to join them
- Have them sit in a low chair or sofa in a quiet room
- Turn off the TV or radio and ask them to have up if on the phone
- Get to the point, don't beat around the bush
- Confirm that you have the right survivors
- Ask if they have any medical problems and get Dr's names
- Ask for the name of Pastor, Preacher, Priests etc
- Ask for phone numbers of additional family members
- Make phone calls to family members when requested
- Always be respectful

SUICIDE NOTIFICATIONS

Suicide notifications are among the hardest, most shocking, death messages you will ever give simply because there are no answers. These are specific messages you must convey to the family:

- Help the survivor understand that they are not guilty
- There is no “why”, notes are not explanations, only messages
- Suicide is the ultimate selfish act, the ultimate rejection of others.
- Suicide is not a destiny, it’s a choice and the survivors did not make that choice.
- Survivors are angry because there is no explanation.
- Suicide is embarrassing to survivors. It’s not their fault.
- Use the word suicide along with the person’s name, it can stave off denial.
- Defuse them; they will feel more in control, which they feel they have lost.
- Let them know that recovery takes time, but not forever.
- Regarding the issue of “heaven or hell” we offer hope, but not false hope
- We have to point out that the Lord can help them.

LINE OF DUTY DEATH NOTIFICATIONS

A line of duty death of a Police officer can be one of the most traumatic experiences a Chaplain will experience. Not all Chaplains face such an event, however, in reality; it could happen at any time. Unfortunately, many Chaplains are not prepared to handle such a tragic event.

Responding when an officer is killed or injured in the line of duty is one of the hardest calls a Chaplain will ever face. The Chaplain will be counted on for support and help in areas that department personnel are not able to follow through with.

Establishing a system with policies and procedures to follow will ensure that proper steps are taken to handle these incidents, funeral services and the desires and wishes of the family and department.

No officer wants to contemplate their own death. But, because law enforcement is a high-risk occupation and the very real possibility of death from accidents and felonious assaults exists, agencies have an obligation to their officers-and officers owe it to their families-to prepare for such tragedies.

Preparation should include educating officers about emergency notification of family members, funeral arrangements, survivor benefits, counseling options, and departmental support to survivors.

Officers should take considerable comfort from knowing what benefits and support their families will receive in the event they are killed. Although the tragedy of losing a loved

one will not be lessened, with preparation and forethought, the grieving process will not be aggravated by uncertainties and a lack of information.

In the aftermath of an officer's death, agencies often ask, "Who are the survivors?" The survivor is anyone in the immediate family--spouse, children, siblings, mother, and father. Too often, agencies focus on a married officer's spouse and children and forget the parents.

Because of the unexpected circumstances involved in law enforcement deaths, agencies should give special attention to notifying all immediate family members, and especially to anyone listed on the officer's emergency notification documents.

Officers may leave instructions to exclude some immediate family members from the official notification process.

While this leaves the task of notification to primary survivors, an agency representative still should contact these family members later with condolences and to offer assistance. Law enforcement agencies have only one opportunity to provide a proper and caring response to family members. Departments should spare no effort in assisting them.

INITIAL LINE OF DUTY DEATH NOTIFICATION

The importance of the next of kin notification cannot be over-emphasized. This process sets the tone for the difficult times the surviving family will face. Sensitivity and compassion are important.

The name of the deceased officer must never be released by the Department before the immediate family is notified. Do not inform neighbors of the death before telling the family. If asked, inform them you need to find the family regarding a medical emergency and ask if they know where the family can be found.

Family notification should be made as quickly as possible to avoid the family receiving a notification from another outside party.

The media may employ many efforts to seek out the name of the fallen officer. Use all necessary measures to protect the next of kin from unwanted media exposure. For this reason, a Notification Team needs to assemble rapidly.

The team should consist, if possible, of the Chief (or the highest ranking available Officer), Chaplain, Clergy (Family bishop, Pastor, Minister, etc.), Family Liaison Officer, and an officer friend or the family or close civilian family friend. Check the officer's Personal Information Packet for their wishes and or recommendations.

If the fallen Officer's family lives far enough out of the area as to make the department's notification impractical, a local Police Agency and Chaplain in the area should be notified to make a timely notification.

In the event that the department experiences the loss of more than one member, then multiple notification teams will need to be assembled and deployed.

Before arriving at the residence, verify the latest information, decide who will speak and what they will say. Because of the emotional circumstances involved, be prepared for the family to strike out and blame the department for their loss.

ASSISTING THE FAMILY AT THE HOSPITAL

After the Chief of Police or the notification officer arrive at the hospital the next person that should arrive, should be the department chaplain.

The chaplain along with the hospital liaison is responsible for coordinating the activities of hospital personnel, the officer's family, police officers, the media, and others. These responsibilities include:

- Arrange with hospital personnel to provide an appropriate waiting facility for the family, the Chief of Police, the notification officer, and only those others requested by the immediate family.
- Arrange with hospital personnel to provide a separate area for fellow police officers and friends to assemble.
- Arrange with hospital personnel to provide a media / press area.
- Work with medical personnel to relay pertinent information regarding an officer's condition to the family on a timely basis and before such information is released to others.
- Ensure that the family is updated regarding the incident and the officer's condition upon their arrival at the hospital.
- Arrange transportation for the family back to their residence.

If it is possible for the family to visit the injured officer before death, they should be afforded that opportunity. A police official, hospital personnel or chaplain should prepare the family for what they might see in the emergency room and should accompany the family in the room for the visit if the family requests. The notification officer(s) and chaplain should remain at the hospital while the family is present.

It's very important that the chaplain not be overly protective of the family. This includes the sharing of specific information on how the officer was injured or died, as well as allowing the family time with the deceased officer.

DEBRIEFING FOR DEATH NOTIFICATION

Members of a notification team should meet as soon as possible to debrief the situation:

- Verify with the Liaison their responsibility to carry out follow-up tasks to help ease the pain and suffering of survivors.
- Review the notification: what went wrong, what went right, how it could be done better in the future?
- Share personal feelings and emotions of the notification team.
- Death notifications are, without a doubt, stressful and difficult and sometimes very depressing.
- Be frank and honest. Share your concerns with one another.
- Discuss any feelings team members have about the death and notification.

For example, the notification experience may have triggered emotions and stress related to a notifier's own loss of a loved one. **SUPPORT ONE ANOTHER!**

PRE-INCIDENT PLANNING

Pre-incident planning for line of duty death is similar in many respects to the preparations that a police department makes for any natural disaster.

They should take into consideration the availability of personnel and equipment, information about the initial incident, and other factors that influence how they will handle a police incident. SOP's are developed; people are assigned tasks; and, equipment and materials are obtained and allocated.

The pre-incident planning for line of duty death includes gathering information about our personnel, the development of a good SOP and identifying resources.

PERSONAL INFORMATION PACKETS

Personal Information Packets for all members of the department should be prepared immediately. They should include such items as emergency contacts, photos, wishes/desires of the member, and career historical information. Packets should be completed by members in consultation with their families, updated on a regular basis and kept sealed in their personnel file.

STANDARD OPERATING PROCEDURES

SOP's should be developed to address such tasks as: notification practices; prepared media announcements; department wake and funeral procedures; personnel assignments; and, human resource needs.

RESOURCES

Resources need to be identified, including personnel for Color or Honor Guards, uniforms, and supplies and equipment (e.g., mourning bands, gloves, half mast Flags, etc.).

A list of outside resources, including local, state, national and related police support organizations should be prepared.

CHAPLAINS-INITIAL ACTIONS

An emotional and tense situation occurs at an incident with the death, probable death, or injuries severe enough that they will likely lead to the death of a police officer Actions; however, need to be taken to control the situation and to prepare for the events which will take place.

- Institute a radio discipline policy for the assisting Chaplains.
- Assign a Senior Chaplain
- It will be a major media event to be referred to the Police Chief.
- Chaplains will refrain from any information release.
- Begin notifications:
- Police Officer's family;
- Chief and a Senior Chaplain from the department should notify (in person) the family of death and facts related to the incident. Have a medic unit nearby, but out of sight.
- A family Chaplain Liaison should remain with and/or be available to the family (24hrs) and should be the conduit for all information to/from the family.
- All Police department personnel
- Assist with coroner notification
- Initiate a thorough investigation into the incident:
- Assist in Recovery & security of personal equipment if required
- Assist in scene security if requested
- Contact support agencies:
- Provide for critical incident stress debriefing and grief counseling for the department.
- Assist the Public Safety Officers when asked
- Assist in notification of neighboring departments when required

POST-INCIDENT ISSUES

Assist the family in planning the funeral/memorial as they choose. This may include police department involvement, transportation, home maintenance, meals, childcare, etc. The police department assigned Family Chaplain Liaison should be the contact between the family, the department and others. Solicit local law enforcement officials and others for support. This may include assistance with traffic control during the funeral and routine checks of the family's residence.

Monitor department members closest to the incident to see how they are dealing with the loss. Provide for critical incident stress debriefing and grief counseling for the department as needed. Consideration may also have to be given to allow members time off to cope with the tragedy.

Offer to help with continuing visits as much as resources allow. Offer to stay with the family at the house or contact friends or family if they wish to stay with them. NEVER leave the family alone during this time.

FROM DEATH TO FUNERAL

- Offer to notify the necessary Department personnel of the Death. This will begin the process of reviewing eligibility for the Officer's Benefits Program.
- Work with the family in planning the funeral. The family's wishes should always come first. If they want a private funeral, the department may consider holding a memorial service; however, the family should still be consulted.
- If there are children in the family, consider creating a special role for them, such as riding in a patrol car in the funeral procession. (Be sure to ask a parent before mentioning this to the children!)
- Offer to assist with lodging or transportation for out of town relatives and friends.
- Offer to have a member of the department stay with the family prior to the funeral. In smaller departments, consider rotating people as needed in order to maintain a department presence with the family.
- Have someone available for tasks such as answering the phone, driving the family to the funeral home to make arrangements, or running errands.
- Help coordinate household duties such as food preparation, cleaning, and childcare. Do necessary maintenance such as mowing the grass or clearing the snow.
- If donations are collected for the family, set up a bank account to deposit these funds.
- Coordinate with local law enforcement officials to make routine checks of residence and neighborhood.
- Assign a department member to help the family set guidelines for dealing with the media.
- When assisting the family with funeral arrangements, remember that the family's wishes and their religious preferences may take precedent over police department traditions.

- Assist in contacting the family's Pastor or Minister and then assist them in any way possible upon request.

CHAPLAIN FOLLOW-UP SUPPORT

- Only promise what you actually can do. Keep all your promises.
- Instead of saying "Call if you need anything" offer to help with specific tasks and then follow through.
- Continue to talk with the family about your memories of the officer.
Most families want to hear about their loved one, even if it is emotionally difficult.
- Remember that parents of a fallen officer need support and contact.
- Help with what the officer used to do – yard work, fixing things around the house, attending children's sports and school events, etc.
- Take all steps necessary to assist with securing officer's benefits for the family. The process is often lengthy, so keep the family involved.
- Continue to invite the family to department events, but don't be disappointed if they don't always attend.
- Remember that some events, such as holidays and the anniversary of the date of death, may be especially difficult for the family. Even families who seem to be doing well may need extra support and contact during these times.
- Consider creating some kind of tribute to the fallen officer. This could be a local memorial, a video tribute, a scrapbook, or a scholarship in the officer's name. Prepare a tribute that is fitting for your officer and special to the family.
- Encourage the family to attend the ceremonies and other local, state, and national tributes.
- Offer to help make travel arrangements and attend with them whenever possible.

STEPS TO BE TAKEN AT THE RESIDENCE:

1. It is recommended to have a medic unit standby near the residence, but not in view, especially if there is a known medical problem with an immediate survivor.
2. At the door identify yourself and ask to come in. (Notification should take place in a private setting.)
3. When inside, ensure you are notifying the right person.
4. It is important to put all of the known basic facts into one sentence. Make sure the message is absolutely clear and direct.
5. Begin with, "I have very bad news" or "I am very sorry to tell you."
6. Let them know what happened, "Your husband/wife died responding to a call or "Bill was killed in an accident (Use the victim's first name when appropriate.)
7. Allow the family to express their emotions. Do not try to talk them out of their grief. Also, since this is a very sad time, do not mask your own grief.
8. Provide only the facts you know, never speculate. Answer all questions honestly. If you cannot answer a question, find the correct answer.
9. Avoid the following phrases: "I know how you feel" or "It was God's will".

10. Ask if the Department can assist by notifying immediate family members (parents, brothers and sisters).
11. Never leave immediately after making the notification. Have at least one member of the Department stay with the family – preferably the Family Liaison Officer or Senior Chaplain.
12. Do not take the victim's personal items with you.

Ask the survivor(s) if they wish to see the deceased officer, even if the body is badly disfigured. People often have a need to see, touch and hold the deceased; otherwise they may be in denial. This is often very helpful in the family grief process. It gives a sense of finality.

13. If family members wish to see the body, arrangements need to be made rapidly for viewing. Sensitivity to the family is very important. Provide the best possible environment and avoid delays that heighten the family's anxiety.
14. Offer to transport the family to the location of the body, and help prepare them for what they will see. It is highly recommended that the family not drive themselves. If the family insists on driving, a uniformed officer should accompany them in the family vehicle. (NOTE: If family members arrive on the scene during on-going operations it is important to identify them and keep them out of the direct flow of operations, particularly if the body is still trapped or on the scene.)
15. If you transport the family, advise dispatch that you are transporting the relatives and if possible, turn off your radio or switch to an alternate channel. Communicate by phone.
16. If the Department's Liaison Officer is not present at the notification, the family should be given the name prior to the team deployment. Write down their telephone and pager numbers. If possible, this person should already be known by the family.
17. Advise the family that the Liaison Officer will contact them to assist with the necessary arrangements.
18. Advise the family of possible media calls. Unwanted media exposure will only add to the difficulty of the tragedy. Suggest that a friend of the family screen incoming calls. Offer to be the media spokes person for the family. Assure the family that their wishes are important to the Department.
19. Advise the family that an autopsy may be required and why it is necessary.
20. Ensure that the family understands that they do not have to make any immediate decisions regarding services, mortuary, wills, etc. The Department's Liaison Officer may be able to provide assistance.

FAMILY SUPPORT DURING THE WAKE OR FUNERAL:

The Chief of Police, designee, and chaplain will meet with the officer's family at their home to determine their wishes regarding departmental participation or assistance in the preparation of the funeral or services. All possible assistance will be rendered with the approval of the family; the Chief of Police will then assign a family liaison officer or chaplain to assist.

DEPARTMENT LIAISON OFFICER

This position is normally assigned to a division commander due to the need to effectively coordinate resources of the department.

Department Liaison Officer and Chaplain Responsibilities include:

- Notify Concerns of Police Survivors
- Notify department members to provide emotional support and assistance to surviving families.
- Work closely with the family to ensure that the needs of the family are fulfilled.
- Meet with the following persons to coordinate funeral activities if the family desires departmental involvement:
 - Chief of Police
 - Asst. chief of Police and shift commanders
 - Funeral Director.
 - Family priest or minister
 - Cemetery Director
 - Honor Guard
- Direct the funeral activities of the department and visiting agencies according to the wishes of the family.
- Issue a teletype message (according to TCIC and NCIC guidelines) to include the following: Name of deceased, Date and time of death, Circumstances surrounding the death, Funeral arrangements, Uniform to be worn and expressions of sympathy in lieu of flowers.
- Contact person and phone number for visiting agencies to indicate their desire to attend and to obtain further information.
- Obtain an American Flag. If the family wishes a flag presentation by the Chief of Police, notify the Chief's office.
- If the family desires a burial in uniform, select an officer to obtain a uniform and all accouterments (except weapons) and deliver them to the funeral home.
- If the family desires, assign members for usher and/or pallbearer duty.

- Arrange for the delivery of the officer's personal belongings to the family.
- Brief the Chief of Police and staff concerning all funeral arrangements.
- Ensure that the surviving parents are afforded recognition and that proper placement is arranged for them during the funeral and procession.
- Coordinate traffic management with other jurisdictions.
- Assign an officer to remain at the family home during the viewing and funeral.
- Arrange for close patrol checks of the survivor's home for several weeks following the funeral. This service is necessary since the survivors may be spending much time away from the home dealing with family matters.
- Assist the family gather and coordinate information regarding benefits available to them.

CONTINUED SUPPORT FOR THE FAMILY

The department liaison officer and department chaplain acts as long-term liaisons with the surviving family. The department liaison officer and chaplain ensure that close contact is maintained between the department and the survivors and that their needs are met for as long as they feel the need for support.

Chaplains and other members of the department are encouraged to keep in touch with the family. Close friends, co-workers and officials should arrange with the family to visit the home periodically as long as the family expresses a desire to have these contacts.

Increased contact and additional support during holidays should be considered. Survivors should continue to be invited to departmental activities or functions to ensure continued contact.

Response to Life Threatening Injury and Death not in the Line of Duty:

The department chaplain will offer the following for the surviving family.

- Personal notification of family members.
- Transportation to the hospital or other location(s) for family members.
- Family chaplain liaisons will be available to the family, as needed or requested by the family.
- Department honors will be rendered with approval of Chief of Police.
- The chaplain should offer to gather information about survivor benefits:

The following protocol is to assist in the event of a line-of-duty death. This information is provided for assistance purposes. Each individual department must evaluate its local conditions and utilize, amend, or change these recommendations accordingly.

NOTIFICATION OF POLICE DEPARTMENT PERSONNEL

It is very important that all members of the Department be notified of the death(s) as soon as possible, including those off-duty and vacationing personnel.

In the event of a line of duty death, the external monitoring of police frequencies may be extensive. Communications regarding notifications should be restricted to the telephone whenever possible. Department personnel should not give out any information about the incident unless it is approved by the Chief or his designee.

For a line-of-duty death, a message, prepared and/or approved by the Chief, should be transmitted to personnel when requested to do so.

ASSISTANCE FOR AFFECTED OFFICERS

Officers who were on the scene or who arrived after an officer was critically injured or killed should be relieved as soon as possible. The chaplain should accompany these officers to a place that is quiet and out of the public eye.

Police Chaplains must be trained in traumatic crisis counseling and Critical incident stress management and must act quickly to circumvent additional traumatic stress related reactions by department personnel.

Police employees who may have been emotionally affected by the serious injury or death of another officer should be referred to the chaplain for (CISM) critical incident stress management for debriefing and defusing sessions as soon as possible.

NOTES

DEATH NOTIFICATION FORM

Date: _____ Time: _____ City: _____

Circle One: (1) Hospital (2) Residence (3) Nursing Facility (4) Scene (5) Place of Employment (6) Other

If other explains: _____

Diseased Name: _____

Address: _____ City: _____

Phone #: _____

M/F Date of Birth: _____ Age: ____ Marital Status: ____ # of Children: _____

Was Notification Made to all Survivors: _____?

Occupation: _____ SSN # _____

Known Facts: _____

Name of Next of Kin Notified: _____

Relationship to deceased: _____

Health Status: _____ Medical Conditions: _____

Address: _____ Phone#: _____

Name of Assisting Officer: _____ Badge#: _____

If out of County, department notified: _____

Name of person notified: _____ Time: _____

Phone#: _____ City: _____

Was notification made: _____ How: _____

By Whom: _____

Signature: _____ Date: _____ Time: _____

SURVIVOR INTAKE FORM

Information about survivors and their wishes are to be completed by notifier. [This form is to be filled out at the time of notification and retained by the notifier.]

Name of survivor: _____

Person providing information (if different): _____

Address of survivor: _____

City & ZIP: _____

Telephone: Home: _____ Work: _____

Relation to the deceased: _____

Name of funeral requested: _____

If the survivor has no preference in funeral homes, would he/she like the medical examiner to choose one? Yes No

Do any survivors wish to see the body of the person who has died?

_____ Yes _____ No _____ Will decide later.

Are there any special items that might have been in the possession of the person who died (such as jewelry or a donor card)? Yes No

List Items: _____

Others to be contacted by notifier: kin, partners, roommates, etc

Phone: _____ Phone: _____

Persons contacted by notifier to provide support to the survivor:

Phone: _____ Phone: _____

Signature: _____
Notifier

Date: _____ Time: _____

RESOURCE INFORMATION

Basic Information for Survivors.

This form should be completed by notifiers at the time of notification and left with the survivor.

1. You may obtain copies of the *death certificate* from the funeral home.
2. You may obtain a copy of the *autopsy report* from the county medical Examiner.

(Name and phone): _____

3. You may obtain a copy of a police report from the agency investigating an accident or crime: _____

Police case number, if any: _____.

4. You may obtain **medical records** from the hospital or clinic where the deceased was taken: _____

Note: It takes varying amounts of time to obtain death certificates, medical records and autopsy and police reports. Ask officials when you can expect them.

5. You may file for **social security benefits** by contacting the Social Security Administration closest to your Phone Number: _____

6. If the person who died was a veteran, contact the Local **Veterans Administration** Regional Office closest to your location.

7. Notify the **insurance agent** and the **bank** of the person who has died.

8. If the person who died was murdered, or was killed by a drunk or reckless driver or hit-and-run driver, you may be eligible for **Crime Victim Compensation** for medical, funeral and counseling bills and for loss of wages. Contact the Crime Victim Assistance Division, Attorney General's Office, closest to your location:

Phone Number: _____

9. If there is a **criminal case** pending, contact the county attorney in the county where the crime occurred for more information:

Name of the person who notified you: _____

Phone: _____ Date: _____ Time: _____

CHAPTER 12: STAFF ASSIGNMENTS DURING THE FUNERAL

In order to provide the best possible tribute to the fallen Officer(s), it is extremely important for the department to organize an effective team(s) to manage all of the related activities.

The Police Chief has the responsibility for directing Chaplain Activities. It is recommended that the Chief assign all Chaplains to function as: Funeral Coordinator, Family Liaison Officer, Church Coordinator, Procession Coordinator, and Cemetery Coordinator.

Other assignments may be established depending on the Department's make-up and desires (e.g., Hospital Liaison, or Reception Coordinator. It is also recommended that these duties be assigned to Chaplains upon assignment of duties to the department, before an incident occurs. This will allow Chaplains an opportunity to research and recommend a course of action for the Department to follow prior to an incident. Backup personnel should also be assigned to positions.

FUNERAL COORDINATOR

The Funeral Coordinator/Chaplain is the overall coordinator for the Department's involvement in the planning and participation in the funeral, and the after care for the family.

The Chaplain needs to be able to effectively communicate with the police Chief, funeral team members, Department members, and the public. The Funeral Coordinator/Chaplain may be assigned these additional duties:

- Conduct coordination meetings with key personnel as needed.
- Assure notification of all off-duty and vacationing personnel
- Arrange to have flags lowered to half mast.
- Notify all other City, County or State Departments when requested to do so.
- Notify neighboring Departments.
- Make appropriate follow-up contacts when the funeral arrangements have been made.
- Personally collect all of the deceased personal items from the station and forward them to the
Family Liaison Officer.
- Remain a contact person for outside agencies.
- Make appropriate arrangements for a post funeral meal/reception.
- Contact support agencies, as appropriate, to arrange for their assistance.
- Contact appropriate Department personnel to arrange for finalization of paperwork forms, etc.
- Contact area law enforcement agencies and other agencies for assistance during the funeral.

CHAPLAIN COORDINATOR:

The Chaplain Coordinator assists with all phases of the funeral and/or memorial services. He/she works closely with the Family Liaison Officer to ensure that the needs and desires of the family are being met. Duties may include:

1. Working with the Funeral Home Director to ensure that the family is taken care of appropriately in the planning of the funeral.
2. Determine whether department vehicles will be used as a funeral coach, family transportation, and for the processional.
3. Coordinate with the Honor Guard.
4. Obtaining and delivering to the Funeral Home Director burial clothing from the family or from the Department.
5. Coordinates any formal walk-through of uniformed personnel during the period of viewing.
6. Assists in coordinating the funeral service such as prayers, readings, music, and eulogies.
7. Assists with arrival and seating of police department members, visiting departments, dignitaries, friends, and family.

It is the responsibility of the Chaplain Coordinator to coordinate the procession from the funeral service to the cemetery. Duties may include:

1. Coordinating with other departments that will be involved with the procession.
2. Contacting and working with the Police Liaison Officer in setting up traffic control, directing traffic and assisting in the staging areas.
3. Assisting of placing the procession vehicles in order.
4. Assisting the route of the procession, how long the procession will be and if the procession will pass in front of the police department or other special location.
5. Providing maps and directions to the service.
6. Assigning personnel to assist in parking cars as well as setting up personal vehicles for the processional.
7. During a walking procession, directing individuals into proper placement.

CEMETERY:

The Coordinator is responsible for the events at the cemetery from the time the processional arrives until the end of the service and everyone has left the cemetery. He/she works with the Family Liaison Officer and the Funeral Home Director in determining how the grave side service is put together. Duties may include:

1. Ensuring the proper placement and formation of Department members, honor and color guards, bugler, pipers, drummers, firing squads, visiting departments, friends and others.

2. Coordinating with the cemetery the overhead protection for the immediate family, public address system, parking, staging and security.
3. Coordinating medical personnel at the cemetery.
4. If a flag is going to be presented to the family, assisting in the coordination of the presentation with the Department or other personnel involved.
5. Providing any details or instructions regarding post-funeral gatherings.

Decisions regarding the funeral are the responsibility of the family. However, consideration should be given to the individual's wishes, if he/she communicated those wishes before his/her death (Personal Information Packet); the family's religious traditions; and, traditions.

The honors and support provided by the department may be affected by circumstances surrounding the death, established departmental protocol and the classification (type) of death.

SUGGESTED SERVICES FOR FUNERAL TYPES

Listed below are the different types of situations and suggested services which may be offered to the family. The Chaplain Liaison Officer should coordinate the arrangements with the family. The most important item in any situation is that prior approval of any and all funeral services must be given by the family of the deceased. Under no circumstances should assumptions be made.

- Flag Presentation
- Badge Shrouds
- Bagpipes
- Bulgur
- Eulogies
- Honor Guards
- Active Duty Pallbearers
- Walk Through

SPECIAL FUNERAL CONSIDERATIONS

Decisions regarding the funeral are the responsibility of the family. However, consideration should be given to the individual's wishes, if he/she communicated those wishes before his/her death (Personal Information Packet); the family's religious traditions; and, police service traditions.

The honors and support provided by the police department may be affected by circumstances surrounding the death, established departmental protocol and the classification (type) of death.

FUNERAL/MEMORIAL SERVICE

Assisting Chaplains will be required to have knowledge on particular information as to advise when ask.

Depending on department policy, is it customary for all available department personnel to attend in full class 'A' dress uniform, including off duty members.

All members will wear a black band over their badges from the time the death is announced until 24 hours after the finish of service. The department may choose to have the shroud remain on the badge for thirty day mourning period.

All department flags will fly at half-staff from the time of the death is announced until at least 24 hours after finish of service, and up to one week after death.

All regular uniformed personnel will remain covered while outdoors, except during prayers, and uncovered indoors.

All Honor Guard members will be covered at all times during the performance of their duties.

Seating will be reserved as such that the family is nearest the casket followed by the Pallbearers, the department officers, descending in rank, followed by all other members of the department.

Following that, will be all visiting uniformed officers, from the longest distance traveled to the least traveled. The City Mayor, Councilmen, and other dignitaries (from local to most broad (i.e. Federal), will be seated either to the side of all officers or directly behind the department personnel.

Upon conclusion of the service, all personnel starting with the Pallbearers, and going further from the casket, will file out, being the first to leave, to assemble outside in preparation of the passing of the casket.

The casket will precede the family filing through the assembled police officers to the designated Funeral Coach.

Directly behind the casket as it exits the chapel/church will be the immediate family, followed by extended family and all other attendees.

The Pallbearers will then place the casket in the designated vehicle, if chosen.

GUIDELINES FOR PROCESSIONAL TO, AND ASSEMBLY AT GRAVESIDE

NOTE: Depending on department policy, There are two options for proceeding to the graveside – marching and vehicular procession.

Marching Processional – It is the responsibility of the Chaplain Coordinator to ensure that the order for the marching processional is as follows, and that the Bugler/Bagpipe player is standing by at the cemetery:

- Piper(s) and Drummer(s)
- Honor Guard
- Clergy/Department Chaplain
- Funeral Coach with Pallbearers and/or Honor Guard Escort
- Immediate Family
- Police Chief, Department Officers in descending order of rank, and Dignitaries from most local to most broad.
- Home department uniformed personnel.
- Visiting Department uniformed personnel from the longest distance traveled to the least traveled.
- Additional department vehicles
- Visiting Department vehicles from the longest distance traveled to the least traveled
- All other miscellaneous vehicles

VEHICULAR PROCESSION

It is again the responsibility of the Chaplain Coordinator to ensure that the order for the vehicular processional is appropriate, as follows, and that Piper(s), Drummer(s), Bugler and Honor Guard are standing by at the cemetery:

- Lead Car provided by funeral home, containing appropriate Clergy/Department Chaplain
- Vehicles/Funeral Coach, with Pallbearers, riding inside or immediately following family in one vehicle if funeral coach
- Car or Limousine with Immediate Family
- Police Chief vehicle followed by officer cars and dignitary cars
- Additional Home Department vehicles
- Visiting Department vehicles from the longest distance traveled
- All other Home Department Personnel, if in personal vehicles
- All other Visiting Department Personnel, if in personal vehicles
- All other Miscellaneous Vehicles

PERSON ASSEMBLY AT GRAVESIDE

- Honor Guards at entrance to cemetery.
- The Piper(s), Drummer(s), Taps player will be assembled approximately 100 yards from the gravesite, and the Bugler will assemble approximately 20 feet past the gravesite.

- Police walk of Honor – the members of the home department shall line up on both sides of the path, in an organized fashion from the Coach to the graveside, approximately 10 feet apart with all additional home department officers, and visiting departments lining up behind the front row of police officers.
- Once the officers are appropriately assembled, the Honor Guard will line up at the beginning of the Walk of Honor followed by the Clergy/Chaplain.
- At this point the Pallbearers will remove the casket from the Coach and the Honor Guard will command “Attention”. All officers will then come to attention, awaiting the command “Present Arms” which will signal the Pallbearers to begin carrying the casket down the Walk of Honor, and all officers will render a hand salute just as the casket nears them.
- The casket will be followed in order by the Immediate Family, the Police Chief and Officers, in descending rank, command staff, and other dignitaries.
- Once the casket reaches the gravesite, the piper(s) and drummer(s) may begin playing ‘Amazing Grace’ as they approach from the distance, marching to approximately 20 feet from the foot end of the graveside.
- After the piper(s) and drummer(s) reach their appropriate places, the command “Officers, Order Arms, Fall In” will be given, instructing the officers to move from their places in the Walk of Honor, to orderly lined, directly behind (or across from) the family, who are to be seated directly in front of the casket.

NOTES

CHAPTER 13: CALL PROCEDURES: DOMESTIC VIOLENCE : *When Police Officers Abuse*

WHAT IS DOMESTIC VIOLENCE?

Introduction: These general guidelines consolidate the police response procedures for domestic violence cases, including abuse and neglect of the elderly and disabled, based on State law, Court Rules, and the Domestic Violence Procedures which was jointly prepared by the Supreme Court and the Attorney General through the Division of Criminal Justice.

Definitions:

Domestic Violence means the occurrence of one or more of the following criminal offenses upon a person protected under the Prevention of Domestic Violence Act of 1990:

- Homicide
- Assault
- Aggravated assault
- Terroristic threat
- Kidnapping
- Criminal Restraint
- False Imprisonment
- Sex Assault/Rape
- Lewdness
- Criminal Mischief
- Burglary
- Criminal Trespass
- Harassment
- Stalking

Victim of Domestic Violence means a person protected by the domestic violence act and includes any person:

- Who is 18 years of age or older
- Who is an emancipated minor, and who has been subjected to domestic violence by:
 - Spouse
 - Former spouse
- Any other person who is a present or former household member, OR
- Who, regardless of age, has been subjected to domestic violence by a person:

- With whom the victim has a child in common, or with whom the victim anticipates having a child in common, if one of the parties is pregnant, or, regardless of age, has been subjected to domestic violence by a person with whom the victim has had a dating relationship.
- A victim may be below the age of 18.
- The domestic violence assailant must be over the age of 18 or emancipated at the time of the offense.

Note: The Prevention of Domestic Violence Act does not define a victim of domestic violence by age, physical or psychological condition or sex. An un-emancipated minor who commits an act of domestic violence may not be prosecuted as a domestic violence defendant but can be prosecuted under the juvenile delinquency laws. The entry of pre-or post dispositional restraints can also be considered:

A minor is considered emancipated from his or her parents when the minor:

- Has been married;
- Has entered military service;
- Has a child or is pregnant; or

Has been previously declared by a court or an administrative agency to be emancipated

Most battered spouses call 911 for help for a police officer during a domestic disturbance. But if the abuser is a police officer, a 911 call may bring only frustration, fear and reluctance knowing that the police officers that will be sent to help you will be somebody you know.

Victimized spouses, who are most likely female, may fear that emergency units responding to their complaints of domestic abuse will not believe them. And worse, their pleas for protection may not be treated like other domestic violence calls handled by law enforcement.

The absence of a clear policy does not mean that police managers ignore domestic violence involving their officers. In fact, most agencies conduct both criminal and internal affairs investigations. To reduce possible allegations of a cover-up, some agencies request outside assistance for such investigations. Still others require direct supervisory attention any time a law enforcement officer is implicated in a family disturbance.

The problem, then, is one of timing. Police departments properly handle domestic disputes when they become aware of them. Oftentimes, however, cases remain unreported, even though other officers may have direct knowledge of the incidents. Clearly, police administrators should focus on these cases, from both the standpoint of the officer committing the violence and those officers who know the facts but choose to remain silent.

Although patrol officers reported somewhat higher rates of aggression, the effects of rank were statistically insignificant. In short, police officers of all ranks may be susceptible to the risk of marital violence.

Furthermore, officers who reported working excessively long hours and failing to take leave had higher rates of marital aggression, suggesting that increased job dedication may result in increased marital violence.

Previous attempts by police to mediate family violence or to practice crisis intervention in their own families have proven unsuccessful. This means that police officers can no longer remain silent when they believe one of their own is in trouble; they must turn to others for help.

SIDING WITH FELLOW OFFICERS

Due to the unwritten "code of silence", many officers adhere to under which a complaint might be dismissed by the responding officer, redefined as a lesser incident or not written up at all.

"A cop is going to side with his fellow officers," They don't want to embarrass him, cause an investigation, arrest him or cause him to lose his career.

After all, most in the profession know that if an officer is brought up on domestic violence charges and convicted, he could lose his job.

Experts agree that victims of violence by an intimate partner face many challenges to seeking help. But when the abused are related to police officers sworn to obey and uphold laws, including laws that criminalize domestic violence, finding a savior may seem impossible or the victim may believe they will be hurt by a judicial system their police spouse knows all too well.

Domestic Violence remains a prevalent social and law enforcement problem in the United States, and the public demands that law enforcement agencies work aggressively to prevent it. Sadly, several studies show that too many law enforcement officers themselves commit acts of domestic abuse,

(1) Which is not only devastating to the families of these officers but also damaging to the agencies and communities that they serve? This unlawful behavior undermines the credibility and effectiveness of the officer and diminishes the standards of the department and the profession.

(2) As law enforcement responds to the demands of the community for stronger enforcement of domestic violence laws, it cannot ignore those within its own ranks who commit the same offenses.

Law enforcement managers must respond when domestic violence occurs within the ranks-to enforce the law, to protect the integrity and reputation of the agency, and to reflect the ethical standard of stewardship expected of law enforcement leaders.

Responding appropriately and adequately when domestic violence hits "home" is often not as easy as it may sound. The problem comprises many issues and requires a comprehensive approach, involving leadership, recruitment screening, policies and procedures, training, and violation investigation and response.

As always, because state and local laws may vary, readers should consult their legal advisors before embarking on a new departmental policy and response plan. Be forewarned, however, law enforcement administrators should not delay in implementing such a plan. The next family tragedy could fall squarely on anyone's doorstep.

Domestic violence is defined, in part, by the nature of the relationship between two individuals and, in part, by the conduct of the offender. It includes abuse inflicted on spouses; children; older or otherwise vulnerable adults, including parents; and any other persons similarly situated to a spouse, child, or parent. The abusive conduct may be physical, sexual, emotional, or financial.

The behaviors identified as domestic violence are varied, but have several common unique characteristics. First, it occurs within an intimate relationship. Officers may commit physical violence against a family member that they never would consider inflicting on a criminal suspect, in part, because of the perceived "safety" of the intimate relationship.

Second, domestic violence is a learned behavior; it cannot be attributed to genetics, illness, use of alcohol or other drugs, or stress, although these elements may increase the likelihood that violence will occur. Behavior is learned and reinforced as an acceptable, or even expected, way of behaving toward family members. Finally, domestic violence is recurrent and generally follows a cycle and involves various abusive behaviors.

Unfortunately, Police families are more vulnerable to domestic violence, alcoholism, divorce and suicide than other families due to the stress associated with police work. Such stress comes from irregular shifts, rotating work schedules, exposure to litigation, pain and suffering and violent confrontations.

Arresting one of your own officers is a difficult task, especially when that officer is a friend and co-worker. Most everyone in the department will know when an officer is having domestic problems but few will ever know that the domestic disputes have become violent.

THE FAMILY ENIGMA

In many ways, police families resemble other families.

However, in addition to dealing with the same daily frustrations that confront all families, they must cope with all of the exceptional pressures that accompany police work. This extraordinary stress makes police officers more prone than average citizens to alcoholism, domestic violence, divorce, and suicide.

The very nature of police work teaches officers to control their emotions. They discipline their minds to remain focused in dynamic situations, no matter how bizarre or terrifying. Above all, they must prevail in the face of adversity.

Officers learn to interrogate when suspicious, to intimidate or match aggression when challenged, and to dominate when threatened.

Granted, these actions are necessary for survival and control. However, when combined with the unfavorable conditions of police work - undesirable shifts, rotating work schedules, days off spent in court, exposure to pain and suffering, and violent confrontations - even exceptional police officers can become very poor spouses, parents, and friends.

LAW ENFORCEMENT'S RESPONSE

Sadly, though numerous case studies document the susceptibility of police families to domestic problems, police officers rarely receive advice on avoiding such pitfalls. For the most part, senior officers only admonish rookies to "leave the job at work."

If art imitates life, then the media's portrayal of many police officers as grumpy, quarrelsome, divorced alcoholics is right on target. Indeed, law enforcement seems to have institutionalized marital and family turmoil into the profession.

The absence of clear policy does not mean that police managers ignore domestic violence involving their officers. In fact, most agencies conduct both criminal and internal affairs investigations. To reduce possible allegations of a cover-up, some agencies request outside assistance for such investigations. Still others require direct supervisory attention any time a law enforcement officer is implicated in a family disturbance.

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Although patrol officers reported somewhat higher rates of aggression, the effects of rank were statistically insignificant. In short, police officers of all ranks may be susceptible to the risk of marital violence. Furthermore, officers who reported working excessively long hours and failing to take leave had higher rates of marital aggression, suggesting that increased job dedication may result in increased marital violence.

Previous attempts by police to mediate family violence or to practice crisis intervention in their own families have proven unsuccessful. This means that police officers can no longer remain silent when they believe one of their own is in trouble; they must turn to others for help.

A CHAPLAINS ROLE IN DOMESTIC VIOLENCE

When faced with domestic violence, many seek guidance and solace within their faith. This section offers resources that address how various faiths address the question of domestic and other violence.

Domestic violence occurs in all cultures and religious faiths. Studies have shown that women involved in domestic violence often feel abandoned by God. Christian women, depending on religion, often feel compelled to stay in abusive relationships by scripture mandating them to submit to their husbands or turn the other cheek.

Abused persons may find strength in their religious faith and community. If they are comfortable doing so, they may talk to their religious leaders about their situations and ask for spiritual support. They may also find support from friends in their religious community or by reading some of the materials listed in this section.

As religious leaders, it is important to have special training on domestic violence issues, so that you do not offer poor advice to petitioner or make them uncomfortable or upset. Advice to stay with an abuser and keep the family intact at all costs, advice that it is Gods will for them to stay in the abusive relationship, or advice to seek couples counseling may be religiously appropriate, but could be very damaging to a victim and their safety.

Keep in mind that you can be a key source of referrals to a therapist, counselor, or other professional who is trained to deal with domestic violence issues, while at the same time using your own religious faith to help cope with abusive situations.

REMEMBER THE GOALS

- Safety for the victims
- Accountability for the abuser
- Restoration of individuals and IF POSSIBLE, relationships, or
- Mourning the loss of the relationships

DOS AND DON'TS IN BATTERING RELATIONSHIPS

- DO believe victims. Their description of the violence is only the tip of the iceberg.
- DO reassure victims that this is not their fault, they do not deserve this treatment, and it is not God's will for them.

- DO give referral information; primary resources are your local domestic violence programs and the National Domestic Violence Hotline at 1-800-799-SAFE (7233). You can find your local domestic violence program under State and County phone references.
- DO support and respect their choices. Even if they initially choose to return to an abuser, it is their choice and they have the most information about how to survive.
- DO encourage victims to think about a SAFETY PLAN. This is both practical and helps them stay in touch with the reality of the abuser's violence. Safety planning is a process that is ongoing.
- DO protect confidentiality at all times.
- DO NOT give information about a victim's whereabouts to the abuser or to others who might pass information on to the abuser.
- DO NOT discuss with the parish council/session/elders that might inadvertently pass information on to the abuser.
- DO assist with any religious concerns

Domestic violence cuts across economic, ethnic, racial and faith lines, and religious traditions. Advocates are creating organizations that offer training for clergy, Chaplains, and Pastors etc. and resources for victims and campaigns to increase awareness of the problem.

THE ESCAPE PLAN

As Chaplain who is attempting to help someone through domestic violence, regardless if it is a police officer or citizen, it may become necessary for you to assist in an “escape plan” or “Safety Plan” for the victim. Listed below are some information needed for that plan:

No one knows your partner better than you do. What may seem like a simple glance or an offhand remark, you may understand better to be a threat or warning sign. If you are afraid, you are probably right to feel that way. If you don't feel that you want to leave your partner at this point, that does not mean that you are bad, stupid, desire to be hurt or want to be made to feel badly.

It does mean, however, that you must take extra special care to plan for a crisis situation. The fact is that violence gets progressively worse, and you must protect yourself accordingly. You need time to make decisions about your own life while also attempting to keep yourself violence-free

The purpose of this plan is to help you recognize a pattern in your partner's behavior. If you can identify the clues that your partner provides as a situation escalates, you may be able to make preparations to leave before you are hurt.

Your experience is your best weapon and your sense of fear is your best tool. You do have choices, and escape may be possible, even temporarily. Whether or not you actually use this plan, having thought about it gives you power.

SAFETY PLAN CHECKLIST

Although it might be difficult or upsetting, try to think carefully about four incidents when your partner became violent if your partner has been physically violent less than three times, and then think about other situations in which you were afraid

- First
- Typical
- Worst or one of the worst
- Most recent

REMEMBER DETAILS

Try to play through scenes slowly in your mind. Don't focus on you, but concentrate on and make notes of:

- What your partner said (curses, lies, stories)
- How your partner said it
- Tone of voice
- Ability to Listen
- Effects of drugs or alcohol
- Facial features (a certain look in your partner's eyes, a nervous twitch)
- Breathing
- Body posture

THINK ABOUT YOUR SURROUNDINGS - DRAW A FLOOR PLAN

While the spouse may know their house well, if they are upset, frightened, hurried or injured it may be difficult to figure out an escape route. Take the time to actually draw a map, and make note of things they might need to do in order to get out.

If they have young children, you must figure out the best way to grab and remove them. If they are older, a signal and a meeting place away from your partner should be agreed upon. Anticipate any problems by having at least two different escape routes planned as you would for a fire drill. Consider:

- Doors, windows, exits
- Babies or young children (how will you bring them with you)
- Older children (you may want to establish a code word or signal to let older children know that you are putting the plan into action)

PACK A BAG WITH EMERGENCY ITEMS.

You may want to hide this bag under a bed, with a friend or at work. Things to remember:

- Birth certificates
- Cash
- Clothes, toiletries
- Important paperwork (bankbooks, checkbooks)
- Personal treasures or family heirlooms
- Pet supplies

KNOW LOCATIONS AND PHONE NUMBERS OF SAFE PLACES:

- Police
- Family
- Friends
- Shelter
- Hotel

INTIMATE PARTNERS

Many victims are intimate partners of police officers. Some of these victims are police officers themselves. The accounts of the abuse suffered by women were so similar as to be almost identical as non-police families.

"Typical" forms of abuse that civilian abusers use to gain and maintain control over their victims isolation from family and friends, verbal degradation and humiliation, sexual and physical abuse is the same forms of abuse suffered by police officers partners. But beyond that, patterns in police abusers' behavior seemed to be unique to this population.

The characteristics and skills developed in their professional training are the very same characteristics and skills that, when used in an intimate relationship, make these officers very dangerous abusers.

FOR EXAMPLE, POLICE ARE TRAINED TO:

- Walk in and take control of any situation
- Intimidate by presence alone: voice, stance
- Obtain information through interrogation and surveillance
- Deceive and manipulate when necessary
- Use weapons and deadly force

- Attribute the level of force used to the other party
- Assume a position of ultimate authority

This training produces competent police officers. The problem occurs when the officer walks through the front door of his home with the same mind-set he has in his professional life.

ABUSE TACTICS

Some of the spill-over women describe includes:

- Police abusers carry the same sense of entitlement to authority and respect from their intimate partners as from civilians on the street.
- They cannot conceive of an egalitarian relationship, they must always be dominant and in control.
- They cannot tolerate any challenge to their authority or questioning of their decisions. When his intimate partner disagrees with him or questions his authority he sees this as justification to use force and blame it on her, saying, "Look what you made me do. I've told you not to argue with me."

Police abusers are skilled in verbal intimidation and degradation. Women tell us their abusers scream at them like they talk to criminals on the street, their voices and faces change; they use filthy street language; they tell the victim she is "just like the scumbags he deals with every day." Some women describe fearing that the abuser has lost touch with reality, that he has forgotten who she is while he is in this rage.

The accounts of the physical abuse these victims have described to me are far and away the most brutal I have ever heard. These perpetrators are trained in the use of force. To make it worse, they are of the mind-set that the victim, by showing any resistance to his will, is responsible for the level of force that is used against her. He is skilled in turning it all around to make even her believe that "she made him do it."

He then reinforces her feelings of isolation and hopelessness by assuring her that there is no escape. She can call the police, but who does she think they will believe him, or her? She can go to family or friends or a shelter, but he or his friends will find her.

She can press charges against him, but she doesn't have enough evidence or credibility to make them stick. Or, if she does manage to get him convicted, he will lose his job and then she'll have no financial support. Or he will lose his job and then she will lose her life. If the victim has ever tried to escape before, she hears the truth of what he is saying.

SYSTEM RESPONSE INADEQUATE

The victim knows that when the police arrive at the scene and learn that their partner is a police officer, a shift takes place. The responding officers are now responding not to the victim, but to "an officer in need."

Most police departments in the country do not even have a policy addressing the police-perpetrated domestic violence, so it is the responding officers, the abuser's colleagues, who will be using their discretion as to how to handle the call.

The responding officers are likely to try to dissuade her from signing a complaint. They advise the victim to think about his/her career, think about all the good things he/she has, thought about their kids. They assure him/her that he's a good man and a good police officer that he/she's just under a lot of stress. They promise to talk to him, to straighten him out.

Should the victim insist on pressing charges, she/he faces a legal system that is hostile and foreign to them, but is his/her daily work environment? He/she knows the system and the players there are acquaintances and co-workers. Historically, the court has been lenient with perpetrators, particularly those who are members of law enforcement.

The Gun Law has had the effect of intensifying the efforts of the court to acquit the officer in order to protect his career. The victim knows that he/she will be found if they go to a shelter or family or friends. Most and friends are afraid of him/her and afraid to get involved. Even domestic violence agencies and shelters feel inadequate and afraid to help.

In general, the smaller the town the fewer options are available, and the higher the rank the fewer people who are willing to help her.

CHALLENGING THE POLICE FAMILY

We all know that police have a sense of family and have historically protected their own. They kept domestic violence in police homes a "family secret," and dealt with it in-house when they dealt with it at all.

We still see the same reluctance within the departments to consider police-perpetrated domestic violence a crime as we saw in the general population 20 years ago. Police regress to talking about domestic violence in terms of private matters and marital problems. They ask, "How can the department interfere in an employee's private life? The department shouldn't be involved in an officer's marital problems. What the officer does on his own time is his own business." They ask, "How can we prosecute one of our own?"

Victims of police officers are not only challenging their abuser's personal idea of the family, but they are up against the police family. The victim, not the abuser, is seen as the one who is causing problems for the department; she is identified as a traitor. The forces gather to silence her and to protect him. She has nowhere to turn.

If she is herself a police officer, she defies everyone's image of a victim. Her colleagues question her professional competence if she is a victim in her own home.

If her abuser is also an officer, she is breaking the police code of silence by exposing him. Her colleagues may well turn against her and side with the abuser.

LAW ENFORCEMENT'S EMBARRASSMENT

If these were not typical scenarios, my program would not exist. It is an embarrassment to law enforcement that it does exist. The fact that I have gotten calls from victims and advocates all over the country testifies to the fact that we have a very serious, widespread problem here. Victims of police officer abuse are routinely denied protection of the law and no one knows where to turn.

I began this program to find alternative solutions for these victims. Because the protectors are the abusers, we cannot use any of the resources or support systems we have worked so hard to put in place for other battered women.

DEPARTMENTAL INTEGRITY

Something is very wrong here. We should not have to search for alternative sources of shelter for police victims because the officers will hunt them down in established shelters.

We should not need to persuade hospitals to give them free medical care because the victim is too terrified to use his medical insurance. We should not need to look for ways around the criminal justice system because we know that system is biased in favor of the police officer.

These "specialized services" should not be necessary for any victim, much less police-related victims. It is time for us to talk about ways to stop police departments from colluding with officers who abuse their families, both their personal families and the police family.

How does any department delude itself into believing it is "taking care of its own" when it protects abusers within the department? And how can we allow any officer who abuses his own family to respond to domestic violence calls in our communities?

Instead of customizing services for victims of police abusers, we need to expect police departments to do what we ask battered women to do. We need to expect that the departments have the integrity to hold their own police family members accountable for criminal behavior.

The bottom line is that the police must decide whether or not they truly regard domestic violence as a crime. If it is a crime when committed by a civilian, then it is a crime when committed by a police officer. The consequence of losing one's job as a law enforcement officer as a result of perpetrating a criminal offense is not "holding police to a higher standard."

The fact that most police perpetrators' greatest fear is the loss of their job informs us that a department's policies and attitudes may be the most influential factors in deterring police officers from abusing their intimate partners.

Police departments have a responsibility to their employees and their employees' families to confront this problem. Specific policies must be written and it must be clearly communicated to all members of law enforcement that domestic violence within the police home will no longer be tolerated.

Domestic violence is a multifaceted complex phenomenon. It includes abusive acts towards children, intimate partners regardless of gender, and the elderly. For police departments, acknowledging that police officers can be abusers or can be abused by another family member, regardless of age or gender, may be the first positive step in resolving this problematic issue.

Domestic violence inflicts suffering and deaths in too many family's police officers visit and officers know only too well that they don't have to leave home to encounter it.

To get respect you must give respect, not demand it. Perhaps to receive empathy it might be wise to offer some empathy towards the officers. There are few agencies in this country that have made more progress placing domestic violence programs, policies, and procedures in place than police departments.

There are three prominent contemporary theories that attempt to explain the cause of domestic violence.

Central to the feminist or cognitive behavioral model is that domestic violence mirrors the patriarchal organization of society and it is men alone who use violence to maintain their dominate role in the family.

Norms and mores in society allow this form of abuse to continue. The behavior of abusers is a result of these learned mores and norms. However, the norms and mores most of us grow up with teach males that only cowards hit women. In fact it is cowards who hit anyone who is smaller and weaker than they are regardless of age or gender.

There are reams of data that document that when one person is bigger, stronger, or has more resources than another person they will use whatever power, control, and resources they have to retain their position, regardless of gender.

In the family conflict model violence is the result of the stresses created in dysfunctional families. In this model, any family member may intentionally or unintentionally contribute to the escalation of violence. Lower levels of family conflict are often warning signs for families that they are at risk of much greater abuse. Any lower level forms of family conflict are serious as they can quickly escalate into much more violent forms of behavior for all members of the family.

This particular model may be most relevant to police officers and their families. Officers often live in a functional world of family and friends; however, in the officer's work they constantly encounter dysfunctional families, a subculture of violent behavior, odd work habits and constantly changing work hours. These are examples of stresses that exasperate the "families in conflict" model of violence.

The number of police officers who divorce and the number of times they divorce is extremely high. All studies document that divorce or the termination of any intimate relationship increases the risk of domestic violence.

There are a number of people who are attracted to police officers or perhaps, to their uniform, weapon, and badge and it seems that many police officers offer little resistance to this type of attraction. There should be little doubt that often marital problems lead to financial strain as well as continued family conflict.

The psychotherapeutic model proffers that personality disorders and/or early traumatic life experiences predispose some people to use violence in family relationships. This model allows for individual or group therapy.

Police officers are not immune from low level forms of family conflict nor are they impervious to more serious forms of domestic violence. However, police officers as either abusers or victims of family conflict has been ignored, misrepresented, and inadequately studied.

Few to no studies to date give any credence to the serious psychological effects police officers face due to their attempt to live in one (functional) world and while working in another (dysfunctional) world of crime, criminals and an underfunded, understaffed, and imperfect court system.

When we think of domestic violence we think of "battered women" who suffer from what is often labeled "patriarchal terrorism."

Most researchers and professionals agree that a "battered woman" is a woman whose life is thoroughly, extensively, and completely controlled by a man and her behavior purposely altered to suit a man's desires while they live in a familial styled relationship.

The batterer systematically uses physical violence, economic subordination, threats, isolation, and a variety of other behavioral controlling tactics to ensure she does what he wants her to do.

Studies document there is another and more common type of family violence or conflict that occurs quite often within families. This type of family conflict does not involve a specific long-term pattern of power and controlling behavior. This family conflict is exhibited because of general or specific arguments, often created by stress, and can escalate into violence or physical assault.

These spontaneous arguments that lead to threats or actual physical assaults have no specific patterns, are not frequent, and do not specifically and always escalate to more serious and injurious physical assaults. This type of family conflict does not involve a general motivation by one person to control or alter the behavior of another, they are not frequent, and have no specific pattern.

One of the most comprehensive studies concerns domestic violence to date, Extent, Nature, and Consequences of Intimate Partner Violence, documents that most physical assaults are relatively minor and consist of pushing, shoving, slapping.

There are many types of tactics employed by family members who attempt to "get their way" in a specific or general disagreement. Civilians and police officers most often think of these feelings of hopelessness and/or helplessness, as being created by the stress of the "street job." This is not always the case.

Often times this stress is caused by the officer's supervisors or in the case of supervisors, those they supervise. There are of course many other problems, including financial problems, drug and/or alcohol abuse, excessive work hours, problems with gambling, etc.

All employees of police department should have copies of the department's policies and procedures concerning domestic violence and all employees should be expected to comply with them. Departments need written pages to keep everyone on the same page.

The Chicago Police Department has for many years now intervened concerning family conflict or domestic violence incidents involving its police officers in a progressive and proactive manner.

Perhaps if police departments would demonstrate more compassion and empathy towards the plight of police families in particular, officers in turn would become more understanding of domestic violence victims in general.

All police department should have a Stress Unit independent but connected with the departments domestic violence interventions. Through the Stress Unit police officers should be offered free, private, professional counseling that includes issues of family conflict.

This counseling should be available at the request of any employee or employee family members who think that they may be victims of family violence, regardless of how minor. It is vital to the well being of the officers and their families that they are offered this type of intervention.

The counseling program and intervention should not in any way alter the fact that the department will continue to thoroughly investigate all allegations of domestic violence and refer incidents, where appropriate, to the District Attorney's office.

HERE ARE SOME FACTS ON COPS AS BATTERERS

- Domestic violence is 2 to 4 times more common in police families than in the general population. In two separate studies, 40% of police officers self-report that they have used violence against their domestic partners within the last year. In the general population, it's estimated that domestic violence occurs in about 10% of families.
- In a nationwide survey of 123 police departments, 45% had no specific policy for dealing with officer-involved domestic violence.
- In that same survey, the most common discipline imposed for a sustained allegation of domestic violence was counseling. Only 19% of departments indicated that officers would be terminated after a second sustained allegation of domestic violence.
- In San Diego, a national model in domestic violence prosecution, the City Attorney typically prosecutes 92% of referred domestic violence cases, but only 42% of cases where the batterer is a cop.

SPECIAL PROBLEMS FOR VICTIMS

- Her batterer always has a gun (often many guns and other weapons) and is trained to use it.
- He knows how to inflict pain and leave no marks or bruises.
- He's trained to intimidate by his presence alone, and to use his body as a weapon.
- He lets her know he has the power to harm or kill her and get away with it, or have others do it for him.
- How can she call the police? He is the police!
- He tells her that if she does call police, the officers (his colleagues and friends) will believe him and not her ... and he's right.
- He often threatens that if she reports to police he'll lose his job, and if that happens, she's dead.
- He has access to surveillance tools like phone taps, police scanners, vehicle tracking devices, and audio and video recording equipment to stalk or monitor the victim's activities.
- The batterer or his fellow officers will often "patrol" the victim's house, work place, children's school or daycare center.
- Friends, family and service providers are afraid of the batterer and thus afraid to get involved.
- Domestic violence advocates may share her information with the police. (Other than Purple Berets and Women's Justice Center, all domestic violence advocates in Sonoma County work for either the police or district attorney's office.)
- He knows the location of battered women's shelters.
- He knows the court system, often testifies in court, and knows district attorneys, judges and bailiffs personally.
- Jurors assume police officers would not lie in court

Dr. Gary Lee, a clinical psychologist who counsels police officers affected by traumatic on-the-job experiences, described law enforcement as "a way of life."

Police officers routinely must shelve any emotions they may feel, especially when faced with particularly harrowing or dangerous situations, Dr. Lee, of Hendersonville, Tenn., said.

"In order to do what they do on a daily basis, they have to put aside, contain and hold natural human emotional reactions," he said. "They are taught that when they respond they have to keep control of the situation."

Over time, such suppression often makes it difficult for officers to communicate with those closest to them, Dr. Lee said.

"They're not able to talk about their jobs like most people do, so over time the stress builds and becomes cumulative," he said. "They basically shut down and there's not a lot of communication, which causes conflict."

Lt. Dunn, who serves as the Southeast Tennessee coordinator for the state's Critical Incident Debriefing Team, said he believes that extremely traumatic situations can trigger such behavior in almost anyone. However, he said, even the day-to-day stresses of an officer's job can add up.

"You go home and all you want to do is relax and recharge your batteries," Lt. Dunn said. "So when something happens at home, and you've got to get back in control mode ... you get a little irritated and upset. That's how things like that can happen."

Dr. Lee said that, though the nature of law enforcement work always will create some level of stress, he tells officers that learning to communicate with their families in an appropriate manner can alleviate some tension.

POLICE OFFICER DOMESTIC VIOLENCE: FACTS AND STATS

It is not known whether police officers have a higher or lower rate of domestic violence than the general public, primarily because potentially higher rates of abuse might be offset by lower levels of reporting by fellow officers.

The repercussions of an arrest and conviction on a domestic battery charge are far greater for a police officer than for the average citizen, because it can mean surrender of his weapon and loss of his law enforcement career.

Thus, until recently, many departments have maintained a conspiracy of silence around such occurrences, often persuading the complaining spouse that loss of her husband's job would be potentially devastating to the family, and urging the couple to settle things "off the record."

In other cases, especially where the call is to the home of a senior officer, patrol partner, or member of an elite unit, there may be the palpable, if unstated, threat of ostracism, lack of backup, or general opprobrium for cops who rat out other cops, similar to what occurs with other abuse-of-authority cases.

However, like other unlawful behavior on the part of officers that is actively or passively overlooked or abetted, undeterred domestic violence undermines the credibility and effectiveness of the department with both its own personnel and the general public, and sets the agency up for civil and criminal actions relating to negligence and malfeasance.

And again, like other disciplinary protocols, a program of domestic violence response within police agencies need not be brutal or unfair; indeed, the more equitable and just it is perceived to be, the greater the likelihood it will be implemented and used as needed. Accordingly, the following is an outline of a protocol that addresses the key elements in police officer domestic violence intervention.

POLICIES AND PROCEDURES

As with all law enforcement departmental programs, success stands or falls with the level of commitment and buy-in by the upper administration.

Police leaders need to demonstrate by both their words and deeds that unwarranted violence by police officers will not be tolerated in any venue, on the street or in the home. Many agencies endorse a zero-tolerance policy with regard to violent behavior, but as with most such behavioral concepts, “zero” is not necessarily always an absolute quantity.

Accordingly, departmental policy should spell out as clearly as possible what specific types of behaviors will not be tolerated. Two standards that most departments adhere to are “conduct unbecoming” and “failure to conform to law.” Most departments also require officers to make a report of any kind of police call to their own residence, whether or not arrests were made.

As with most departmental policies and procedures, domestic violence protocols will have little real bite if they are not enthusiastically endorsed by the agency’s leadership. Police leaders should have a good understanding of the dynamics of domestic violence and the magnitude of the problem, both within their own department and in their communities.

A commitment to addressing the problem forthrightly includes the creation of a culture of disapproval among department leaders and the allocation of time and resources for adequate training and dealing with incidents.

TRAINING

The key to any credible and permanent strategy for preventing domestic violence is adequate and appropriate training.

Training for police officers should cover a comprehensive range of topics, including response, tactics, officer safety, and verbal crisis intervention and conflict resolution skills. In particular, special training must be provided for officers on how to handle domestic violence calls involving other officers.

PROBLEM RECOGNITION

Astute police supervisors may be able to detect signs of impending or ongoing domestic violence in officers within their own department. The legitimate response to “What happens at home is my business” is, “No, it’s not, because

- If it escalates to an arrest- able offense, we lose a good officer;
- There are liability issues for the department of letting a potentially violent situation go unaddressed; and
- Any kind of family stress that affects our personnel concerns us.”

Many of the signals that a domestic violence problem may be brewing or ongoing in a officer’s family are generic stress-related symptoms, while others are more specific and may include increased isolation of the officer; signs of sleeplessness or alcohol abuse; erratic mood swings or Jekyll & Hyde personality changes; increased incidences of excessive force on the job; talking about the spouse in a particularly derogatory way; blaming the spouse for all the officer’s problems; or signs of physical injury that are attributed to “accidents,” but may represent wounds received in physical altercations with the spouse.

The key is to identify and correct the problem before it escalates to the point of an officer losing his career and facing criminal charges. Departments have to take an assertive and forthright approach to officers at risk if they are serious about salvaging those officers’ careers. Officers themselves, too, have the responsibility of getting some kind of help for their problem, lest they risk losing everything they’ve worked for.

INVESTIGATION AND RESPONSE TO INCIDENTS

A comprehensive approach to responding to domestic violence incidents is the key to an effective law enforcement program. Some authorities recommend that the Internal Affairs department immediately conduct an initial preliminary inquiry to determine the need for a formal internal investigation.

The latter would follow the agency’s established protocol for criminal misconduct cases, including suspension of the officer’s police powers and reclamation of their weapon and police vehicle. Officers should be placed on off-duty status, pending administrative investigation and referral for a psychological fitness-for-duty evaluation.

If the officer is found psychologically fit for duty, administrators might transfer the officer from off-duty to modified-duty status, such as noncontact status assignments (the dreaded “desk job”), until the investigation is complete.

If the officer has sustained a criminal conviction related to the domestic battery charge, he will usually be terminated from the department. If lesser or suspended charges ensue, the department retains the right to keep the officer or let him go; if he stays, the officer will be expected to comply with any departmental follow-up measures, as well as with any court orders, that arise from the case.

MENTAL HEALTH INTERVENTION

If an arrest-able offense has not yet been made or sometimes as a condition of suspended sentence, the officer and his spouse may be referred for some type of counseling or family therapy. This may include anger management training. This option should be an option not a requirement or punishment or a way of deflecting legitimate legal consequences for the officer's actions.

For the most part, when people are “forced” to go to any kind of psychological treatment, true progress is rarely made. Nevertheless, I have seen many cases where a skilled individual or family therapist can stem the tide of deterioration in a police officer's family and also be instrumental in salvaging a career. If this option is available, officers should take advantage of it.

GENERAL SUPPORTIVE ACTION FOR CHAPLAINS

- Take the information seriously
- Ask direct question regarding physical violence (hitting, slapping, etc)
- Inquire if weapons are used or accessible and where they are (gun, knife, etc)
- Provide victim with safety plan, (phone number, transportation etc)
- Monitor victim for suicidal or homicidal feelings.
- Do not talk to victim and offender together, ever!
- Suggest reporting it to police
- Suggest counseling
- Suggest anger management
- Suggest no contact order
- Provide resources (shelters, family, or friends)
- Direct victim to seek medical attention for self and children
- Inquire if presently in danger and then assist accordingly
- Inquire about available support systems
- Provide counseling for one or both
- Participate in safety planning to include co-workers, walking person to car, accompany victim to places they may go.
- Be prepared to report offense to police and advise victim of domestic violence laws.

CHAPTER 14: LINE OF DUTY DEATHS, NATURAL DEATHS

PURPOSE

The purpose of this material is to offer impartial assistance to all members of the Department's Police Family. It must be understood that services provided to the Chaplain depends on a number of factors.

Factors include such things as the availability of resources and the Department's primary role of providing public safety to the community. The Chief of Police may approve deviations from this material depending upon those factors.

This material recognizes that the spirit of the chaplain is one of helping people and providing assistance at every opportunity. This includes our assistance to the Department's Police Family, especially during the time when an active or retired member of the Department suffers a serious injury/illness or death.

POLICE CASUALTY STATS

March 13, 2008

Lately, it seems news reports today have been top-heavy with bad news about police tragedies. Last week, alone, there were three tragic police line-of-duty deaths. Each is a tragic loss—impacting families, friends, colleagues, agencies, and communities—reaching far beyond to the entire law enforcement profession throughout the United States and Canada.

However, it's not all “doom and gloom” in the police profession. Far from it, as evidenced by recent statistics from the National Law Enforcement Officer Memorial Fund (NLEOMF), the odds are against you being killed or seriously injured in the line of duty. However, before I cite any statistics, I first want to point out that even a single law enforcement death is one death too many.

According to the NLEOMF, there are currently 870,000 local, state, and federal law enforcement officers in the United States. In 2005 (most recent figures available), 59,432 law enforcement officers were assaulted in the line of duty, resulting in 16,072 injuries. In 2007, there were 186 law enforcement officers killed in the line of duty in the United States. As of March 10, 2008, 31 officers have died, a 15 percent increase over 2007.

In 2007, four Canadian police officers died in the line of duty, six in 2006. Eleven Canadian officers were killed in 2005, including four RCMP officers in a single, deadly shooting in rural Alberta. The last time four American law enforcement officers were

killed in a single incident was February 1993, when four ATF agents were killed in a shootout in Waco, Texas.

If there is any “good” news it is that the overwhelming majority of U.S. and Canadian police do not become “statistics” (fatal or otherwise).

According to the NLEOMF, 186 officer deaths out of 870,000 officer’s means 869,814 officers did not die in the line of duty last year. Similarly, with 59,432 officers assaulted in 2005, that means 810,568 officers were not assaulted. And 16,072 officers injured in 2005 assaults means 853,928 officers were not injured.

POLICY

It shall be the responsibility of the Department chaplain to provide liaison assistance to the immediate family of an officer or employee who dies in the line- of- duty or who is hospitalized for an indefinite period of time or requires repeated, intermittent hospitalization because of a line-of-duty injury or systemic illness. This assistance shall include, but not be limited to, the clarification and comprehensive study of survivor benefits and emotional support during this traumatic period for the surviving family.

DEFINITIONS

ACTIVE AND NON-SWORN POLICE OFFICER INJURY, ILLNESS, OR DEATH IN THE LINE-OF-DUTY:

A departmental peace officer who is actively employed or in an authorized volunteer service who suffers a serious or fatal injury or illness which is the direct and proximate result of taking any lawful and reasonable enforcement action or emergency response that the officer is authorized or obligated to perform by law, rule, regulation or condition of employment, appointment or service, whether on or off duty.

It also includes indirect results which are attributed to line-of-duty incidents and direct results of felonious assaults perpetrated against the officer because of his or her status as a South Carolina peace officer.

ACCIDENTAL INJURY, ILLNESS, OR DEATH IN THE LINE-OF-DUTY:

A member of the Department who is actively employed or in an authorized volunteer service who, while on-duty, suffers a serious or fatal injury or illness which is the direct and proximate result of an accident or criminal act committed against the employee.

ACTIVE MEMBER INJURY, ILLNESS, OR DEATH NOT IN THE LINE-OF-DUTY:

A member of the Department who is actively employed or is in an authorized volunteer service who:

1. Suffers a serious or fatal injury, illness or accidental or natural death while off-duty and which is non-police related; or
2. Suffers a serious or fatal illness or natural death while on duty .This is intended to include those whose illnesses and deaths that were not the direct and proximate result of an accident or criminal act committed against the employee such as deaths caused by chronic, progressive, or congenital disease (e.g... heart or pulmonary disease).

RETIRED MEMBER DEATH:

1. The death of a retired member who is in good standing and fully separated through retirement from the Department.
2. A retiree is defined as:
 - Any sworn or non-sworn member who resigns, having completed at least 20 years of service, regardless of age; or
 - Any sworn or non-sworn member who resigns and who is eligible to begin receiving pension benefits; or
 - Any former sworn or non-sworn member who is receiving a State disability pension.

DEATH OF ANOTHER LAW ENFORCEMENT AGENCY MEMBER:

A member of an agency which is involved in crime and juvenile delinquency control or reduction or enforcement of criminal laws who dies while taking any action that the member is authorized or obligated to perform by law, rule, regulation, or condition of employment or service whether on or off duty.

THE POLICE FAMILY MEMBERS WILL BE CONSIDERED TO BE:

1. Spouse
2. Sons and daughters and guardian if the child is under 18 years of age
3. Spouses of the sons and daughters
4. Father, mother stepfather, and stepmother
5. Brothers and sisters, if under 18 years of age

PREPARING FOR TRAGEDY

No one wants to contemplate their own death. But, because law enforcement is a high-risk occupation and the very real possibility of death from accidents and felonious assaults exists, agencies have an obligation to their officers-and officers owe it to their families-to prepare for such tragedies.

Preparation should include educating officers about emergency notification of family members, funeral arrangements, survivor benefits, counseling options, and departmental support to survivors. Officers should take considerable comfort from knowing what benefits and support their families will receive in the event they are killed.

Although the tragedy of losing a loved one will not be lessened, with preparation and forethought, the grieving process will not be aggravated by uncertainties and a lack of information.

NOTES

CHAPTER 15: OFFICER RELATED SHOOTINGS

AFTER THE GUN GOES OFF

BY KEITH BETTINGER

Have you ever jumped up in bed in the middle of the night in a cold sweat? I have. Have you ever sat alone in a room and begun to cry over something insignificant? I have.

Have you ever found yourself becoming cold and withdrawn, and failing to participate in social or family activities? I have.

Have you ever had nightmares so terrible you woke up seeing yourself or loved ones on the brink of death? I have.

Why have I had these problems? Because I am a police officer, and on June 9, 1975, another officer and I were forced to shoot and kill an armed felon who was trying to kill the other officer and me. At that point I became not a hero as the department proclaimed, but a victim; a victim of Post Shooting Trauma.

Many people think there is nothing wrong with killing someone who is trying to kill you. In fact, some are even envious. They desire the hero status that is heaped upon you, while they go about performing their mundane everyday tasks.

Legally they are correct. There is nothing wrong with killing someone who is attempting to murder you. That is why, when the facts are investigated and presented to the Grand Jury, you are not indicted for homicide. The Grand Jury, a body of your supposed peers, listens and decides the taking of such a life was necessary and justified, and therefore everything is alright.

This type of mentality is very common on the part of the general public, as well as the police hierarchy. Everything is black and white, right and wrong. If the shooting is justified, there are no problems.

However, this is not where the problems end but where they begin. Killing someone preys on your subconscious. Killing someone conflicts with every moral belief you have been indoctrinated with by significant others. "Thou shalt not kill". All civilized societies consider life as being sacred and precious.

If life is so precious, how do we justify to ourselves morally in taking of a life? This is the moral conflict that must be resolved, or Post Shooting Trauma will remain a never ending problem.

Social Psychology is the study of the individual in the group. Let's explore Post Shooting Trauma and its victims using the same methodology.

Consider a Police Department as the group, the society, and the officer involved in a shooting, suffering from Post Shooting Trauma, as the individual within the group.

Police Officers abide by not only the rules of the society they are sworn to protect, but, also have their own written and unwritten rules and codes. These are similar to folkways and mores.

When an officer, a member of this large group is involved in a shooting, he will probably suffer symptoms of Post Shooting Trauma, and become a special individual in this group. This individual, his special problems, and the methods that can be used to assist him recover from his traumatic experience are what I'm going to discuss in this article.

Police combat is a unique experience. It is totally different than military combat. It is a close personal encounter. In most instances, a shooting involving a police officer takes place within seven yards. Think of it, a mere twenty one feet separating you and your opponent in a struggle for survival that can have only one winner. What could possibly be more stressful than this winner takes all confrontation?

Post Shooting Trauma is the internalization of stress following a shooting. It is a combination of stress, fear, confusion and anxiety. It usually sets in after your moral beliefs and reality come in conflict.

There are many symptoms of Post Shooting Trauma, and a person suffering from it can suffer any one, any combination, or all of the following symptoms.

The first is sleep pattern disturbances. Either insomnia or nightmares: Insomnia is simply the inability to relax and sleep following the shooting.

The nightmares are another story. They are very frightening, mostly because the officer doesn't understand why he is having such terrifying visions.

The dreams can be a reliving of the incident, night after night. Or, it can be a dream of being involved in another shooting, and being either wounded or killed. Some officers have dreamed that the person they killed was standing at the foot of their bed. Some admit to being so frightened by this experience they have jumped up in a sweat, screaming in fear.

I have experienced nightmares following my incident. The night after my shooting, I dreamed many of my friends were dying around me. After that, I started to dream of being involved in other gun battles, all with the same results. In the imagined gun battle, I am forced to shoot someone again.

Each time, the bullets either come out the barrel of the gun or fall on the ground, or if they strike their intended target, they have no impact and the criminal just stands there looking at me.

80% of officers involved in shootings have nightmares related to their incident. 10% have a variation dream in which they dream of being in different shooting incidents.

Those that dream of being killed are probably experiencing some form of guilt, whether imagined or real.

However, there is a benefit to having these nightmares. According to Dr. Pasquale Carone of South Oaks Hospital in Amityville, New York, dreams are a way of working out a solution to a problem. Once the solution is reached, the nightmares will usually stop.

A rape victim is also prone to nightmares. She is also a victim of an extremely traumatic experience. She dreams continuously, and as the dreams continue night after night, they usually start to change. The dreams start to go from being a helpless victim to where she is in control of the situation. The nightmares usually end when in her dreams she has overpowered her assailant, and in some instances, killed him.

Another form of a nightmare is a hallucination. It is experienced while the officer is conscious. He sees something while he is awake that cannot possibly be. An example of this is an officer who works steady midnights, sees the person he shot and killed sitting next to him in the patrol car, while he is patrolling his area.

There is no way to tell when the dreams will end. Some officers are very fortunate, they don't have any. Others have a few in a relatively short time, make an adjustment and no longer experience them. For others, it seems they never stop.

It took about eight years after my shooting for the nightmares to stop. Although they came less frequently, it still took that long for them to stop. Occasionally when under a lot of stress I may have a nightmare related to shootings, but happily I can't remember when the last one was. If I do have one, at least I understand why and can deal with it.

SIMILAR SYMPTOMS

A flashback is like an instant replay of the incident in your mind. As the officer replays this incident over and over in his mind, he starts to add distortions which confuse his concept of reality. In most instances, as he is having a flashback he usually sees it taking place in slow motion. This is a time distortion, and is very common. However, this leads to more confusion and anxiety, because the officer starts to believe he had more time to do things differently.

He starts to think he should have taken the time to come up with an alternative to killing. He should have waited for help; he should have taken the time to ask him to surrender. The truth is he never had time to do anything but think of his own survival. The incident was over almost as soon as it began.

Another distortion some officers experience is that of sound. Though it is not seem as serious as time distortion, it is real and confusing, and only adds to the officer's trauma.

Sound distortions can be caused by both the stress and surrounding noise. The heart pumping, the adrenaline flowing, the sirens wailing, people screaming. The sheer terror of what is before the officer. Some officers say they never heard the shots they fired.

Another distortion is that of sight. Some officer's report seeing the bullets in the cylinder of the gun the criminal was pointing at them. Others say they could see the bullet going toward it's intended target. That is inconceivable, considering a bullet travels at over one thousand feet per second.

One officer spoke of seeing an imaginary line. If the armed man turned past that point, he had decided he would shoot. The man did turn past that point and the officer did shoot. After he fired the shot, he no longer could see the man. He started to worry. Where had he gone? Was he going to be shot by this now unseen assailant? He couldn't see the man who was laying dead on the ground right where he shot him.

He had put so much attention into his focal point that he developed a form of tunnel vision, and could not see beyond it. The autopsy and the statement he gave showed that the one shot he fired went directly along that imaginary line he saw in his subconscious that he used as a point of commitment.

An officer was working late one night and checking the rear of a store. He surprised a burglar who fired shots at him. He immediately sought cover and took a position behind a large oak tree. The next day, he went back to the area to see things in the daylight. He found the large oak tree to be nothing more than a sapling.

I can recall many of the distortions I encountered. I had a flashback on my way home from work the day of the shooting. I recall seeing the man sitting in an upright position, alive and being instantly transformed into a lifeless human form. I saw this while I was sitting in my car at a traffic light. When I think of it, it's almost as though I can still feel the cold shill that passed through me that day.

I also remember everything taking place in slow motion. I thought I saw the bullet come out the end of the gun barrel and watched it travel until it hit him. I thought I looked at my gun in amazement and dwelled on the thought of how accurate it was. I remember running about thirty feet to the side of the vehicle he was in.

I thought it was taking an eternity, I thought I would never get to the side of the truck. When I did, I still can't believe how terrifying a sight it was watching him come across the seat of the truck as if he was going to overrun me. I fired three more shots. The first hit him, the second missed. How do you miss from two or three feet away? The final shot struck him. I kept firing. I was unable to count to six, the number of bullets in the gun. I never heard the six shots going off. What I did hear was the sound of the empty gun going click! click! click!

Those empty clicks were the loudest sounds I have ever heard in my life and that sound will be with me forever.

After a shooting, some officers retreat into a period of isolation. This can affect their job performance and family relationships. Some no longer participate in family functions. Others no longer have any interest in their usual outside activities such as hunting. A lack of communication between the officer and his family members is very common.

This withdrawal can also affect the officer's sex life. A percentage of officers involved in shootings suffer from some form of sexual dysfunction or impotence. This is especially true if they were wounded and lost the gun battle.

Sometimes there are periods of depression and helplessness. Some officers will sit and cry over insignificant things. Others are moved to tears by the sound of patriotic music. The officer cannot explain why this happens to him, but he knows it does.

Some begin to engage in self destructive behavior. Some take on a "John Wayne Syndrome", taking unnecessary chances. They don't wait for assistance on dangerous calls. They start to feel indestructible. If they survived the first time, what can happen the next time?

For others the realization can become unbearable. Thoughts of suicide are common among officers who have killed. In fact, police officers have a very high suicide rate under normal conditions. Compound it with Post Shooting Trauma and the results can be phenomenal. This depression can become worse during holiday seasons.

An officer who has killed sometimes starts to feel sorry for the family of the person he killed. He starts to dwell on the fact that there is someone missing. Someone's son, someone's father, or someone's husband.

Though he is happy to be able to spend the holiday with his family, someone's family is feeling the loss he believes he caused. I know. I was depressed the first Thanksgiving and Christmas following my incident. The man I killed would have killed me if he could have, but his family never did a thing to me. I grieved for them.

Other officers become confused by a reverse feeling, a feeling of euphoria. They start to notice little things. They notice the sweet smell of spring flowers, birds singing, children laughing, the nice warm feeling of the sun on a spring day. They feel as though they are happy they killed someone. This adds to their trauma and confusion. They're not happy they killed, but just happy they survived, and are able to enjoy these little pleasures.

Self doubt is another problem when an officer returns to work following a shooting. He begins to second guess himself. He wonders if a similar situation arose again would he be able to do it again.

Another common fear is "What happens if I act too quickly? Will I take a life needlessly?" Or the reverse, "What if I hesitate and don't act quick enough, will I be killed?" These are real fears and the officer must come to grips with them if he is ever to be an effective officer again.

I remember one night shortly after my shooting. My wife and I were driving home when suddenly we were being chased by another vehicle. We had no idea what was going on but we were both afraid. I remember taking out my off duty gun and placing it under my leg. When I was finally able to stop and confront the other driver, I stood behind my car door with my gun in my hand out of sight. He jumped out of his car and stood with something in his hand, accusing me of cutting him off in a hamlet I had not been in. It was a case of mistaken identity.

It also was an incident that could have had a tragic ending, had he advanced towards me with whatever was in his hand. I was afraid he might be an associate of the man I killed.

As the situation stood, there was not sufficient reason to shoot him, but certainly enough grounds to arrest him for harassment. But, the fear of my shooting stuck in my mind. I really didn't want to be deeply involved in a traffic dispute, and if the situation had gotten to the point where I was in fear for my life and had the grounds to shoot, I don't know if I would have been able to at the time. At that point, I was more afraid of what would be said about me being involved in two shootings in such a short period of time. Self doubt and public opinion were more important at that time than my own safety.

Following a shooting some officers become cynical. They no longer trust the department. They have problems with their supervisors. They no longer respond to either requests or direct orders. Others totally disregard departmental rules and policies. Along with this distrust, they no longer wish to become involved in any police action. They become unproductive members of the department that can no longer be trusted or counted on.

Part of this problem though is brought on by the department. Some departments expect you to be back to work the next day as if nothing ever happened. Others suspend you until the investigation is completed.

They make you feel as though you did something wrong. Awards are given out for heroics, but the degree of the award might not meet with the officer's expectations, and again he feels as though he is being cheated. As these feelings increase, the mistrust and cynicism starts to mount.

COMPULSIONS OR EXTREMES IS COMMON

Alcoholism is rampant in police departments. Alcohol abuse rates of 20-40% in a department are not uncommon. When you compound the ordinary stress of the job with Post Shooting Trauma, the officer can begin to medicate his stress with alcohol. Drinking in this way is not a social experience, and if it continues the officer can easily cross the line into alcoholism.

Overeating is another compulsion a Post Shooting Trauma victim might go to. I know I am a compulsive overeater. Although I have always tended to eat too much, I truly believe Post Shooting Trauma pushed me beyond the levels I would normally consume.

By combining food and alcohol to relieve stress, soothe nerves, celebrate life, honor heroism, or toast another excuse for overindulging, I was able to bring my weight up beyond a respectable level in less than a year's time. I was totally out of control of my food consumption. I have no doubts that if I had turned to alcohol as opposed to food, I would have become an alcoholic due to my stress.

Other officers become compulsive gamblers or spenders. They start to fear their mortality, and live life to the fullest without any thought as to how they are going to meet tomorrow's bills.

Promiscuity can also be a problem of Post Shooting Trauma. After killing someone, the officer starts to feel unclean. He feels as though he has lowered himself into life's gutter. He feels as though he is so dirty and unchaste he can no longer have a healthy relationship with his wife, who he holds in high esteem. He then strays from his main support during such stress, his wife, and seeks the company of a partner who occupies a station in life as low as what he perceives himself to be.

There are also abuses of sick time. Simply put, the officer finds it easier to stay home than to go back to work. If he sits home and watches television, the officer can't get involved and be placed in a situation that threatens him.

As this abuse of sick time goes on, the officer makes more problems for himself than he could have ever anticipated. One problem is his bosses start to look at him as a malingerer. He is undependable and cannot be trusted. Hero worship soon wears off once the officer starts to be a problem.

As this continues, he might have been in line for a transfer to a desired position. If he cannot be trusted, he can forget about the opportunity ever presenting itself. Or, he might suffer the reverse. If the bosses think he is a problem and wish to create a remedy for themselves, they will transfer him to an unwanted job as punishment.

Why does an officer suffer like this from Post Shooting Trauma? Because he is the victim of a violent crime. An officer involved in a shooting is no less a victim than the store owner that is robbed, the senior citizen who is mugged or the woman who is raped. Each and everyone is the victim of a violent and personal crime. Even though the officer is victorious in battle, he is no less a victim of a traumatic conflict. A conflict that is a close personal encounter.

How does an officer overcome Post Shooting Trauma? With the assistance of the special society of which he is a part. What makes up this society surrounding this individual officer? Basically this society consists of three special groups; his family, the other officers he works with, and the department that employs him.

The family has many responsibilities in the officer's recovery. First of all, a wife has to be very understanding. If the marriage is not solid prior to the shooting, it probably will not last. A wife has to know when to talk, when to listen, and especially when to touch. Sometimes that nonverbal communication means more than anything that could be said. Those unspoken feelings demonstrated by my wife have helped me through some difficult times.

The wife will also have to screen questions from outsiders. She will have to try and run interference and shield him from the neighborhood ghouls looking for excitement.

She will also have to spend more time with the children. She will have to explain to them why their father is not acting as he did before. She will also have to continually support the children, and maybe even have a conference with the children's teachers in order to protect them from the vicious schoolyard grapevine.

What could be more horrifying for a child than to be told by others that his father is a murderer? This is done not only by children, but by uninformed people in the community, or newspapers editorializing rather than reporting.

A wife must, under all circumstances, refrain from making stress contributing remarks. It was told at a seminar that one officer's wife said while they were in bed, "Wow, I'm sleeping with a killer." This only creates more stress for the husband.

Finally, a wife must be able to recognize the symptoms of Post Shooting Trauma. When she sees her husband suffering these symptoms, they must sit down and discuss what taking place is and together they should seek a remedy to the problems of Post Shooting Trauma.

The police officers who the shooter works with also bear a responsibility in his recovery. First of all, they should remember what he is going through. They have to be kind and understanding. They shouldn't go up and pound him on the back and call him killer and tell him how great it is that he killed someone. They also should not go up and tell him they wish they had been the one that killed the criminal; he probably wishes they had too. The pain of surviving is a lot heavier to bear than the feelings of heroism.

What one of these officers should do is go and ask him how he is doing. Ask him how his family is and if there is anything he can do for them. The officer's family is very important to him at this point.

Don't ask him for all the gory details, he has been through it enough with the investigators. However, if he does decide to talk about the incident, or some aspect of it, do him a favor, be a good listener. At this point, more than anything he needs a sympathetic ear. He might have things to share with another officer he cannot or will not discuss at home.

The department or agency that employs the officer also is responsible for his recovery. First of all, it must understand what Post Shooting Trauma is and that it is a real problem.

It also must provide him with the services necessary for his recovery. At present, only one out of five major police departments have any type of stress reduction program. Very few have any type of program dealing with Post Shooting Trauma.

Finally the officer himself must admit he has a problem and seek the services that are available to him. Others cannot force someone to be helped; the individual must want to be helped if recovery is going to be possible.

There are many forms of stress reduction that can be used to reduce Post Shooting Trauma. One is behavior modification; the use of deep relaxation is effective. Hypnosis is a very valuable tool also. I found it to be very helpful in reducing my stress during the year following my shooting.

I have done some research on Albert Ellis' Rational Emotive Therapy and how it can be applied to alleviate Post Shooting Trauma.

I think it too is a very effective method, especially since it can be done in either a group setting or with an individual, and the severity of its application can be geared to each person as needed.

However, my personal choice for dealing with Post Shooting Trauma is the use of peer counseling. I developed such a program for the Suffolk County Police Department. It is based on the working principles of Alcoholics Anonymous.

The SOLVE Team, as it is called, meets once a month and is comprised of people with a common bond; Post Shooting Trauma. What is said stays within the group. Officers are free to openly discuss whatever is bothering them, and other group members explain how they handled similar problems.

Members can tell a new member what to expect during the course of the investigation, at court proceedings, and at home. They can also tell the recent shooter what not to be alarmed by, such as questions by Grand Jury members, or that waiving your right to immunity when testifying before the Grand Jury is standard procedure. They can tell him why the department took his gun for tests, and when can expect it back.

The group can also teach the department how to handle an officer involved in a shooting. It can recommend changes that can be implemented to assist the officer through this most stressful time. We try to help the officer understand that he did the best job possible with the information that was available to him at the time.

NOTES

CHAPTER 16: POLICE SUICIDE

EVERY DEPARTMENT'S WORST NIGHTMARE

There's nothing more surreal or frightening than the coldness and lack of emotion and at a police officer's funeral. These emotions are normally only present for a police officer that has lost his or her life in the line of duty and one question: what happens to the family and the police department of an officer who commits suicide?

As police officer suicides rise in this country, departments continue to experience the silence, shock and lack of emotion that it leaves behind for every person within the department. Perhaps the lack of emotion is part of the taboo associated with a person taking his or her own life, or perhaps it is the shame bestowed upon the department.

There were more than twice as many police officers committing suicide than were killed in the line of duty in 1999. It's a mystery to every police officer in this country why so many departments deny there is a problem with officer suicide. This is hard to understand since the experts believe officers are more prone to suicide because of their stressful occupations and the availability of firearms.

However, police suicides are not just a growing problem in the United States. France experienced fifty (50) percent more than the average rate of suicide for the last decade. Paris had a rate in 1995 of almost twice the rate for the New York City Police Department.

In the United States there is a popular slogan saying, "Guns don't kill people, people kill people", but according to Sheik Mustafa of Singapore, Singapore's slogan should read, "Guns don't kill people, policemen kill themselves" as he relates the high number of police suicides in that country.

The Occupational Safety and Health Administration (OSHA) states, "there are no nationwide epidemiological studies on police suicide. Such research is needed, along with research in small or rural police departments.

Although the public as well as the media have many preconceived ideas of what goes on behind the badge, the pain and suffering police experience and witness as a direct result of their job cannot be portrayed in print or by pictures.

Police suicides, police corruption and misconduct, high rates of alcoholism, divorce and mental breakdowns among cops all offer a grim confirmation that police work is grueling and stressful.

How can an officer be happy when they must deal with emergencies, tragedies and criminals in a more violent society than ever before, while vowing to serve and protect?

The stress of daily life, coupled with stresses from tragic events, can push a police officer to end his life. Nothing can possibly prepare a police officer for what they might encounter on the job. An unnamed rookie police officer states, "A cop is tough and although allowed to be afraid, can never convey this fear."

A cop is unemotional and appropriately cynical; the horrors of the street don't affect him, he is not given to the emotion of the norm". Unfortunately in real life, police officers are affected by the horrors of the streets.

Why all the concern over the stress of police work and the affects of this stress on police officers? Robert Douglas, executive director of the National P.O.L.I.C.E. Suicide Foundation states, "We are losing about 300 officers a year to suicide" and "If a jumbo jet with 300 people went down every year, do you think the FAA would ground the jumbo jets and find out what was going on? You bet they would" (Fields and Jones, 1999).

Are the statistics correct? Can the suicide rates among police departments be higher than reported due to the departments classification of suicides as other incidents such as "accidental discharge of weapon" to protect the families of the officers as well as the departments?

Insurance companies normally do not pay claims to the survivors of suicides. It is best confirmed by Mort Feldman, vice-president of the National Association of Police Chiefs, when he stated that his organization did not keep statistics on police suicides by city "because I know we wouldn't be given the right numbers".

Forensic psychologists are now paying more attention to police suicides and to what they refer to as a hidden epidemic. One such forensic psychologist is Cindy Goss of New York. According to Ms. Goss the following is a profile typical of a police suicide:

"The cop who commits suicide is a male, white, 35, working patrol, abusing alcohol, separated or seeking a divorce, experiencing a recent loss or disappointment. Typically domestic abuse is involved.

Cops are controlling individuals. When a cop loses control in his own home, he can't handle it. For 24 to 36 hours he is acutely suicidal. He barricades himself in his house and makes all kinds of threats. If he can get beyond that point, he gets himself back together very quickly. You don't see that in the general population. Also, about 90 percent of the time the cop is drinking heavily when he shoots himself.

Others have different ideas such as W.C. Brown of the Jacksonville Police Department in Florida when he states, "I don't see any tie directly to the job" after his department suffered four suicides in two years. Further, New York City Police Commissioner Raymond Kelly states that all eight suicides on his force during 1992-93 "stemmed from domestic problems, not police work".

Although Commissioner Kelly denied police work entered into the police officer's suicides, the New York City Police Department has gravely seen the effects of stress and suicide. On October 20, 1998, yet another tragedy fell on the department.

The tragedy unfolded when Detective Fred Jesselli left his shift early, arrived at his home, used his service weapon, shot and killed his wife and then shot himself. Monica Jesselli, the victim, was also a police officer with NYPD.

Although drugs, alcohol, and relationships continue to surface when the subject of police suicide is mentioned, the officer who brings the stress of the job home and couples with any of the above, seems most at risk.

A suicidal police officer may fear suicide but they may fear life just as much. Especially as the rationalizations, denials, and excuses crumble, the officer is left with the spectacle of his or her wasted and broken life.

SUICIDES STATISTICS AMONG POLICE OFFICERS: (The Code of Silence)

(National Police Foundation Statistics) the Fraternal Order of Police suicide studies show among 38,000 of its 270,000 members in 1995 show records in 92 local chapters in 24 states. They found the suicide rate of 22 deaths per 100,000 officers. The National rate is 12 per 100,000 people according to the Centers for Disease Control and Prevention.)

- New York, 87 officers took their own lives, a suicide rate of 15.5 per 100,000.
- Los Angeles, 20 officers have killed themselves a rate of 20.7 per 100,000.
- Chicago, 22 officers killed themselves a rate of 18.1 per 100,000
- F.B.I., 22 officers killed themselves a rate of 26.1 per 100,000
- U.S. Customs, lost 7 agents in 1999 alone, a rate of 45.1 per 100,000
- Two female officers in San Diego killed themselves within a 48 hours period last year and not a single officer was killed in the line of duty.

More than 300 federal, state and local law enforcement officers were added to the National Law Enforcement Officers Memorial in Washington D.C., last month. USA TODAY and the findings of several studies show that most departments lose more officers to suicide than they do in the line of duty.

Police Departments nationwide have put chaplains in the departments due to the overwhelming demand need for critical incident stress management, crisis intervention and counseling.

A police chaplain's role differs from the role of a pastor, priest or rabbi. The differences lay more on purpose, presence and physical setting than a theological based setting. The police chaplain serves more as a resource and not a minister.

- Police chaplains serve in a pluralistic setting. Chaplains serve people who are not of their denomination or faith group.
- A police Chaplain's ministry is unique in that it takes place "on scene". Their goal is to nurture the community, the department and encourage moral responsibility and provide a climate for growth regardless of faith or background.
- Chaplains serve all groups as equal individuals in any situation and show concern for welfare for people in crisis.
- Chaplains operate in a mobile environment in unstable situations.
- Chaplains conduct programs that focus on character, growth and morale building to help prepare persons in law enforcement to lead a more ethical and moral life.
- Chaplains serve in a specialized profession. They serve the police department, victims or relative of victims of violent crimes, accidents, or other tragedies.

Whenever an officer commits suicide the questions far outreach the answers for family and co-workers. The answers to the "why" questions are not always important, but a chaplain is there by faith to help carry these people to some degree through the grief process.

For family and close friends, there is a tremendous sense of guilt regardless if anyone had any direct part in the psychological trauma that the officer was experiencing prior to the suicide.

FREQUENCY AND OFFICER PROFILES

(By Michael G. Aamodt & Nicole A. Stalnaker Radford University)

To get into a more in-depth discussion about officer suicide rate, this information was obtained from Data gathered from the Centers for Disease Control (CDC) indicate Americans commit suicide at a rate of about 12 per 100,000 residents (Fields & Jones, 1999). This rate makes suicide the 9th leading cause of death in the United States.

Recently, the law enforcement community has taken a close look at suicide following a rash of well-publicized suicides in the New York City Police Department in 1994 and heavy media coverage of police suicides.

HIGHER SUICIDE RATES

The statistics commonly cited in the media suggest the suicide rate for law enforcement personnel is 22 deaths per 100,000 officers compared to 12 deaths per 100,000 in the general population.

This estimate of police suicide is based on a 1995 Fraternal Order of Police (FOP) study of insurance claims by 92 local chapters in 24 states.

Furthermore, "experts" quoted in newspaper articles consistently state there are about 300 suicides each year by law enforcement personnel or that the police suicide rate is at least double that of the general population.

To get an idea if this commonly cited suicide rate for law enforcement personnel is accurate, we looked at the data published in the June 1, 1999 issue of *USA Today* in which the paper listed the suicide rates for the New York, Chicago, Los Angeles, San Diego, Phoenix, Dallas, Houston, and San Antonio police departments as well as for the FBI. As shown in Table 1, the annual suicide rate for officers in these agencies is a combined 16.34 per 100,000, well below the 22 reported in the FOP study.

In September of 1999, one of the researchers phoned the 22 law enforcement agencies in the Roanoke and New River Valleys in Virginia to investigate the local law enforcement suicide rate. From the period 1990-1998, there was only one law enforcement suicide, a rate of 10.0 per 100,000, also well below the FOP rate.

| Table 1: Law Enforcement Suicide Rates from the <i>USA Today</i> Article | | | | | |
|---|--------------|--------------|-------------|-----------------|--------------------------|
| Department | Dates | Years | Size | Suicides | Rates per 100,000 |
| San Diego P.D. | 1992 - 1998 | 7 | 2,000 | 5 | 35.7 |
| FBI | 1993 - 1998 | 6 | 11,500 | 18 | 26.1 |
| Los Angeles P.D. | 1990 - 1998 | 9 | 9,668 | 20 | 20.7 |
| Chicago P.D. | 1990 - 1998 | 9 | 13,500 | 22 | 18.1 |
| New York P.D. | 1985 - 1998 | 14 | 40,000 | 87 | 15.5 |
| San Antonio P. D. | 1994 - 1998 | 5 | 1,871 | 0 | 0.0 |
| Houston P.D. | 1994 - 1998 | 5 | 5,441 | 0 | 0.0 |
| Dallas P.D. | 1994 - 1998 | 5 | 2,845 | 0 | 0.0 |
| Phoenix P.D. | 1994 - 1998 | 5 | 2,500 | 0 | 0.0 |
| TOTAL | | | | 152 | 16.3 |

To get further data, we used such sources as Info-Trac, Lexis-Nexis, and Dow Jones Interactive to conduct an extensive search of media articles reporting on suicides by law enforcement personnel prior to October 1, 1999.

We combined the data provided in published studies of law enforcement suicide. This analysis was limited to "more recent years" which we defined as being from 1950 to the present. To use some of these studies, it was necessary to obtain additional information.

For example, Danto (1978) reported that 12 Detroit police officers committed suicide in the eight years from 1968 through 1975. To compute a suicide rate for this study, we used the Uniform Crime Report to determine the number of sworn personnel in the Detroit P.D. for each of those eight years, and then computed an average number of sworn personnel for those eight years.

The Detroit suicide rate of 28.45 was then calculated by dividing the number of suicides (12) by the average number of sworn personnel (5,272), multiplying this quotient by 100,000, and then dividing by the number of years in the study (8). Similar calculations were conducted for any study with incomplete data.

Because the suicide rate of 203.66 reported by Nelson and Smith (1970) appears to be abnormally high, we used the Uniform Crime Report to obtain the number of law enforcement personnel in Wyoming for the relevant years and then recomputed the suicide rate. The rate of 117.6 we computed is still very high, but more reasonable than the 203.66 originally reported.

The annual law enforcement suicide rate across these 30 studies is 17.83 per 100,000. In computing the average suicide rate across studies, each study was weighted by the size of the department and the number of years included in the study. Though the international studies are included in the table, they were not included in the analysis.

When all of our sources are combined, our best estimate of the annual law-enforcement suicide rate is 18.1 per 100,000.

COMPARISON TO POPULATION FIGURES

Now that we have an estimate of the law enforcement suicide rate (18.1 per 100,000), the next task is to determine how this rate compares to the national rate. In the media, the law enforcement suicide rate has been compared to the national suicide rate of about 12 per 100,000 people (Fields & Jones, 1999).

However such a comparison is not proper as suicide rates vary greatly across genders, races, and age groups. In 1997 (the most recent data available) the suicide rate for white males, which is what most police officers are, is 20.2 per 100,000.

Comparing the law enforcement rate of 18.1 per 100,000 to the 20.2 per 100,000 paints a very different picture than comparing the law enforcement rate to the 11.4 per 100,000 in the general population (Hoyert, Kochanek, & Murphy, 1999).

Furthermore, the suicide rate for white, males between the ages of 25 and 55 for 1997 is 25.5 (Hoyert, Kochanek, & Murphy, 1999).

If we adjust these figures to take into account the fact that as of 1997, 72.1% of law enforcement personnel were white males, 8.9% were white females, 16.9% were non-white males, and 2.1% were non-white females (Sourcebook of Criminal Justice Statistics, 1997), the expected suicide rate for law enforcement would be 21.89 per 100,000.

If we compare the law enforcement suicide rate to the appropriate population rates rather than the general population rate, it is clear the suicide rate for law enforcement personnel is actually lower than the appropriate comparison group!

A second way to compare suicide rates is the Proportionate Mortality Ratio (PMR). The PMRs were computed by dividing the law enforcement suicide rate by both the rate for the general population and the rate for white, males between the ages 25-54 for the years in which the study was conducted.

These rates were obtained from the Federal Statistical Abstracts for each of the past 40 years. A PMR below 100 indicates that the law enforcement suicide rate is lower than the age adjusted comparison group. Likewise, a PMR above 100 indicates that the law enforcement suicide rate is higher than the age adjusted comparison group.

The average PMR across the studies is 152 when compared to the age-adjusted general population rate and 73 when compared to the rate for white, males between the ages of 25 and 54.

Thus, law enforcement personnel have a 52% higher suicide rate than the general population and a 27% lower rate when compared to white males between the ages of 25 and 54.

If we adjust for the percentage of females and non-whites in law enforcement, law enforcement personnel have a PMR of 82.69 compared to the appropriate population rate.

The differences in suicide rates between law enforcement agencies and the general public can be explained by the fact that the vast majority of police officers are white (81%), males (89%) between the ages of 21 and 55 (Uniform Crime Reports for the United States, 1997) C characteristics associated with higher suicide rates.

After accounting for sex, race, and age, differences between law enforcement personnel and the general public are not only reduced, but change direction indicating that law enforcement personnel are 26% less likely to commit suicide than their same sex, race, and age counterparts not working in law enforcement. Thus, attempts to attribute suicides by law enforcement personnel to unique characteristics of the job are not supported by the data in this paper.

THE PROFILE OF OFFICERS WHO COMMIT SUICIDE?

We used two strategies to answer this question. The first strategy was to review published literature providing information about law enforcement personnel who committed suicide. This review yielded data on 396 law enforcement suicides from 12 articles: Ivanoff (1994), Aussant (1984), Heiman (1975), Friedman (1968), Cronin, (1982), Violanti, Vena, and Petralia (1998), Danto (1978), Loo (1986), Josephson and Reiser (1990), Dash and Reiser (1978), Cantor, Tyman, & Slater (1996), and the FOP study (Langston, 1995).

The second strategy was to use such sources as Infotrac, Lexis-Nexis, and Dow Jones Interactive to locate media stories about police suicide. This strategy yielded data on 299 law enforcement suicides.

The "typical" officer who committed suicide was a white, 36.9 year-old, married male with 12.2 years of law enforcement experience. The typical suicide was committed off-duty (86.3%), with a gun (90.7%), at home (54.8%).

The reason the officers committed suicide is more difficult to determine. Each study used different categories to code the reason for the suicide and thus comparisons among studies are difficult.

For example, in our national media study, legal problems were a major reason for the law enforcement suicides yet no other study separately coded legal problems. Relationship problems accounted for the highest percentage of suicides at 26.6% (relationship problems plus murder/suicide), followed by legal problems at 14.8%. In nearly a third of the suicides, no reason was known.

SUMMARY

This data suggest that, although the suicide rate of 18.1 for law enforcement personnel is higher than the 11.4 in the general population, it is not higher than would be expected for people of similar age, race, and gender.

Any difference between law enforcement rates and rates in the general population can be completely explained by the race, gender, and age of people who enter the law enforcement field. This is an important point because it suggests that speculation about such factors as job stress and the availability of weapons are not factors that are exclusively associated with law enforcement suicide.

Although even one suicide is too many, allocating mental health resources to law enforcement personnel at the expense of other professions does not appear justified. Furthermore, the reasons that officers commit suicide are similar to those of the general population with the possible exception of legal problems.

WHAT STATISTICS DO NOT SHOW

Statistics do not show the number of retired officers who kill themselves. Statistics do not show the suicides that are covered up by fellow officers or departments in order to validate the deceased's insurance or to avoid embarrassment.

Statistics do not show that officers who take their lives as a result of personal stress and/or trauma on-the-job are often forgotten. Unlike the wall of names in Washington of officers killed in-the-line-of-duty, there is no memorial honoring officers who kill themselves. There is no national place for grieving.

Taking into account the hidden suicides, what is the real suicide rate? I would estimate that police officers kill themselves at least twice as often as the national average. I can't prove it, nor can anybody else right now. But I think a figure of twice the national average is a conservative estimate.

CULTURAL VIEWS OF SUICIDE (POLICE OFFICERS)

Every culture has its own contingency of traditions for dealing with suicide.

In Eastern cultures Suicides, certain kinds of suicide have a distinct social texture to them. The Japanese have practiced seppuku, the art of self-disembowelment, for hundreds of years.

For the Japanese, seppuku is a viable method for avoiding any kind of dishonor, and is accepted as a responsible way to deal with one's personal or public failings.

In India, many widows have for centuries engaged in suttee, the practice of burning themselves on their husband's funeral pyre as a public expression of grief.

In Western cultures, Judaism, Christianity, and Islam specifically condemn any suicide as a blasphemy to the will of God. It has been that way in recorded history since the early middle ages, with criminal and social penalties for anyone who attempts or commits suicide. Until 1823, criminal and social penalties in much of the Western world were as follows for those who committed suicide;

- 1) Burial on consecrated ground prohibited,
- 2) Burial at a crossroads or at least after dark, both with a stake through the heart,
- 3) Possessions confiscated by the state.

MODERN U.S. CULTURE

In modern U.S. culture, as in the past, people kill themselves.

The suicide rate of the general population in the United States is moderate in comparison with other countries, at about 12 per 100,000. Suicide happens frequently in all age, race, and economic groups. It does not confine itself to gender or to belief system. Every segment of U.S. culture is capable of producing individuals who will decide to kill themselves.

However, certain groups are more likely to commit suicide. Women make more nonfatal suicide attempts than do men. Men are more likely to actually take their own lives, because they use guns instead of pills.

And, although people below the age of 25 are more commonly thought of as the highest risk group for suicide, this is only an affectation of media attention. The highest rates of suicide are found among older adults.

In the United States, there are still intense social and judicial penalties for suicide. The historically assigned spiritual shame persists in many sectors of our culture, and leaves its residue on others.

Stigma has also been a gift that each generation passes to the next. Suicide is not considered honorable. It is currently perceived as a sign of failure and weakness. Those who attempt suicide and fail are remanded to the custody and confinement of a mental health facility until they are no longer determined to be a threat to themselves by two staff doctors.

It is commonly felt that those who attempt to take their own life cannot have arrived at that decision reasonably or logically. They must be mentally ill and therefore in need of supervisory care. No one in their right mind would want to encourage their own death. They must also carry the stigma of their failed attempt with them back into society. The connotations for such an individual are all heavily negative.

THE POLICE CULTURE

Those who work in law enforcement have their own training programs, their own protocols, and their own sets of rules and regulations by which all conduct is ideally governed. There is a chain of command and internal regulatory bodies. They are distinguished further by uniforms, badges, and department issue side-arms. These are some of the basic elements that define the police culture.

The attitude of the police culture towards suicide is reflected in the training it generally offers to its officers on the subject. Generally, there is little and often no occupational suicide training provided for police officers. It is a subject that is almost unilaterally ignored. Furthermore, studies on the subject are few and scattered.

This is related to the notion that police officers traditionally subscribe to a myth of indestructibility, they view suicide as particularly disgraceful to the victim officer and to the profession. This defines the police culture's contingency for suicide: ignore it.

THE SILENT KILLER

Suicide is often considered the “Silent killer” in law enforcement. More police officers have killed themselves than have been killed by criminals. Many officers and agencies consider suicide to be "weak," or "the coward's way out."

Because of the shame and stigma attached to suicide, the friends and family of officers who have killed themselves are ashamed or embarrassed to talk about it. This page will talk about suicide frankly, and simply. Our purpose is:

- To “maybe” help prevent suicide
- To help families and friends of officers who have committed suicide
- To help agencies set up training and policies to help prevent suicide, and to help the colleagues, friends, and families of officers who do commit suicide

Most people are uncomfortable talking about suicide. Some may also feel, for religious or moral reasons, that suicide is wrong or sinful. The purpose of this site is not to judge or condemn, but to help them.

Every law enforcement officer, trainer, supervisor, and executive needs to know about suicide. Every law enforcement agency needs to tell its employees, and every law enforcement union needs to tell its members, about suicide, and what resources are available to help officers with their problems.

WHY SUICIDE?

Law Enforcement is one of the most dangerous occupations in the world emotionally and physically. Police officers continually face the effects of murder, violence, accidents and disasters or the possibility there of.

Rotating shifts, long hours and exposure to life's tragedies take a heavy toll on police officers and their families. The results are alarming: high divorce rates, suicide, domestic violence, heart attacks, cancer, depression and alcoholism.

Law enforcement, the media, and the public foster the myth that police officers can experience trauma and violence without suffering any ill effects. The truth is that it is just the opposite: when stressors are prolonged and overwhelming, an individual's ability to cope becomes difficult.

Suicide is a serious problem that is not often talked about in police circles. It is very hard, if not impossible, for us to understand why someone chooses to end his or her life. Shock and disbelief are usually the first responses to an officer's suicide.

Before we get to the danger signs and risk factors, I think we need to review the reasons why somebody commits suicide. The following information is from research compiled by a group called SOLOS, the acronym for "Survivors of Loved Ones' Suicides."

We often think that a person kills himself or herself as a decision, a means of control, as a voluntary act. This person may have an emotional disorder, personality disorder or poor coping skills. But research challenges these notions, saying that suicide's goal is not so much to end life as to end pain and suffering.

There is no choice involved in suicide. The act is not a means of control from severe stress and psychological pain. It is not really a voluntary action, but an involuntary response.

The person is a victim. And instead of having a disorder or poor coping skills, the person has a biochemical deficiency created or aggravated by psychological pain. In other words, suicide occurs when the stress induces pain so unbearable that death is seen as the only way out of the pain.

In the context of Posttraumatic Stress Disorder, this makes a lot of sense. The pain from PTSD symptoms is often so unbearable that the sufferer sees death as the only relief.

"The majority of suicides, about 80%, are the result of untreated depression or other mental illness. Many survivors mistake a 'triggering event' such as a relational breakup or personal failure as a 'cause'. Despite what survivors may read in a seemingly 'rational' and explicit suicide note, suicidal acts is desperate attempts to escape extreme and often enduring mental anguish, pain, and/or stress."

This is more related to a person's ability to cope than a rational response to actual life events. Depression and other mental illnesses contribute to low self-esteem and undermine the confidence and ability to accurately perceive and deal effectively with stresses that a healthy person takes in stride or adjusts to more quickly and successfully.

Regardless of the fact that suicides often appear well-planned, the act itself is typically an impulsive one. He or she may not have known until the crisis hit that the moment to 'do-and-die' had arrived. Those serious about killing themselves often wait until an opportune time when they know they can succeed without being rescued. This is why people known to have 'a plan' are considered to be at highest risk."

RISK FACTORS FOR SUICIDE

So, what are some of the risk factors that suggest someone might commit suicide?

The risk factors include:

- Thoughts of death.
- Suicidal ideation or thoughts of suicide.
- Conception of a suicide plan, which includes where it will take place and when.
- Availability of lethal means-which is no problem for armed cops.
- Presence of the warning signs of suicide.

- A family history of suicide or suicidal behavior.
- Presence of symptoms of an emotional disorder.
- A history of drug or alcohol abuse.
- A recent stressful life event or change, such as retirement, promotion or even an award.
- Danger signs for potential suicide
- The danger signs that someone has the potential for committing suicide are described in Chaplain Robert Douglas' book, "Death With No Valor."

THE SIGNS INCLUDE:

- Sudden loss of motivation.
- Not concerned about physical fitness or physical appearance.
- Isolation, withdrawal, doesn't talk much or confide in anyone.
- Heavy drinking or drug taking.
- More accident prone, especially with own car and service vehicles.
- Reckless behavior.
- Not sleeping looks tired all the time.
- Has told others about suicidal thoughts.
- Frequent use of tranquilizers.
- Mood swings, displays inappropriate emotions, gets angry at small things.
- Unable to concentrate.
- Frequent injuries.
- Discipline problems at work, picks fights with superiors.
- Becomes arrogant, aggressive, impulsive, and violent.
- Unable to deal with frustration.
- Cries easily.
- Nervous, may experience shaking or tremors.
- Plays with gun, points it at self or others.
- Delusional.
- Suffers from high blood pressure.
- Previous history of suicide attempts or family history of suicide.
- Combines tranquilizers and alcohol.
- Sudden desire to make last wishes known.
- Preparing will and getting papers in order.
- In addition to those symptoms, a suicidal person might start to give things away and, after a long period of depression, appear suddenly euphoric or happy.

LOSS OF CONTROL

When officers lose the ability to cope in normal ways, they may turn to an ultimate solution to relieve the pressure of stress. They are trained to use the ultimate solution when the situation permits. It is even arguable that officers are not trained in "normal" coping mechanisms.

Control is what the police officers are trained to do and the culture is irrelevant to the question of suicide. Police officers are trained to take control, and are controlling individuals.

When they arrive at a situation, they are trained to take charge and establish themselves as the regulatory element.

When a situation has deteriorated beyond their verbal control, or they lose control because of some intervening element, they are trained to take physical control. The final solution to a situation that the officer cannot physically control is their weapon.

The gun is in control. The police officer is trained to resolve a deteriorated situation, one way or another, with their sidearm. The gun, or even its presence on the officer's person, represents that officer's ability to control his environment.

An officer is trained always to maintain control of the situation, and the sidearm represents the extreme that the officer is authorized use to achieve that objective. With the responsibility comes intense stress. Almost unfailingly officers enter policing with high ideals and confidence that they will make a difference and the desire to help others.

Over time, this sense of idealism may transform into hard-core cynicism. The job, in all of its parts, makes cynics of idealists, and that in itself is incredibly stressful. So, over time, police culture can create an individual trained in the use of deadly force to maintain control, carrying a gun, who is stressed and cynical.

HOPELESSNESS

Hopelessness is one of the biggest contributors to a suicidal mind set due to the sense of loss of control over behavior, feelings, or circumstances. It is a resignation of the self to perceived external elements. A feeling of hopelessness can be perceived by an officer from innumerable sources. It is not sudden. It grows slowly, unabated, until it becomes an insurmountable mind set and the officer just finally "gives up".

There is an unofficial progression in "The Job" that police counselors have noted in many cases of police suicide and attempted suicide. The idealistic Academy graduate turns into a depressed cop.

- Frequently exposed to blood, gore, and danger.
- Does not unburden these horrors on spouse.
- Spouse wouldn't understand.
- A few drinks with the guys after work to help unwind.
- Fellow cops don't understand.
- Can't trust civilians.
- Can't admit troubles, even to fellow cops; would be considered a wimp.
- Can't trust fellow cops.
- Drinking increases.

- Spouse takes off.
- Gun is handy.

When a police officer commits suicide, it is most certainly an expression of hopelessness within the perspective defined by police culture.

Take for example the case of Capt. Terrance Tunnock, of the NYPD. In July of 1994, he was 49 years old, and married with children. A 28 year veteran in the police department. One morning, while his family made breakfast for him in the next room, he took out his service revolver and shot himself in the head.

In one article published on that suicide and others, Chief of Personnel Michael Julian was quoted as saying that this suicide could not be clearly traced to problems at work.

The same article reported that fellow officers detected no signs of distress beforehand (NYPD). In another article published two weeks later, it was revealed that Tunnock had one week before his suicide spoken to Federal authorities about police corruption involving seized money and drugs. He had just completed the task of informing on a 10 man rogue unit operating within his department to Federal authorities (NYPD).

That case was not typical of police suicides in the U.S. Tunnock had 28 years on the force, and was the highest ranking police officer to commit suicide in 20 years. His case also involved corruption. And from all accounts he had a good relationship with his family. None of these elements are typical.

There were, however, typical elements involved, including the fact that he shot himself in the head with his service weapon. There was also reason for perceived hopelessness. Tunnock's hopelessness was likely twofold; feeling responsibility for the corruption in his own department, and the prospect of facing fellow officers after having turned in his own officers.

It is also likely that he felt professional shame from the corruption, and being defined as an individual by a "myth of indestructibility," was not able to face his fellow officers or family. He was the Captain; he was supposed to be in control of everything. His sense of self and control had likely been torn from him by this circumstance. Although atypical, Tunnock's case does demonstrate that even the most seasoned veterans are not immune to hopelessness and subsequent suicidal tendencies.

The idea to be understood here is that hopelessness is a function of perspective, and that perspective is defined by culture. It is not possible to separate an individual's perspective from an individual's own culture. The following section will explore other cases that demonstrate how loss of control and persistent hopelessness contribute to suicide within police culture.

PROFILES

The typical officer who commits suicide is a white male, 35 years of age, working patrol, separated or getting a divorce, which has recently experienced a loss or disappointment.

As with any profile, these are not hard and fast criteria. These are statistical tendencies. They are a road map for prevention. The most important criteria, or symptom, or red flag, of a suicidal disposition is marital problems.

THE NUMBERS AND THE CULTURE

While the data is limited, law enforcement personnel appear overrepresented in the completed suicide data. Suicide takes more officers lives than homicide and one study found the rate of suicide among officers to be three times the national average.

From a family and departmental point of view, and given the emotional wreckage such deaths cause, a single officer suicide is always one too many.

From the available research on completed suicides in America, law enforcement personnel represent an elevated risk to themselves based on three probable factors:

- 1) Because many fear career-ending exposure should they seek treatment, police officers tend not to self-refer when in a crisis;
- 2) The law enforcement culture discourages the admission of psychological distress or psychiatric illness, and
- 3) Depression: the most common diagnosis found in completed suicides and is more easily masked than other psychiatric disorders, and goes undetected, undiagnosed, and untreated. Add to this the well documented risk factors of being male, white, black or Hispanic and working in a high-stress environment that requires access to a firearm, and you have a potentially toxic psychosocial formula for a greater-than-expected suicide rate among police officers.

One last risk consideration: People contemplating suicide must make a decision about the method they intend to use to bring about death. This decision is almost always made in keeping with one's values, personal identity, familiarity and availability of the selected method.

Anesthesiologists tend to use drugs, pilots may use single seated aircraft and, in the case of law enforcement personnel, the preferred choice is almost always a firearm. Unlike overdoses, cutting and hanging attempts, firearms lead to high mortality rates among attempters. With a handgun or shotgun, there are seldom second chances.

WHAT CAN BE DONE?

If suicides among police officers are going to be prevented, it will be necessary for those who know and work with them to not only raise their awareness about the depth and breadth of this problem, but to learn what prevention and intervention steps to take and when to take them.

The good news is that the research literature on suicide and its prevention is growing, not rapidly due to lack of funding, but growing all the same. Steady progress is being made.

Among the things we have learned recently:

- Most suicides are completed by people suffering from untreated clinical depression, often complicated by acute or chronic alcohol intoxication.
- Depression is a stress-spectrum disorder with strong biological components. It is a medical illness, not a weakness of character.
- If treated aggressively, 70% of the depressed and suicidal people will respond favorably to treatment in a matter of few weeks.

The newer antidepressant medications have few side effects which might impair job or family functioning and, as a result, compliance with medication regimes is good and treatment responses can be excellent. An antidepressant medication regime need not remove an officer from active duty.

We also know important things about preventing suicidal deaths. Recent unpublished research from the Department of the Navy found that among a series of 41 completed suicides, 90% of those who took their lives communicated their intentions to do so to someone who, had they been trained, might have intervened and prevented the death.

In only 34% of these cases were the communications directed to a professional with any responsibility to take positive action, while in 66% of the cases the suicidal communication was directed to a shipmate, spouse, family member or significant other.

Similar studies across other age groups confirm that most people who contemplate suicide communicate their intentions to others, increasing the rate of those communications as the crisis worsens, and especially in the last week before an attempt is made. These warning signs and signals can be interpreted and acted upon.

RECOGNIZING THE WARNING SIGNS

Someone who is considering harming him or herself may try to reach out to you, sometimes directly, sometimes indirectly. You should be especially alert for imminent warning signs of suicide, for example:

- Talking about suicide or death

- Giving direct verbal cues, such as "I wish I were dead" and "I'm going to end it all"
- Giving less direct verbal cues, such as "What's the point of living?", "Soon you won't have to worry about me," and "Who cares if I'm dead, anyway?"
- Isolating him- or herself from friends and family
- Expressing the belief that life is meaningless or hopeless
- Giving away cherished possessions
- Exhibiting a sudden and unexplained improvement in mood after being depressed or withdrawn
- Neglecting his or her appearance and hygiene
- Has the person had a close relative (like a parent) commit suicide?
- Has the person attempted suicide in the past?
- Does the person talk about or threaten suicide?

DOES THE PERSON SHOW SIGNS OF DEPRESSION,

- Mood changes (gradual, or sudden)
- Changes in behavior (gradual or sudden)
- Gain or loss of weight
- Lack of interest in a favorite activity or sports team (be concerned if a child or teenager who is a great sports fan suddenly loses interest in his/her favorite team)
- Lack of interest in life in general
- Changes in a child's behavior patterns
- Trouble sleeping, or excessive sleeping
- poor concentration or indecisiveness
- withdrawing from others
- lack of self-confidence or low self-esteem
- tiredness
- agitation
- hopelessness

IS THE PERSON:

- Making plans for the care of children?
- Giving away valued possessions or pets?
- Suddenly calling up or visiting people he/she hasn't seen in a long time?
- Showing sudden interest in insurance, wills, burial plots, etc.?
- Showing sudden calmness: the "calm before the storm"?
- expressing hopelessness, either about themselves, or other things?
- abusing alcohol?
- abusing drugs?
- going through a divorce, break-up of a relationship, etc.?
- being investigated on charges of crime or serious misconduct?

Note: you should be especially concerned about the signs above if the person has tried to commit suicide before, or if the person has had a close relative (like a parent) commit suicide.

These signs are especially critical if this individual has attempted suicide in the past or has a history of or current problem with depression, alcohol, or PTSD. Research indicates that a combination of alcohol use and PTSD produces a tenfold increase in the risk of suicide for law enforcement personnel.

Experts have identified other warning signs that a fellow officer may be thinking of harming him or herself. Officers at risk of suicide may do one or more of the following:

- Announce that they are going to do something that will ruin their careers, but that they don't care.
- Admit that they feel out of control.
- Appear hostile, blaming, argumentative, and insubordinate OR appear passive, defeated, and hopeless.
- Develop a morbid interest in suicide or homicide.
- Indicate that they are overwhelmed and cannot find solutions to their problems.
- Ask another officer to keep their weapon OR inappropriately use or display their weapon.
- Begin behaving recklessly and taking unnecessary risks, on the job and/or in their personal lives.
- Carry more weapons than is appropriate.
- Exhibit deteriorating job performance (which may be the result of alcohol or drug abuse).

There is no "fail safe" method of judging whether a person is at immediate risk of attempting suicide. However, most of these warning signs indicate that an officer is experiencing some sort of emotional stress.

SUICIDE RISK ASSESSMENT

There are some general indicators which have been found to be associated with an increased risk of suicide:

Age, race and sex: Male officers 50 years and older are at highest risk, while females of any age at lowest risk. Caucasian males have the highest suicide rate of all demographic groups.

Psychiatric symptoms: Persons with clinical depression are at the highest risk for suicide.

Depression: is likely the most common warning sign of suicide, followed by those exhibiting symptoms of schizophrenia such as disorganization, confusion, chaos and hallucinations.

Stress: Recent stress including daily hassles, life events and traumatic events. Examples are a recent job loss, divorce or relationship issues, illness.

The experience of a traumatic incident may also precipitate suicide such as 9/11, The Oklahoma Federal Building Bombing or Natural Disasters.

Prior suicidal thoughts/ attempts: A person's potential for suicide is higher if they have had previous suicide attempts, have been considering suicide as an option, if they have specific plans and means readily available and if a truly lethal means is contemplated (e.g., a police officer who always has a gun readily available). Each attempt increases the likelihood of success.

Available resources: A person who is isolated or has no means of social support has a greater risk for suicide, as is someone whose friends and family are openly hostile and rejecting.

Although stress, traumatic incidents or firearms may be precipitants to police suicide, these factors cannot be significantly changed. Researchers suggest that suicide prevention efforts focus on identifying factors that can be changed, such as knowledge and identification of risk factors and attitudes towards seeking help with personal problems.

THE NATURE OF SUICIDAL COMMUNICATIONS

There are four areas of suicidal communications:

- Direct verbal communications
- Indirect verbal communications
- Behavioral communications
- Suicidal situations

The fourth category (suicidal situations) are really not communications as we know it but crisis contexts in which, were we caught up in seemingly impossible circumstances, suicide might seem like the "only" way out.

For example, persons who were non-psychotic but acutely stressed completed suicides were often facing a personally humiliating event; an arrest, a pending court date, the launch of investigation into alleged improprieties or dishonorable conduct, etc.

The perceived "impossibility" of surviving the crisis psychologically was not apparent until after the death. As with beauty, the severity of a personal crisis is in eye of the person at the center of the storm, not in the eye of those of us standing by.

Persons facing an abrupt end to their life's dreams and careers are, all too often, suffering from co-existing untreated depression as well.

Whether the depression began before the final crisis, in anticipation of it, and/or was triggered by a series of final and unacceptable losses, real and imagined, only more research will tell.

But we do know that, worldwide, it is estimated that 60% of all suicides are completed by people suffering from this largely under diagnosed and undertreated disorder. As a result, the "final straw" that triggers the attempt may seem minor in retrospect.

VERBAL SUICIDAL COMMUNICATIONS

Direct verbal communications are easier to understand and do not require any special listening skills or interpretive powers. "I'm going to kill myself," "I can't get through another shift, I'm going to have to shoot myself," are not difficult communications to understand.

What is difficult is to accept these communications for what they are; attempts to seek help, understanding and even to be rescued. The key is to not ignore or deny what you've just heard, and to respond in a positive and forthright fashion.

Because direct communication about suicidal intent is often rejected out of hand by potential rescuers, suicidal persons often revert to coded clues or "hints" at what they are considering. For example, men will often make what is called a "dire prediction."

The statement, "You will find a dead man in a car outside the house next Tuesday," was made by an officer after his wife filed for divorce. "I want you have my gun collection when I'm gone, I know you'll take good care of it," was made by an otherwise physically healthy but suicidal officer to his son.

Because of the strong taboo about suicide in our culture, suicidal people may not wish to offend others with their unacceptable thoughts, feelings and plans.

Or they are afraid no one cares if they live or die. Whatever the motivation, the rule for understanding an indirect verbal suicidal communication is this:

If the word suicide crosses your mind after you hear such a statement, it's probably crossed the mind of the speaker, so go ahead and confirm what you think you heard. The worst you can do is being wrong; the best you can do is save a life.

Behavioral clues may be even more challenging to interpret. Not everyone in a suicidal crisis wishes to state verbally what he or she is about to do, in either coded language or un-coded language. Rather, they let their actions speak for them. Any behavior which suggests death is planned for should raise your suspicion index and trigger a response.

RESPONDING TO THE WARNING SIGNS

If you believe that a fellow officer is contemplating harming him or herself, you can ask directly, in private, if this is the case. If the officer admits to having such thoughts, or if the officer denies it but you are still concerned, there are a number of steps you can take:

- Express your concern to an appropriate person, such as a line supervisor or the department's mental health professional (if the department is large enough to have one).
- Offer to help the officer find, or accompany the officer to, a mental health professional who is better able to evaluate the officer's risk and to recommend next steps.
- Help the officer's family and friends develop a plan so that someone is with him or her at all times until the crisis is resolved.

Responding to a fellow officer in need may be difficult. You may feel like you are meddling or overstepping your role and intruding into the officer's personal life. But an officer with serious emotional problems may be in as much danger as an officer facing an armed perpetrator on the street.

DEPARTMENT RESPONSIBILITY: ACKNOWLEDGING THE PROBLEM

Along with implementing support groups or units, agency management must be willing to acknowledge the problem of police suicide and support changes. Leadership must be willing to take responsibility. The departments need leadership who are not just willing to acknowledge the problem but do something about it and offer a solution.

Support must start at the top. The chief or sheriff has to say it's alright to talk about it and ask for help. He has to be the one to be at the academy talking to recruits and saying we feel good about this. It must be people you can talk to and feel comfortable with without feeling that you have done something wrong.

THE ROLE OF LAW ENFORCEMENT IN PREVENTING SUICIDE

The law enforcement officer is called when something is wrong: when someone has been assaulted, robbed, or injured or when there is a confrontation or the threat of a confrontation. They interact with people who are angry, emotional, injured, frightened, or traumatized. Some of these people welcome their presence, while others resent it.

The law enforcement officer will face violent or potentially violent situations daily and offenders often threaten the officer, fellow officers, and members of the community with injury or death.

Many of these situations involve complex interpersonal and legal situations in which the officer must protect himself and others while maintaining their authority and respecting the rights of the public. Every time an officer is called out on a call, it becomes a judgment call with the officer hoping that they make the right decision.

Daily stress such as this will eventually take a toll. Law enforcement officers have one of the highest rates of divorce, alcoholism, and other emotional and health problems there is for any other profession.

Another reason is that law enforcement officers have a lethal means of suicide immediately at hand: Officers not only have access to firearms, they are often required to carry a sidearm both on- and off-duty. And most research (on members of the general public) shows that access to lethal means, such as a firearm, increases an individual's risk of dying by suicide.

Law enforcement agencies should support officers in taking care of each other with training, policies, and support groups. There are steps a department can take to prevent mental health issues from reaching the point at which an officer considers harming him or herself.

These include pre-employment screening, general wellness programs, the availability of confidential counseling, and a health plan that encourages mental health consultation.

The law enforcement culture of self-reliance can interfere with an officer's willingness to seek mental health counseling. However, the military has shown that institutional cultures can be changed in ways that are more likely to prevent suicide.

Removing the stigma of seeking help for a mental health or psychosocial problem, enhancing understanding of mental health, and incorporating suicide prevention training can have a considerable impact on mental health promotion.

Law enforcement agencies can create an atmosphere in which officers are encouraged to seek help for their emotional concerns (and to encourage their peers to seek such help). Departments should educate their officers by making the analogy that seeking professional help for mental illness is much like seeking help for a physical illness.

Expressing concern for a fellow officer's well-being can be compared to backing him or her up on the street. Departments may also want to train some officers as "gatekeepers." Suicide prevention gate-keeping programs train people to:

- Recognize behavioral patterns and other warning signs that indicate that a person may be at risk of suicide (or other emotional problems)
- Actively intervene, usually by talking to the person in ways that explore the level of risk without increasing it
- Ensure that those at risk of suicide or other problems receive the necessary services

Although gate-keeping programs were originally developed for young people, they have been adapted and used with success with adults in the armed forces, and some police departments, among other organizations.

A special gate-keeping training has been developed for law enforcement officers. While any officer can be trained as a gatekeeper or on the basics of recognizing and responding to the warning signs of suicide, experts have suggested that key personnel, including first-line supervisors and Internal Affairs officers, should be trained.

The supervisors have contact with the officers daily and the Internal Affairs officers have interaction with officers who may be sent to Internal Affairs for conduct issues (such as alcohol abuse) that could also be warning signs of suicide.

Suicide prevention training (including self-care) should be integrated into every agency's programs for management of critical incident stress.

Police departments should also offer mental health consultations to their officers (and purchase health plans that encourage, and pay for, such services), which officers may access privately.

While it may be beneficial for larger departments to have their own mental health personnel, it can be easier to maintain confidentiality by contracting with outside consultants who are not located within the department. In this case, it is advisable to contract with mental health providers who are familiar with the language and culture of law enforcement as well as the particular stressors of police work.

PREVENTING POLICE SUICIDE: AN ORGANIZATIONAL MODEL

Psychological Assessment: Although recruit screening in many police departments involves psychological testing, personality factors and family history (family violence, substance abuse) should also be noted for tracking high-risk officers in the future.

In-service officers being selected for special duty such as SWAT Teams, Undercover Duties, Sexual and Child Abuse Investigations should undertake additional psychological assessment to determine their suitability for such assignments and should include frequent check-ups during their assignments.

Tracking High Risk Officers: Police departments should track high-risk officers (e.g., officers with marital difficulties, substance abuse, work problems and other life issues) so that timely support can be provided.

A behavior profile should be reviewed every 6 months to determine which officers are at risk for suicide. There should be documentation of changes in behavior and problems of officers. Consultation with mental health professionals is essential when a police officer exhibits inappropriate behavior or behavioral change that suggests potential suicide.

Access to Firearms: Certainly, the risk of suicide increases because police officers have ready access to firearms.

The practice of some departments requiring police to carry firearms off-duty may be a target for police organizational policy change, as such immediate access can facilitate impulsive suicide tendencies in officers.

Family Involvement: Seminars should be given for police recruits and their families so they understand the psychological effects of police work. Marital problems can be a most significant stress-producing factor in the suicidal police officer.

The New York City study, for example, found that 58% of police suicides in New York were the result of relationship problems with family or significant others. Counseling services or Critical Incident Stress Management teams should be made available to the officer and family members.

Training: Training can help officers recognize and avoid psychological factors leading to suicide. Training should begin at the police academy level and include recognition of psychological depression, communication skills, conflict resolution and intimate relationship maintenance. Supervisors can be an important source of support for line officers and should be trained to recognize the warning signs of suicide and suggest confidential referrals.

Stress Awareness: A stress education program should include identification of stress, the value and techniques of physical exercise, benefits of proper nutrition, interpersonal communication methods, and coping styles.

Stress education on the family level should include identification of the police function, problems commonly encountered in police marriages, methods for effective communication, and the family as a source of support.

Executive level training in suicide awareness is also important. Executives can play a very important role in supportive functions, including organizational change and assistance with line officer problems. “Support from the top” can give officers an impression that the organization cares. Also, executive are not immune to the effects of police stress, they too have the potential for suicide.

Intervention – Not only can an effective intervention effort save officers’ lives, but it can also safeguard agencies from the devastating effects of suicide.

To facilitate officers in taking the first difficult step to intervention, the police organization should develop and increase accessibility to CONFIDENTIAL services. Essentially, officers need a safe place to go for help, out of administrative view.

Retirement Counseling: Suicide rates are high among retired officers. Retirement is not an easy transition for most people and even more difficult for police officers.

Many officers do not have skills for other types of employment and are unprepared for retirement.

Informational seminars and counseling should be made available to officers as early as five years prior to retirement. Spouses and other family members should be included in such seminars.

Conclusion: As true with addressing any problem, the first step is to recognize that the problem exists. With regard to police suicide, police departments must take that important first step. Even one police suicide is too many and agencies must be proactive in their attempt to prevent such tragedies.

WHAT YOUR AGENCY CAN DO TO PREVENT SUICIDE

No matter how big or small it is every agency can take steps to prevent suicide by its employees. These steps don't have to be difficult or expensive: an agency can do a lot with a small amount of money and effort.

Give Suicide Prevention Training to All Agency Members, Including New Recruits, In-Service Personnel, Supervisors and Managers

Every member of every agency, from the newest recruit to the chief or head of the agency, should receive brief training about suicide prevention. Note: the agency should give this training to all its members, including part-time, reserve, or auxiliary officers, and non-sworn or "civilian" personnel. This training should include, at the least:

- Where employees can get help if they are suicidal, or if a co-worker, family member, or friend is suicidal
- How to recognize signs that someone else may be suicidal

Make Sure that All Agency Members have Access to Confidential Counseling Services.

Every member of your agency needs to be able to get confidential counseling for personal problems. There are several ways to provide counseling. Ideally, all would be available, since different problems may call for different approaches, and people may be more comfortable with one source of help than another.

For example, some officers who would not talk to a "doctor" would talk to a fellow officer who is a peer counselor. Some officers who would not talk to a "counselor" would talk to a chaplain, etc. No way of getting help is "better" than any other way; they are all ways for officers to reach out for assistance.

AGENCY-BASED COUNSELING

Some agencies, especially larger ones, have in-house counseling or psychological units, sometimes using police chaplains or psychologists. Agency-based counseling can be very valuable, but there are several issues that must be addressed if they it is to be effective.

CONFIDENTIALITY

Confidentiality is critical. If officers do not feel that what they tell counseling personnel is confidential, many will not seek help for themselves, and will not refer other officers for help. The agency must tell officers what the counseling program will and will not consider confidential, and the agency must maintain the confidentiality it promises.

Note: If the agency violates its guarantees of confidentiality, the word will soon get around among officers, and they will avoid the agency's counseling programs.

CONCERN FOR OFFICERS

Officers will not seek help from any department counseling unit unless they feel that the unit has the officers' best interests at heart. If officers think that the police surgeons or counselors are just "company men" who give out the "party line," and only want to do what's easiest for the agency, then the counseling system will not work.

NOTE ON AGENCY DISCIPLINE AND LEGAL ISSUES

Many times, officers with serious personal problems who seek counseling from in-house agency sources may raise disciplinary and legal questions for the agency. While we can't address these issues in detail on this page, we can say this:

- Your agency needs to have clear policies on what its response will be when it learns about an officer's personal problems through its in-house counseling system.
- Your agency needs to tell officers, in advance, what those policies are.

PEER COUNSELING

In peer counseling, officers get help from fellow officers who are trained to be peer counselors. The goal of a peer counselor is generally not to provide in-depth counseling or therapy, but rather to refer the officer who needs help to the appropriate place (a psychologist/psychiatrist, counseling program, alcohol treatment center, etc.) and to assist the officer by providing some emotional support.

Peer counseling can be very effective, since officers may be more willing to get help from fellow officers than from other places, especially if the officers distrust the agency that they work for, or are fearful of the consequences of seeking help through the usual "official" channels.

It is important that peer counselors receive proper training, and that they be volunteers who are willing to use their own time, if need be, to help other officers. Ideally, at least some of the peer counselors should be line officers, since some officers will not feel comfortable dealing with supervisors or "downtown" personnel.

Peer counseling is not designed to replace other forms of help for officers, but to work with these

OUTSIDE COUNSELING

Your agency can set up a program under which officers with problems can seek counseling outside your agency. Often, this counseling can be paid for, at least in part, by officers' medical insurance. This can help keep costs reasonable for both the officer and the agency.

Having the counseling program be independent of your agency will make officers more willing to seek help. (It can also make it more difficult for lawyers to subpoena an officer's counseling records.)

An independent counseling program can give officers appropriate treatment without regard to the legal, administrative, and ethical dilemmas that may arise when a law enforcement agency has its own personnel counsel its officers. Many communities have low-cost counseling programs available, and local teaching hospitals, universities, psychiatrists, psychologists, and social workers can help with advice on such programs.

POLICE CHAPLAINS AND OUTSIDE CLERGY

Police chaplains and other clergy can be an invaluable, low-cost or a free resource for helping officers with problems. One of the greatest concerns officers have when seeking help is confidentiality. One thing that most officers will believe is that a priest, rabbi, minister, or other member of the clergy will keep what is said to him or her confidential. A member of the clergy may be especially comforting to an officer who is religious, and talking to a clergy member lacks the stigma of seeing a psychiatrist, psychologist, etc.

While some officers might be more comfortable with a chaplain or clergy member of their own faith, most officers will realize that a sincere member of the clergy, from any religion, will be willing to help them.

There are probably many capable clergy members in your community who would gladly volunteer to help officers with problems. Like a peer counselor or a chaplain, an outside clergy member will usually not provide in-depth, long-term therapy or counseling, or try to do the job of a psychiatrist or psychologist, but rather will refer the officer, confidentially, to other sources of help.

SPECIAL NOTE: REMOVING OFFICERS' FIREARMS

Officers with personal problems may be afraid to get help because they fear that their firearms may be removed by their department.

Many officers view "having your guns taken away" as a disgrace, a punishment given to officers who have done something wrong or are incompetent. Your agency should have programs for non-disciplinary firearms removal.

- Supervisors should be able to remove officers' firearms discreetly, without bringing disciplinary action against the officers.
- Officers themselves should be able to surrender their firearms voluntarily, without disciplinary consequences. Officers should also be able to surrender their personally owned firearms (both handguns and long guns) for safekeeping, as well as surrendering department-owned firearms or duty weapons.

ASSISTANCE FOR CO-WORKERS OF OFFICERS WHO HAVE COMMITTED SUICIDE

Suicide has a powerful effect on co-workers of the officer who has committed suicide. Your agency should make counseling available to the officer's co-workers, and should have an appropriate counselor discuss the officer's death briefly at the officer's workplace. Whoever speaks at the officer's workplace should emphasize that:

- It is all right for the officer's co-workers to be upset about the officer's death, and to feel sadness, guilt or responsibility that they "caused" the officer's death, or did not prevent it. They may even feel anger at the officer who committed suicide.
- No one but the officer was responsible for the officer's death
- That no one could absolutely have prevented the officer's death
- Anyone who wishes to discuss the officer's suicide privately with a counselor can do so

EFFECTIVE POSTVENTION FOR POLICE SUICIDE

Suicide in policing has reached epidemic proportions. Departments are often left in the wake of trauma and grief, unable or unwilling to deal with the suicide of an officer. This article provides practical guidance to departments to assist them in dealing with the aftermath of a suicide. Methods of interdepartmental communications, procedures, and debriefing are discussed. A model designed for suicide postvention is also presented.

Shneidman (1981) coined the term postvention, in contrast to prevention, to describe the sorts of actions taken after a suicide largely to help survivors such as family, friends, and co-workers.

Postvention was seen as a natural extension to the established suicide prevention field partly because there will always be some base level of suicide even when highly effective suicide prevention programs exist and partly because the survivors of a suicide can be

viewed as victims of post-traumatic stress (i.e., post traumatic stress disorder: PTSD) and, therefore, in need of assistance in dealing with their grief reaction.

SURVIVOR REACTIONS TO POLICE SUICIDE

The signs and symptoms of distress and bereavement resulting from the suicide of an officer might be a mix of any of the following commonly-reported reactions among survivors:

- Shock over the suicide
- Feelings of grief
- Feelings of helplessness
- Feelings of abandonment, isolation, and loneliness
- Feelings of depression and weepiness
- Feelings of guilt because they believe that they might have been able to prevent the suicide
- Sexual dysfunction
- Suicidal thoughts...the contagion effect
- Anger towards the suicide, the police department, other survivors, or the media;
- A loss of interest in work, family and friends, and other activities;
- Increased work absences, lateness, and use of sick leave;
- Alcohol and drug abuse; and
- Disruptive sleep and eating patterns.

STEPS IN SUICIDE POSTVENTION

The major steps in postventions could include any or all of the following depending upon the circumstances.

- Establish and execute your standing operating procedure (SOP) for postvention. The SOP should specify the key positions/persons responsible for initiating the SOP. For example, the immediate supervisor, the officer who first hears about the suicide (e.g., the duty officer), the departmental psychologist/health professional, padre/clergy, and internal affairs.
- Have a crisis team trained and ready to have a planning meeting to initiate the CISD. The team could be a mix of health professionals and trained peer counselors.
- Notify the departmental administration, next-of-kin, family physician and clergy if known, and other key persons.
- A departmental communication release should be made as soon as is practical to let fellow officers and staff know the facts rather than have the grapevine circulate rumors. Manage the external media by having a timely press release so that facts rather than rumors reach the media.

- Have a carefully picked debriefing facility readily available. While it may be practical to use a room in a police facility, an off-site facility such as a meeting or conference room in a community health center might be better for the survivors.
- Do at least one follow-up session to address unresolved concerns and any new issues that arose since the debriefing.
- Conduct a confidential evaluation of the postvention by having participants complete, for example, a confidential and anonymous evaluation questionnaire a week or two after the debriefing to identify particularly what worked well and what needs to be improved for future postventions. Alternatively, the evaluation might be conducted as a group session thus allowing for interactions among survivors but precluding anonymity.

ETHICAL ISSUES AND DILEMMAS

The issue of suicide is important because police are armed and can readily commit suicide in an impulsive but undo-able moment.

Police supervisors and health professionals must be alert to any warning signs (e.g., verbalizations about committing suicide, mood changes such as becoming despondent) that a survivor himself/herself is experiencing suicidal ideation or intent. Such persons must be referred to a qualified health professional in suicide prevention.

CISD

The critical incident stress debriefing (CISD), originally developed to help emergency services personnel such as police and firefighters to cope with traumatic incidents, can be used to help survivors.

The CISD usually has the following characteristics:

- CISD typically uses a single session, a half or even full-day session, although survivors may be referred to health service providers, clergy, or other sources for additional assistance if required.
- CISD usually uses a group session (10-12 survivors) partly so the various survivors have the opportunity share their common grief and provide mutual support and partly for efficiency given the likely limited number of experienced health services professionals readily available for this purpose. The group session can be seen as a 'decompression' session in an emotionally safe and supportive setting for survivors.
- CISD should occur within one to three days of the suicide so support can be provided in a timely manner to ameliorate the distress of survivors.
- A secluded and safe location is used to provide privacy and confidentiality.
- The selection, training, and experience of a facilitator or group leader is critical to ensure that the CISD process is conducted effectively.

- The facilitator should be a health services professional with extensive training and experience in CISM, PTSD, suicidology, and the grieving process (Faberow, 1992). It can be helpful to have a survivor act as co-leader if a survivor has the personal characteristics (e.g., emotionally stable, empathetic, effective interpersonal communications skills) and leadership qualities (e.g., can keep the group focused) to facilitate the process.

STEPS IN CRITICAL INCIDENT DEBRIEFING

The following steps are typically found in CISM (e.g., Mitchell & Dyregrov, 1993).

- The facilitator describes the process and sets the ground rules for the session particularly the need for confidentiality and a mutually supportive environment. The introduction of participants.
- Participants need to express their feelings about the suicide and the perceived reasons for the suicide. The results of such sharing in a safe and supportive group session should be emotional decompression and sense-making about the suicide.
- The facilitator or group leader should be able to use the group discussion to draw out the multitude of signs and symptoms of distress as well as the grieving process for the group to examine and then move onto the important actions that help manage distress and grieving. Such actions could include continuing to meet as a self-help group to continue providing one another with support, linking to community services, conducting a stress self-assessment, techniques to improve open communication about suicide among family members and significant others, and performing deep muscle relaxation exercises to overcome muscle tension and aid sleep.
- An after action report should be prepared and disseminated to the police department and health professionals not simply as an administrative procedure but as a means of sharing points learned and pitfalls to avoid in future CISM.

SOCIAL SUPPORTS FOR SURVIVORS

One could argue that, for police suicides, the number of significant survivors could be much higher given that not only family and friends are directly affected but virtually all of the police officers in a department where strong bonds create a family feeling.

Clearly, there is a need to provide support for these many survivors. Research has shown that survivors report receiving less support than desired or report being unaware of what support was available to them.

Such findings indicate that organizations need to do a better job of identifying survivors and communicating to them the availability of support services. For police departments, the imperative is to provide support for the family and fellow officers.

One potential issue is the macho image that still persists among some officers, that is, it is seen as a sign of weakness to ask for help or to actively participate in sessions for survivors.

Another potential issue is the stigma associated with suicide in contrast to death by other causes such as vehicle accidents. For example, research found that widows of suicide tend to experience rejection from their husband's family and friends.

The point is that some survivors might be less likely to seek assistance or discuss the event with others because it was a suicide. Police departments might consider a policy requiring that officers attend CISDs and other activities intended for their assistance to ensure that all affected survivors receive at least some assistance.

While social support services initially brings survivors together for group and/or individual sessions, survivors may wish to form or to join existing survivor groups (visit the American Association of Suicidology www.suicidology.org to see an extensive listing of survivor groups across the USA).

THE PSYCHOLOGICAL AUTOPSY

The term 'psychological autopsy' and the practice of performing psychological autopsies grew from the frustrations experienced in the Los Angeles County Chief Medical Examiner-Coroner's Office in the late 1950's where some deaths could not be properly resolved based upon the collected evidence.

By changing to a multidisciplinary approach, the Death Investigation Team, involving behavioral scientists in addition to the traditional medical experts, greater success resulted in (psychological) autopsies. In addition, the interviewing of informants such as family members, friends, family physician, and co-workers added much independent information about the suicide and circumstances.

Since that time the term and process has evolved and broadened in scope; we are concerned only about the psychological autopsy in the context of police suicide. For us, psychological autopsies are useful in addressing three broad questions.

WHAT WAS THE MODE OF SUICIDE?

Considering the majority of police who commit suicide use their service handgun, the method of suicide is usually easy to confirm.

In some cases, such as hanging, asphyxiation (e.g., carbon monoxide poisoning from vehicle exhaust), or drug overdose, the mode of suicide can also be easily confirmed. On the other hand, some cases can be more difficult to resolve because they involve multiple methods; for example, a drug overdose and drowning in a bathtub.

Even more difficult to resolve are suicides that may appear as accidental deaths. For example, the single-vehicle fatal accident where an officer drives at high into a solid barrier when there are no mechanical, road, or weather conditions that can be proposed as reasonable explanations for the apparent accident.

There are several main reasons for gathering these data. The obvious reason is to identify use of the service handgun or other departmental weapon such as a shotgun so that access might be better controlled, hopefully, to make future suicides using departmental firearms more difficult.

WHAT WERE THE CIRCUMSTANCES SURROUNDING THE SUICIDE?

Determining when and where suicides occur might have implications for prevention (Lester, 1997).

- Did the suicide occur on or off duty?
- Did the suicide occur on a week day, weekend, or holiday?
- Did the suicide occur at night or during the day?
- Did the suicide occur at home, a police facility, patrol vehicle, or other notable location?
- Did the suicide occur on an anniversary or other special day?
- Did the officer give away personal effects just prior to the suicide or make other gestures suggesting a 'farewell,' 'a settling of accounts,' or reconciliation with others?
- Was there a noticeable mood change before the suicide?
- Was alcohol or drugs a factor at the time of suicide?

These data could identify patterns suggesting periods when managers and helpers need to be especially vigilant about potential suicides so that preventive actions could be taken.

For example, if mood changes precede suicide, then supervisors and officers should be trained to identify such changes to help identify high-risk officers.

WHY DID THE OFFICER COMMIT SUICIDE?

This is a critical question not only for identifying preventive actions but it is a question raised by survivors who might benefit, in a small way, from having the answer. Family, friends, and fellow officers raise this question wondering what could have so disturbing in the officer's life that suicide was the way out.

For many officers suicide follows not just a single problem or critical event but the culmination of overwhelming several problems such as combined marital problems and career frustrations.

ETHICAL ISSUES

In conducting a psychological autopsy, one must treat all information and documentation as confidential. The integrity of the deceased must be respected. One must be careful not to cause further distress to survivors, for example, in the interview process.

It is preferable that health professionals who are governed by a code of ethical conduct and subjected to disciplinary action by their professional body conduct interviews of survivors and informants. In any case all members of the team conducting the psychological need to be selected for their related expertise and personal suitability.

Suicide Notes

A substantial percentage of those who suicide leave suicide notes; a variety of studies over the past few decades showed that 15-35% leave notes.

The analyses of suicide notes yields many insights into the factors that led to suicide the person's state of mind, and other important factors. For example, Brevard, Lester, and Yang (1990) identified nine themes from 20 notes from a city in Arizona.

The most important themes included the desire to escape from pain (12/20 or 60% of notes) and self-blame for events (13/20 notes or 65%).

- Unbearable psychological pain and suicide as the escape from such unbearable pain.
- Problems in establishing and maintaining interpersonal relationships.
- Rejection-aggression, that is the turning inward of aggression rather against another person.
- The inability to adjust and overcome personal difficulties or the perceived inability to adjust.
- The suicide note may serve as an expression of conflicting or ambivalent feelings about suicide such as wanting to be dead but also wanting to be rescued and to live.
- Identification-egression in that the person has an intense attachment to a lost or rejecting person. If this emotional need is not met, then suicide might be seen as the only solution.
- Ego, that is, the suicidal person him or herself is viewed as a cause of the problem if the person is unable to overcome their personal difficulties and wishes to die.
- Cognitive constriction, that is rigid, impoverished and concrete thinking, possibly as one result of trauma, might contribute to a person's decision to commit suicide.

Some researchers have focused on alcoholism because of the strong association between alcohol abuse and suicide or attempted suicide. For example, Leenaars and Lester (1999) found in their analyses of 16 notes from alcoholics a suggestion that suicide is associated with a response to unbearable pain, often associated with alcoholism itself; and a history

of trauma such as a failing marriage. Thus, suicide may be seen as an escape from an unbearable situation.

Other researchers compared suicide notes written by males and females to detect sex differences but these studies usually report no sex differences in themes (e.g., Canetto & Lester, 1999; Leenars, 1988; Lester & Heim, 1992).

Age has been examined to determine if there are any differences in themes between younger and older persons who commit suicide.

Lester and Reeve (1982) found that older persons tended to be more concerned about feelings rather than actions and less explicit about their intended suicidal action.

More recently, Leenaars (1992) found that older persons tended to write more about painful personal problems, about being trapped by despair, and long-term instability, for example, alcoholism or the multiple loss of significant others.

Add to these findings is the more obvious difficulty that some older persons, especially in our youth-oriented culture, can experience in adjusting to the vicissitudes of aging with its accompanying decline in physical functioning and health (Bauer, Leenaars, Berman, Jobes, Dixon, & Bibb, 1997).

EVALUATION OF POSTVENTION

Policies and programs for postvention must be evaluated periodically just as policies and programs in other areas such as crime prevention and community policing need to be periodically evaluated or audited. Evaluations help management as well as other stakeholders (e.g., the community):

- Identify areas for improvement;
- Give recognition for a job well done;
- Assess the cost/benefit of the services provided as well as potential opportunities for cost savings (e.g., outsource particular services) especially because police departments operate under limited resources;
- Assess the ethical and legal aspects of the policies and programs for critical incidents or areas for improvement to protect users of postvention and the department from litigation; and
- Assess the fit between postvention policies and programs with the department's other personnel and operational policies and programs.

Such evaluations should address at least the following questions regarding policy and programs (Patton, 1980, 1986).

POLICY AREA

Relying on an informal, unwritten policy or procedure, perhaps based upon past departmental practices, might not be a prudent approach given the scrutiny police services face and the potentially harmful effects of critical media coverage among other potential effects.

- Does the department have a written policies addressing postvention? If not, why not?
- How does the policies compare to those in other police departments and organizations?
- Have situations arisen that the policy does not address? If so, then identify required revisions to the policies.

PROGRAM AREA

Policies are simply sterile paper policies unless specific programs, services, and procedures are implemented to genuinely action desired policies. But it is also appreciated that program implementation and management is much easier said than done especially when resources are tight or there is resistance to programs.

- Do the programs and services comply with the policies? If not, do the policies require revision or do programs and services need to be revised?
- What do the programs and services cost? Are the costs justified? Are there more cost-efficient ways of delivering the programs and services?
- Are the programs and services having beneficial effects for the stakeholders? Are there any unintentional negative effects on stakeholders?
- How do the programs and services compare to postvention programs and services in other police departments and organizations?

RESOURCING

Resources are scarce in police departments and the priority for resources understandably goes to the needs of operational policing before support services such as postvention.

That said, managers and other stakeholders need to be creative in resourcing postvention, for example, can health and other professionals be co-opted to provided some services pro bono or could community facilities be used gratis during no demand time periods for group meetings?

- Are the programs and services adequately staffed?
- Are qualified professionals managing the programs and services?
- Are the facilities, equipment, and other resources adequate?

STAKEHOLDER SATISFACTION

There are many different stakeholders in postvention and it may be impossible to satisfy the divergent or, even conflicting wants of the different groups. However, we must make a reasonable effort to satisfy stakeholders.

- Are the various stakeholders (e.g., survivors, departmental managers, police officers, local legislators and community leaders, health and community service providers) satisfied with postvention? What are their perceptions of postvention?
- What improvements can be reasonably made to better satisfy the stakeholders?
- Do the policies and programs neglect any stakeholder group?

ETHICAL AND LEGAL COMPLIANCE

It is recognized that codes of conduct or legislation can be in conflict and that such issues need to be resolved.

- Is there full compliance with ethical codes covering, for example, confidentiality of medical and service files?
- Is there full compliance with departmental policies, regulations, and administrative procedures?
- Is there full compliance with legislation at the local, state, and federal levels?

EVALUATION ISSUES

While periodic evaluation makes good sense, not all departmental managers and stakeholders would likely embrace evaluations for a variety reasons.

- Departmental managers and supervisors might resist an evaluation for fear of being criticized or because they believe that the evaluation process would be too disruptive to the program.
- Some stakeholders might see an evaluation as a waste of resources in terms of staff and an evaluation budget especially if there have been no serious criticisms or critical incidents.
- Some might wonder if the evaluation will be objective or simply a management tool for self- promotion or some hidden agenda.
- Some might believe that any recommendations will not be successful and that the evaluation will have little impact on postvention.
- Some stakeholders might be fearful that evaluators and others will get access to confidential or sensitive documents.
- A potentially serious problem is that required data and information to address the evaluation questions are not collected and available to the evaluation team. The need to have a confidential and secure data capturing and reporting system is necessary at the start of programs.

THE EVALUATION TEAM

Particular attention has to be paid to the composition and credibility of the evaluation team. The team should have representation from departmental officers and the police union, qualified health professionals, survivors and community stakeholders without becoming so large as to be unwieldy.

The mandate of the evaluation team and reporting structure must be clearly defined, perhaps adopting existing guidelines used for audits or other program evaluations. The team must be on guard so as not to become co-opted by one or another stakeholder group but remain objective and 'professional' in their work.

THE EVALUATION REPORT

To be useful, the evaluation report must:

- Present a balanced assessment showing good findings and areas for improvement;
- Identify the limitations to the report, for example, areas where data were not available;
- Present specific, practical recommendations preferably with the outline of an action plan;
- Maintain the confidentiality and anonymity of contributors; and
- Be distributed or, at least, available to the stakeholders.

CONFIDENTIALITY

Confidentiality is one of the toughest areas in dealing with law enforcement personnel. It is extremely important that there is an understanding with the Chief, Sheriff or other department heads that things discussed between officers and chaplains are highly confidential.

The Chiefs, Sherriff and department heads must understand that unless criminal or civil laws are being broken or the officer is either suicidal or homicidal, the discussions between the chaplain and the officer are personal and unless the chaplain feels that danger could exists if the officers actions pose a threat to himself or someone else, all information should not be released.

Before counseling, the chaplain should always inform the officer of this one exception to confidentiality and the chaplain should start the counseling with a disclaimer statement stating that everything discussed will be confidential unless it deals with broken laws and that the chaplain will not divulge information without the express consent of the person divulging the information.

Both the chaplain and the officer should treat the privilege of confidentiality with respect which contributes to the integrity of the counseling.

It should be understood that if laws are being broken or there is a real physical danger, or their mental state can cause their conduct to become destructive, the conversation will be held in strict confidence.

The legal argument is that the duty of a chaplain carries with it a professional duty to keep such information confidential and the recipient of the information was under legal duty not to disclose information given to him/her in confidence. When a chaplain reveals that information he violates trust, breaching his duty to preserve the confidences during counseling.

Chaplains are the first stage of safe contact and it should be assured that the chaplain has the time and expertise to give help in a time of trouble and confidentiality will be given regardless of faith, rank or position.

Any Law Enforcement Officer that comes to the Chaplain for counseling should be guaranteed confidentiality for themselves and their families and needs to know and understand that this is an "off the record" and "privileged" communication which will not be reported to their Superior or have any bearing on his or her job status.

Without this agreement, there is no possibility of a chaplain/officer relationship regardless of the situation. No officer will counsel with any chaplain unless they know that the confidence will be maintained.

The actions of the police chaplain can make or break a relationship between the chaplain and all of the officers in the department. If they feel they cannot trust the chaplain, there will be no relationship and no way for the chaplain to ever regain that trust again.

The police officer must be able to trust the chaplain to keep secrets. Officers feel that when they seek spiritual help, even if job related, that information given to a chaplain in any form should not be shared with others.

The element of confidentiality is very important to the over-all effectiveness of the Chaplain and his/her rapport with the men and women of the agencies they serve.

The police chaplain is ready and prepared to assist the officers and their families in times of crises involving any possibility of future duress.

The chaplain can be called upon anytime they are needed and that privilege creates an understanding that the officer or any family member will be able to discuss problems or concerns with someone outside of the department without any repercussions.

With privilege, there are some exceptions from a duty or requirement. A clergy-penitent privilege is the right of person(s) who have communicated confidential information to the clergy in the context of pastoral ministry to prevent testimony in court regarding such communications. Such testimony is said to be inadmissible in a court of law.

In some states the privilege is also held by clergy who may refuse to testify even with a penitent's permission regarding such cases.

Because of the demands made on the Chaplain's time, the Chaplain will most likely be able to offer only a brief, short-term, crisis-oriented type of counseling. If in his opinion, a long-term counseling program is desirable for a particular officer or family member, he may refer the individual to an appropriate community agency or to a marriage counselor.

However, the Law Enforcement Chaplain must keep in mind that serious crisis-oriented problems can arise in a law enforcement officer's life and he should be available to offer immediate help with the understanding that other professional help may be recommended when the crisis passes.

The Law Enforcement Chaplain needs to stay in touch with other chaplains, not only in their own area, but throughout the country. He should maintain this contact by attending meetings, conferences, and workshops in order to find out what other departments or chaplains are doing. Networking of chaplains throughout the country is vital to the success of the local Chaplaincy efforts.

SUMMARY

While postvention cannot bring back those officers lost to suicide, we should be able to provide timely and effective support to survivors and learn valuable lessons that will help minimize the likelihood of future police suicides.

Review the model for suicide postvention to ensure that police departments do cover the major postvention areas as discussed in this chapter and improve postvention for the future.

NOTES

CHAPTER 17: POLICE STRESS

Police officers have one of the highest suicide rates in the nation, possibly the highest. They have a high divorce rate, about second in the nation. They are problem drinkers about twice as often as the general population. These facts are warning signals for unseen problems that are not being handled.

Researchers use suicide, divorce and alcoholism rates as three key indexes of stress in a group of people. Clearly, police work is stressful. Hans Selye, the foremost researcher in stress in the world, said that police work is "the most stressful occupation in America even surpassing the formidable stresses of air traffic control."

One study in Detroit concluded that the single, most important factor that led to a police suicide was marital discord. Studies in New York show that almost all officers are intoxicated at the time they commit suicide. The three indexes of stress are intertwined for police officers. Police officials need to recognize the importance of these facts and provide policies and programs to reduce stress in these areas.

CHRONIC STRESS

Police stress is neither always unique nor obvious. Almost any single stressor in police work can be found in another occupation. What is unique is all the different stressors in one job. Many people see the dangers of acute stressors such as post shooting trauma and have programs dealing with them. These stressors are easy to see because of the intense emotional strain a person suffers. But what about the not so obvious, chronic stressors; are they important?

The lessons from the war crimes committed at MyLai in the Vietnam War help answer the question. In 1972 Dr. M. Scott Peck chaired a committee of three psychiatrists appointed by the Army Surgeon General to study the MyLai incident and recommend research to understand its causes. Why did these Americans kill five to six hundred unarmed civilians? Dr. Peck believes that chronic stress was an important factor leading two hundred Americans to commit this atrocity.

Chronic stress has at least two effects on people. First, prolonged stress causes people to regress. Their psychological growth reverses, and they become more immature. They rapidly become more childish and primitive. A common example is a sick person who is miserable and in pain for several days. Any wife will agree that her husband becomes self-centered, whiny and irritable; he expects constant attention and care. He behaves like a young, selfish child. People naturally regress during chronic discomfort.

Second, chronic stress numbs people's sensitivity. They can't stand to continually see human misery. They must stop feeling or they won't survive. The mind has this defense mechanism so people can continue working in horrible situations. If they kept their normal sensitivity, they would fall apart. As they become insensitive to their own suffering, they become insensitive to the suffering of others.

When treated with indignity they lose not only a sense of their own dignity but also the dignity of others. The pain of others stops bothering them, and they are no longer bothered when they hurt others.

The men in the Charlie Company had suffered chronic stress for months prior to going into MyLai. Their actions were primitive and self-centered; the veneer of civilization was gone. They killed unarmed civilians with insensitivity and no regret. The two effects of stress were obvious in their deeds. Chronic stress doesn't account for all that happened at MyLai, but it was an important contributor. The parallel to police work is obvious and very important for police officials.

Police officers encounter stressors in call after call, which saps their strength. Debilitation from this daily stress accumulates making officers more vulnerable to traumatic incidents and normal pressures of life. The weakening process is often too slow to see; neither a person nor his friends are aware of the damage being done.

Programs for acute stress are important but are limited in their value for two reasons. First, they are a reaction to trauma that has occurred; an officer is already suffering. Important support can be given to the officer, but almost nothing can be done to prevent an incident that causes trauma. How does a police official stop an officer's partner from being killed next to him? Second, few officers are involved in traumatic incidents in a year compared with the whole department which meets stress in call after call.

If chronic stressors are identified, then police officials can take proactive steps. They can do something before an officer becomes another suicide statistic. Departments should stop making artificial distinctions between job-related and personal problems. The two are interwoven and contribute to each other. The end result is a group of people under the greatest stress in any job in America.

OBSCURE STRESSORS

What are the chronic stressors of day to day police work? They vary among departments, shifts and people. Some are common and need to be named. This article describes only three sources of repeating stress. It doesn't discuss all police stress but gives the gist about obscure stress.

TRAFFIC STOPS

Police officers stop cars during a week for various reasons. They may hear excuses to gain their sympathies or indignities to demean them. A certain percentage of the people in the stops try to kill or injure the officers, yet officers are expected to be friendly at best or neutral at worst. A common view of police work is that we are all members of the community working for the safety and prosperity of everyone.

Even in A traffic stop, a police officer is expected to work with the driver for the good of the community. After all isn't the driver a good person who has merely made a small, temporary mistake?

If an officer approaches a car with a friendly attitude, his guard is down. He can't keep his defenses up and view a person as his friend at the same time. People are on guard against those they view as enemies, not friends. If an officer continually approaches cars with a friendly attitude, the chief will eventually get a call that one of his officers is lying in a pool of blood on the street.

If an officer approaches a driver thinking this might be the one who attacks him, he will come across as rude, gruff and uncaring. It's hard to be on guard for your life and appear friendly at the same time. When an officer approaches cars with a guarded attitude, the chief will get a call that he has a cynical, brutal cop who has no business serving the community.

The officer is in a dilemma. Considering someone a friend or an enemy produces opposite mental states. A person can't hold both attitudes at the same time. He is caught in a double bind, a no win situation. For an officer the situation is chronic stress with a cumulative effect of breaking down his defenses and making him a prey to other pressures and to diseases such as ulcers. The stress of double bind situations is well documented in psychological research.

PROFESSIONAL VS. MILITARY CONFLICT

A police department is both a professional and military organization, and these two aspects oppose each other. The classic professions of history are doctor, lawyer and minister. They require a basic education, a bachelor's degree, and a three year professional school of about 90 hours.

The professional is then licensed and endorsed by an agency. He is considered to be an expert in his field and is expected to use his expertise for the good of his clients. He has much discretion in how he serves the people who call upon him. The military is opposite. The people are well trained, but the chain of command tells them how to do almost everything. Orders, rules and regulations cover every facet of life in the military. Everything is done by the book with very little discretion left for people doing their jobs.

Police officers aren't professionals in the classic sense, but they are similar. An officer must have a minimum amount of education before he goes through an academy and field training. He is commissioned and in some places licensed. His duty is to use his training and authority for the good of the community. When someone calls the police, he expects the officer to make decisions to handle the situation.

The officer decides what he can and should do, but he runs head-on into orders, rules and regulations.

Police departments have learned from experience the value of having procedures and policies. Yet the events of life are too complex to handle by preset rules. People must evaluate situations and make decisions.

The problem comes for the officer when he is at the scene of a call. After learning the facts, he will decide what course of action is required to meet the needs of the people. Often that course does not follow procedures. If he follows procedures exactly, he knows he won't fully help the people and is frustrated.

The people will think he is shirking his responsibility and will be frustrated. If the officer follows his own judgment, he is taking a risk. If everything goes well, he is safe, but if things go badly, he is subject to discipline because he didn't follow procedures. The community and department expect officers to use judgment, but when they do, there is a danger they will be disciplined - another double bind.

ISOLATION

When people are isolated, they become disoriented and confused. Their behavior changes drastically. They can become apathetic to the point of illness or death. Social isolation in police officers fosters the attitude that "it's us against them". They begin to view the public like the soldiers at MyLai viewed those civilians; they're the enemy. As officers become socially isolated they suffer effects similar to physical isolation. The effects of social isolation are most prominent in the first six years of an officer's career.

Officers tend to associate only with other officers. When they go out with another couple, it is often another police couple. Officers want their spouses to go to police parties with them, but when their spouses want them to go to their office party, the answer is no. Officers make excuses that they don't want to hear the old ticket story again or they just don't fit in.

Police officers learn street wisdom. They develop confidence in themselves to handle situations in practical ways. Officers begin to look down on others because they don't have savvy in the real world. Police mostly see the seamy side of life that other people don't see, and since other people don't understand this side of life, officers feel superior. Ironically officers are the ones who are losing real world wisdom; the world isn't comprised only of criminals and fools. They judge the world from a limited perspective and see everything with a jaundiced eye.

Police work lacks balance. A doctor loses a patient today but brings a baby into the world tomorrow. Most jobs have a healthy balance; the good things are mixed with the bad. Not so in police work. In call after call officers only see criminals or people making fools of themselves. The police aren't called to a reunion party when everyone is doing right.

They are called when someone gets drunk and decides he can whip anyone around. The officer making the arrest sees the man then, not when he is working hard for his family.

It's not amazing that some officers think that ninety-eight percent of the people in the world are no good, and the two percent who are good are the police.

The examples given are stresses that police don't normally recognize. Anyone in police work can think of common frustrations such as seeing criminals getting out of jail on bond in a short time or being released completely. The point is there are chronic stresses in police work, and departments need to do something about them, not just the obvious traumatic incidents.

WHAT CAN BE DONE?

Police officials should stop distinguishing between personal problems and job-related problems. Many departments look closely into the personal lives of applicants during background investigations. Departments won't hire people who have major personal problems.

They understand the importance of a person's personal life in police work. After the person is hired a strange thing happens. Many departments forget the importance of a police officer's personal life when it comes time to help him. The fact remains that police work affects an officer's personal life, especially the family, and his personal life affects job performance. Any separation of the two is unreal.

Officials can't stop stress in police work, but they can recognize it and help officers in three areas. First, they can provide help to individual officers. Second, family life can be helped. Third, the stress caused by the police organization itself can be reduced.

Direct help for individual officers can come in many forms. Every large department should have a psychologist and a chaplain for the officers and ensure that insurance plans have good provisions for outpatient counseling with outside psychologists, psychiatrists and therapists. Doubly important is confidentiality; the department should not know when an officer uses a department counselor or insurance for counseling.

Programs for individuals often help reduce organizational stress. When a department provides a psychologist and a chaplain, the officers see that someone at the top does understand their problems and is trying to help. This perception is much better than the attitude of many officers that no one at the top cares.

Even worse officers often believe that administration is out to get them. Departments need to have policies for transferring people temporarily for family problems. The inconveniences of helping an officer for a short time far outweigh the problems of handling a police suicide or a lawsuit because an officer exploded during a critical call.

Traumatic incidents such as post shooting trauma are acute stressors but should be mentioned. Services that help the acute, individual stress of traumatic incidents also help chronic, organizational stress.

When an officer shoots and kills someone, he isn't given time to deal with his trauma. He must protect the crime scene, make arrests, notify the proper people and tell officials what happened. He maintains the image of being in complete control. Usually he has to tell the story several times to his supervisors, homicide, internal affairs and any special sections in the department. Other officers have their jobs to do and can't take time to support the officer personally.

The department can help with procedures that support the officer. Get other officers to handle the work as soon as possible and get the officer out of the public eye. Don't make him relive the incident three to six times in official interviews. Let everyone needing a complete story interview him at one time. Even better, let one section interview him and gets all the information needed for the whole department.

Start a traumatic incidents program or a procedure in which someone can be present to give personal support to the officer. A traumatic incident program is comprised of officers who have previously been in traumatic incidents. They are trained to help officers going through trauma and are called immediately to the side of an officer involved in such an incident. The members of the traumatic incident corps are volunteers who help in addition to their normal duties.

Officers and supervisors should be taught about the symptoms and effects of job stress. Proactive training helps ward off stress when officers encounter it. When an officer suffers from stress, reactive counseling and training such as biofeedback should be available.

Departments can reduce officer isolation and do community relations at the same time by supporting community activities such as youth athletics or charitable organizations. Official support could be given for officers to be coaches and referees in leagues. Officials should actively look for positions on boards of directors for community organizations such as mental health associations and seek to place officers as representatives of the Police Department. Police will get balance in their lives and citizens will better understand the police. A cooperative attitude will grow on both sides.

Family life can be helped in several ways. Counseling through the psychologist and chaplain should be available for family members. Orientation seminars for spouses will let them learn about the department first hand. Spouses don't understand the department and often have a biased opinion after hearing officers gripe. Police appreciation dinners sponsored by the community and the department are excellent. They give officers and their families a chance to sit down in a congenial atmosphere with the people who appreciate them.

The police organization is very important in the lives of its officers and often creates stress unwittingly. Orders and regulations tend to sound oppressive in their pronouncements when they don't need to. If a passage mainly gives information for handling a situation, then why word all of it in the imperative voice?

Save the imperative for imperative orders. Orders and regulations can be reviewed by someone trained to see the human impact that certain wordings have on people.

Poor communication causes chiefs and officers as much grief as anything. Departments can improve by having a consultant design a complete system of communication. A simple well-written newsletter for information, not propaganda, bridges the communication gap. In short, the organization needs to remove its own problems before pointing at individual officers and putting all the blame on them.

Police officers are suffering from stress, and one result is lessened service to the community. All police stress needs to be defined and combated, not just a few obvious ones. The task is difficult, but the rewards for doing it surpass the effort.

Stress plays a part in the lives of everyone. Some stress is not only inevitable, it can be good. For example, the physical stress of “working out” improves your cardiovascular system, and feeling pressure that causes you to study harder for an exam can improve your score.

Police stress, however, refers to the *negative* pressures related to police work. Police officers are not super-humans. According to Gail Goolkasian and others, research shows that they are affected by their daily exposure to human indecency and pain; that dealing with a suspicious and sometimes hostile public takes its toll on them; and that the shift changes, the long periods of boredom, and the ever-present danger that are part of police work do cause serious job stress.

The effect of long-term environmental threats called “stressors” is the unrelieved effort to cope with stressors can lead to heart disease, high blood pressure, ulcers, digestive disorders, and headaches. Stressors in police work fall into four categories:

- Stresses inherent in police work.
- Stresses arising internally from police department practices and policies.
- External stresses stemming from the criminal justice system and the society at large.
- Internal stresses confronting individual officers.

Police stress arises from several features of police work. Alterations in body rhythms from monthly shift rotation, for example, reduce productivity. The change from a day to a swing, or graveyard, shift not only requires biological adjustment but also complicates officers’ personal lives. Role conflicts between the job, serving the public, enforcing the law, and upholding ethical standards and personal responsibilities as spouse, parent, and friend act as stressors. Other stressors in police work include:

- Threats to officers’ health and safety
- Boredom, alternating with the need for sudden alertness and mobilized energy.
- Responsibility for protecting the lives of others.

- Continual exposure to people in pain or distress.
- The need to control emotions even when provoked.
- The presence of a gun, even during off-duty hours.
- The fragmented nature of police work, with only rare opportunities to follow cases to conclusion or even to obtain feedback or follow-up information.

Administrative policies and procedures, which officers rarely participate in formulating, can add to stress. One-officer patrol cars create anxiety and a reduced sense of safety. Internal investigation practices create the feeling of being watched and not trusted, even during off-duty hours. Officers sometimes feel they have fewer rights than the criminals they apprehend. Lack of rewards for good job performance, insufficient training, and excessive paperwork can also contribute to police stress.

The criminal justice system creates additional stress. Court appearances interfere with police officers' work assignments, personal time, and even sleeping schedules. Turf battles among agencies, court decisions curtailing discretion, perceived leniency of the courts, and release of offenders on bail, probation, or parole also lead to stress.

Further stress arises from perceived lack of support and negative attitudes toward police from the larger society. (Most public opinion surveys, however, show strong support for and positive attitudes toward police.) Stress also stems from distorted and/or unfavorable news accounts of incidents involving police. The inaccessibility and perceived ineffectiveness of social service and rehabilitation agencies to which officers refer individuals act as further stressors.

Women and minority officers face additional stressors. They are more likely to face disapproval from fellow officers and from family and friends for entering police work. Supervisors, peers, and the public question women officers' ability to handle the emotional and physical rigors of the job, even though research indicates women can do so. The need to "prove themselves" to male officers and to the public constitutes a major stressor for women officers.

Stress contributes not only to the physical disorders previously mentioned, but also to emotional problems. Some research suggests that police officers commit suicide at a higher rate than other groups. Most investigators report unusually high rates of divorce among police. Although some maintain that researchers have exaggerated the divorce rate among police, interview surveys demonstrate that police stress reduces the quality of family life.

A majority of officers interviewed reported that police work inhibits non-police friendships, interferes with scheduling family social events, and generates a negative public image. Furthermore, they take job pressures home, and spouses worry about officers' safety.

Systematic studies do not confirm the widely held belief that police suffer from unusually high rates of alcoholism, although indirect research has established a relationship between high job stress and excessive drinking. Finally, officers interviewed cited guilt, anxiety, fear, nightmares, and insomnia following involvement in shooting incidents.

In the past, departments either ignored officers with problems or dealt with them informally by assigning them to desk jobs. During the 1950s, some departments began to formalize their responses, usually by incorporating officer-initiated Alcoholics Anonymous groups made up exclusively of alcoholic officers. In the 1970s, departments instituted “employee assistance” programs to deal with problem officers, particularly those suffering from alcoholism.

These programs have expanded into a broad range of responses to police stress. Some programs focus on physical fitness, diet, relaxation, and biofeedback to cope with stress. Others emphasize family counseling to involve spouses in reducing police stress, such as Kansas City’s Marriage Partner Program or Minnesota’s Couple Communications Program.

Law enforcement is a stressful profession. Pressures related to the job itself, to external factors (such as public attitudes) and organizational stressors (such as bureaucracy) increase the levels of stress experienced by police officers (Brown & Campbell, 1994; Violanti & Aron, 1993). Stress is a major factor in officer transfers, early retirement, and career changes. One strategy to decrease officer turnover is to identify the factors that lead to increased stress in law enforcement agencies. Once the stress factors are identified, policy changes to eliminate the most troublesome aspects of policing can be implemented.

Over the past two decades, there has been a wealth of research concerning officer stress. The majority of research on police officer stress indicates that the occupation creates or contributes to psychological and physical ailments resulting in high incidents of cynicism, absenteeism, alcoholism, post traumatic stress disorder, burnout, early retirement, resignation from the force, and tragically, suicide.

Studies conducted on stress and law enforcement point to various categories of general stressors that are common to the profession. Researchers have categorized sources of police stress into groupings that include external stressors, organizational stressors, and task-related stressors, which negatively affect the performance and job satisfaction of officers.

The external stressors officers face include frustration with the courts, negative portrayal by the media, and disparaging public attitudes. Task-related stress is due to the nature of the job. Duties required of law enforcement officers, such as delivering notice of a death or being shot at while on the job are stressful events unique to being a police officer.

Organizational issues have been identified as the most common source of police work stress. Previous research indicates that the sources of organizational stress include poor pay; excessive paperwork; inadequate training and equipment; changing shifts; limited promotional opportunities; unfair policies; and lack of administrative support.

The general literature regarding the self-reported sources of police officer stress is ample and comprehensive. Likewise, the literature concerning the source of minority and women officers' stress is largely as extensive. However, the literature focusing specifically on members of these groups who *actually* resign from the police force *due* to the factors identified by the decades of stress research is deficient. Therefore, in order to fill this gap in the research, the authors assessed officer stress generally, while specifically investigating the relationship between both minority and women officers' stress in correlation to their eventual resignation from the police force.

SOME NOTED STRESSORS FOUND IN POLICE SURVEYS INCLUDE:

- (1) Physical threats were the most noted stressor among officers;
- (2) Lack of support experienced by officers; and
- (3) Organizational pressure.

Examples of physical threats seen as highly stressful for most officers included having to participate in high-speed chases, responding to a felony in progress, and being physically attacked.

Lack of support stressors include inadequate support by supervisors, inadequate support by the department, and strained relationships with non-police friends. Finally, examples of organizational pressure included political pressure from outside of the department, disagreeable department regulations and the perceived ineffectiveness of the judicial system.

Surprisingly, although responders indicated that organizational pressure was the third ranked cause of police stress, this type of stress is ranked number one as to why most officers leave the department.

Some other interesting general findings include the lack of influence education has on all three types of stressors; that is, the threat of physical violence, the lack of departmental support, and the presence of organization pressure creates stress for all officers, regardless of officers' education level.

Alternatively, age plays a role in the amount of stress experienced by officers. Findings suggest that *the younger the officers, the greater their perceptions of all three forms of stress*. Experience on the job appears to have a beneficial effect on officers concerning stress.

For instance, *findings suggest that the longer an officer has been on the force, the less likely they are to experience stress from both a perception of organization pressure and of a lack of departmental support. However, regardless of time on the job, the stress incurred from threats of physical harm is equally as disturbing to all ranks and classes of officers.*

The Police Stress Survey is an instrument meant to measure nearly 60 types of stressful situations, events, and occupational demands inherent to the duties of police officers. Recall that the participants were officers who had left a nationwide sample of police agencies over the past five years.

The results of this project indicate that seven specific stressors stand out as *directly contributing* to the decision of these officers to leave their departments. The most often cited reason was, "Inadequate support by supervisor" (25%) followed in succession by, "Inadequate support by department" (22%), "Political pressure from within the department" (18%), "Poor or inadequate supervision" (15%), "Inadequate salary" and "Difficulty getting along with supervisors" (11%-tie), and finally, "Excessive paperwork" (10%). Even though police work is very dangerous, more often, it seems, officers encounter stress and decide to leave the force because of organizational issues.

EMPLOYEE ASSISTANCE PROGRAMS

There are many opinions about police related stress. Some believe that police stress is no less or severe than that of emergency service workers, business workers, emergency medical services, and correctional workers. Police stress is different in that it is "not allowed" to become obvious and the effects are usually delayed and the result is PTSD (Post Traumatic Stress Disorder) or severe burnout.

The symptoms can appear one day from "out of the blue" in officers who have not shown even the slightest early warning sign. Research has shown that officers with six to ten years of service usually have the highest mean stressor scores.

Police officers experience "burst stress", which means that there is no steady stressor. Officers go from complete calm to high activity in sudden bursts, much like a military "hurry up and wait" drill.

The Heavy Badge web site has a good explanation of burst stress. One of the first to draw attention to this aspect of policing was W. Clinton Terry (1985) who coined the term "police stress syndrome" to characterize police stress as special and not due to danger, insecurity, or job dissatisfaction like normal job stress. Some refer to police stress as the "police paradox" (Cullen et. al. 1983) because both the safe and unsafe aspects of the job combine to produce the symptoms.

The third and final thing different about police stress is the fact that good stress is just as bad, if not worse, than bad stress.

Stress consists of eustress (good stress) and distress (bad stress), according to the founder (Selye 1975) of the General Adaptation Syndrome, but we know as little about eustress today as when the term was invented.

In middle management, stress comes from all sides, from unsupportive superiors above, and from subordinates below who need to be disciplined. There is a pervasive feeling of lack of control over one's work in middle management.

There is some evidence that alcoholism is associated with middle management stress, although there's more evidence that the older the officer, the more likely the alcoholism. FTO's (Field Training Officers) may experience the most stress under the burden of being both trainer and role model for a never-ending stream of recruits.

Detectives experience stress from not having secretaries, working odd hours, seeing the criminal justice system be too lenient, and pressure for solving cases quickly.

Top executives suffer stress from budgeting deadlines, program development, and resolving complaints. The Sheriff is consistently under more stress than police chiefs.

The lower the level of education for a top executive, the greater the stress. Both female and minority officers experience unique stress. Females must deal with the sexual harassment, public stereotypes, and need to gain acceptance from male officers.

Minorities must deal with the racial prejudice and their minority group's dislike for police officers, and, by association, them (a double whammy effect). Even the impact of community policing is stressful, most notably on sergeants (Lord 1996).

The families of police officers also suffer stress, a kind of vicarious occupational stress. The unpredictability, shift-work, fear (of death, injury, kidnapping), isolation, and low pay all cause family problems.

Children of officers are held to higher standards by the community, spouses are often at odds in figuring out how to communicate with one another, and both groups must deflect the never-ending stream of public inquiry whenever the police department is in the news. Relationships in police families are often distant and alienated.

Stress reactions vary by characteristics of the personality, social support structure, life experiences, years of service, level of education, use of coping strategies, the intensity of the stressful event, and any unique features of the organization.

A serious problem is that many police departments view police stress as an employee problem, not an organizational problem.

Rarely is the bureaucratic zed, paramilitary structure of the organization suspected of being the problem, although it probably is, and indeed, internal, departmental stressors are the most aggravating.

Police stress reactions often resemble the stage of full-blown cynicism. There are three (3) reactions that have received the most attention:

Suicide: Police officers kill themselves at a rate six times greater than in the general population, and police officers kill themselves at a rate 8.3 times greater than those who die at the hands of criminals. Although you often don't see it coming and there's usually no history of counseling beforehand, police suicides, via psychological autopsies, have been linked to diagnosable mental disorders, most often involving depression, alcohol, or drug abuse. It seems to be a phenomenon restricted largely to urban police officers.

Alcoholism: The rates are high possibly because of the stigma associated with illegal drugs. Older officers have the highest rates, and there is significant female and minority involvement.

Several studies conducted in the 1970's looked at drinking on duty as an indicator of alcoholism, and produced some frightening figures, from Reiss' 25% to Van Raalte's 67%. Other studies have looked at the "cop ulcer" rate, estimated at 30%, and fitness and dietary habits of officers. More recent studies have looked at drug use and abuse.

Infidelity: Perhaps the only occupation to have its infidelity rates studied, police work lends itself to temptations and opportunities in this regard, but there are no rate estimates. There is a literature on police divorce (1:10 succeed), how it is related to shift-work, and when in the police career it usually happens.

The stressors of police work have been the subject of much effort at categorization. For example:

Stressors Internal to the Police Organization: Poor Supervision (too lenient/too tough); Absence of Upward Mobility; Absence of an Extrinsic Reward System; Offensive (annoying & silly) Policies and Procedures; Excessive Paperwork; and Poor Equipment.

Stressors External to the Police Organization: Absence of Career Development & Lateral Entry; Jurisdictional Turf Battles; an Ineffective Criminal Justice System; Biased Press; Minority Attitudes; Derogatory Remarks; Political Interference; and Lack of Community Resources/Referral Agencies.

Stressors Connected with Police Work: Role Conflict and Strain; Rotating Shiftwork; Fear & Danger; Relinquishing Cases to the Detective Division; Victim Pain & Anguish; and Employee Review Boards.

DISCIPLINE VS: PUNISHMENT

It is important to note that there is a difference between employee discipline and employee punishment, and that employee assistance is altogether different. It is a type of help aimed at the relief of stress in average, normal, healthy, productive workers at risk of developing an un-resolvable, degenerative mental disorder.

It bears some resemblance to psychological fitness testing, but is more than that. The history of employee assistance programs is informative:

Traditional Programs: (1950 era) the supervisory attitude was to (1) ignore it; (2) assign the employee to a desk job; (3) refer the employee to Alcoholics Anonymous; or (4) refer the employee to the Chaplain. Unfortunately, most paper-pushing desk jobs these days are being taken over by civilians.

EAP Officers: (1960 era) A staff person, usually the Public Information Officer, would be in charge of granting employees, who requested it, a sick leave with no questions asked (and no pay while on leave). The employee assistance person would refer the officer to some outside mental health agency or counselor.

In-House Stress Units : (1970 era) A staff person would meet with the employee to attempt some resolution, mediation, or arbitration of the problem. The idea was to turn stressed employees into change agents. Sometimes, an outside counselor would be brought in, but this was usually for debriefing purposes after some major incident. Often, the unit would also be responsible for conducting stress seminars within the department, but again, this was sometimes contracted out. Visit this site for a review of what Police Psychologists have recommended.

TAKING CARE OF EACH OTHER

There exists among police officers a very special bond. One reason for this is that police officers are isolated from the rest of the world by virtue of the kinds of work-related events they experience.

They are bonded in tragedy and the knowledge of how cruel life can be. The everyday stress of being a police officer can lead to serious difficulties when you add personal problems, too. The "image armor" that the public and the media portray also places a burden on police officers. But police officers have problems like anyone else.

When a fellow officer is experiencing personal problems, get involved by suggesting to him or her that help is available. A major contributing factor in police suicide is marital and relationship problems. It is also the number "one" reason why people come go to counseling. The job of policing affects an officer's family more than any other job.

All counseling is confidential except in life threatening situations. Officers are informed about this policy before they talk to us. When an officer is suicidal, the policy in all cases is to remove the officer's weapon and provide medical intervention immediately. There really is no other way.

Many people have considered suicide at some point in their lives. This does not mean that they are "suicidal." Conversely, there are some people who do not talk about suicide before taking their lives.

Each case is unique and not always easy to predict despite the warning signs. However, the early warning signs in and of themselves indicate that intervention and/or counseling may be warranted.

The main reason for police officer suicide is because police officers think they have nowhere to go for confidential help when stressors such as personal problems or the job become overwhelming. Police officers are more hesitant than the average citizen to get help for emotional problems. Because of their roles, they don't trust many people, and they especially don't trust mental health professionals.

Police officers witness some of life's most horrible scenes. Officers get catapulted from tedious duties into moments of terror and danger, and relentless close-ups of human degradation and death and any of these can trigger stress in which can be labeled as Post Traumatic Stress Disorder (PTSD).

There are individual differences regarding the capacity to cope with catastrophic stress so that some people exposed to traumatic events do not develop PTSD, others go on to develop the full-blown syndrome. Depression is a symptom of PTSD and with depression can come suicidal tendencies or the actual suicide as seen with the Vietnam War Veterans.

According to the Center, traumatic events can cause a police officer to experience problems to include emotional reactions, cognitive reactions, physical reactions and interpersonal reactions. Further, the following will list examples of traumatic events (National Center For PTSD, 1999):

- Life-threatening danger or physical harm
- Exposure to gruesome death, bodily injury or bodies
- Extreme environmental or human violence or destruction
- Extended exposure to danger, loss or emotional/physical strain -- extreme fatigue, weather exposure, hunger or sleep deprivation.

Further, the American Counseling Association lends that PTSD can surface several weeks, months, or years after the exposure to the event.

Depression is one symptom and the following are examples of other PTSD symptoms (American Counseling Association, 1999):

- Re-experiencing the event through memories, flashbacks, or dreams

- Crying uncontrollably
- Fear and sense of doom about the future
- Suicidal idealization

Police officers are controlling individuals, therefore, any one or any combination of the examples of the symptoms above can leave a police officer feeling totally out of control. As a reminder, the provided list above is only a few examples of the symptoms that can be associated with PTSD.

PTSD is a disorder far too complicated to narrow into a tidy list or post in a police academy training manual. PTSD is real and the risks of developing this disorder associated with police work warrants further police training in this area.

ORGANIZATIONAL HEALTH

Organizations make or break persons who work in the field. It provides a way for the department to identify problems within their organizational structures. If an organization runs well, smoothly, confidently and consistently, it reduces stress for all employees.

When you walk into an agency, you quickly get a feel for how well it is working. The healthy organization will have a bustle to it, but is not chaos.

In chaotic organizations, files go missing, contacts are not made in a timely manner and people are left hanging in the field, not knowing what to do or what to expect next. There's miscommunication, missed direction and missed support. In order for the stress level to change, the police agency will need to change as well. This will mean a variety of things, police managers must:

- Make sure the department is an efficient organization and it must be operated in a manner which things are handled effectively, quickly and confidently.
- Take the confusion and the stress that it produces out of the organization and its functioning and offer help to those who need it.
- Put people in command who have a clear concept of department goals and not only offer support but be supportive of officers, both publicly and privately.
- Be willing to let the officer teach the department about themselves and learn, from talking to them.
- Ask what provides the best support to them when they've been operating in harm's way. This can be an organized 'buddy' system of talking to fellow officers who've had similar experiences.

- Have a formal referral system to professionals such as counselors, chaplains, fellow officers or be willing to make other arrangements, such as civilians who are appreciative of the officers' work.
- Pay careful attention to an officer's reactions after a highly charged incident and make sure his/her feelings of stress and concern are not discounted or ignored and take appropriate action quickly. Do not assume the officer is okay or will be able to 'shrug it off.'

When working in law enforcement agencies, the first step is to help ensure that the agencies themselves are functioning well, in an emotionally healthy atmosphere. When this is the case, it follows that the officers also will be healthy and relatively stress free.

For any change to occur, the department must be willing to work at it. The commitment must be there from the top-down. Change is only as effective as the participants themselves. If they are sincerely dedicated to change, then they will be able to change for the greater good of every officer in the department.

Any program for health should include a review of existing Standard Operating Procedures (SOPs). Usually the police agency is at the mercy of city or county government entities and it's made very clear that the agency had better be responsive to the community.

However, with so much input from politicians, unintended consequences can arise as a result of the policies these governing bodies set. Even the best intentions at heart will sometimes go sour.

One example of this was in San Francisco. They were interested in developing a better community liaison, so the community appointed a special interest group to help police administrators revise crowd control general orders.

The resulting orders were written with such specificity that an officer couldn't handle a demonstration without abridging one or more of the guidelines and risk being brought up on charges later on.

The guidelines were written in such a way, that an officer couldn't get there from here. The troops looked at the Catch 22s and said, 'Are you kidding?' and then spent a lot of time avoiding and evading situations because they got in less trouble for doing nothing.

Politicians and police administrators also must recognize they have as much responsibility to their human resources as they do to their budgets. They need to review the 'maintenance' budget for the people who are expected to "make up" the department and put more support services in place for their personnel.

Disability outreach is another support service that the department must look at. A department that cares about its officers will provide this for its employees.

If an officer gets hurt on the job or is put on disability for a stress-related problem, the department should check on them periodically. Normally, if an officer is hurt in the line of duty and are gone for a month, the only people who call you are those who want to know when you're coming back.

With disability outreach, someone in the department contacts officers on leave to find out if they need any help. Do they need help with the grocery shopping? Are they looking for a ride to the doctor's office? Do they require assistance caring for their children or have some specific financial needs?

Research has shown those kinds of efforts get people back on the job healthier and faster. If personnel are ignored, the only conclusion they can come to is 'despite how hard I worked and how well I did my job, when I need the organization it isn't there for me. All that talk about how we are a family is a bunch of bull, and I'll never make that mistake again.

Police officers have one of the highest suicide rates in the nation, possibly the highest. They have a high divorce rate, about second in the nation. They are problem drinkers about twice as often as the general population. These facts are warning signals for unseen problems that are not being handled.

Researchers use suicide, divorce and alcoholism rates as three key indexes of stress in a group of people. Clearly, police work is stressful. Hans Selye, the foremost researcher in stress in the world, said that police work is "the most stressful occupation in America even surpassing the formidable stresses of air traffic control."

One study in Detroit concluded that the single, most important factor that led to a police suicide was marital discord.

Studies in New York show that almost all officers are intoxicated at the time they commit suicide. The three indexes of stress are intertwined for police officers. Police officials need to recognize the importance of these facts and provide policies and programs to reduce stress in these areas.

THE BADGE OF LIFE:

A Psychological Survival Plan for Police Officers

The Badge of Life Program is about Mack Trucks and Bumblebees.

The Mack trucks are the catastrophic events that cause posttraumatic stress disorder (PTSD) among police officers and can lead to suicide. They are the "big events" that flatten officers and wound them emotionally. Because they are easily identified, police agencies are quick to identify them: the shootouts, the loss of a partner, the death of a child.

All systems are “Go” when these incidents occur. Everyone pays attention. Debriefings are held. Referrals to licensed professionals are made when appropriate. Prompt action following a "critical incident" can greatly minimize, if not eliminate, the impacts of PTSD.

The Bumblebees are the incidents that aren't “headliners,” that are missed by everyone, however, even the officer. They cause the "cumulative or complex PTSD. They're like bumblebee stings that don't go away. They multiply over the years. These bumblebee stings are the “dirty little secrets” of law enforcement: the shames, the mistakes, the betrayals, abuses and the dark fears only the officer knows and shares with no one, not even peer officers. We call them the "soul wounding" of law enforcement.

After years of these wounds, it may take only a minor incident (or none) to trigger a breakdown or suicide.

Make no mistake, cumulative PTSD is deadly. For every police suicide, there are a thousand more officers suffering from nightmares, anxiety, disintegrating relationships, alcoholism, and worse. Departments also suffer indirectly from cumulative PTSD—through increased sick leave, citizens' complaints, lawsuits and personnel actions.

Every department needs a sound suicide prevention program. Many are excellent. But, if you look at our page, "Suicides," you'll see that far too many suicides during 2008 are occurring as the result of "Cumulative Trauma," not the "Critical Incidents."

We will continue our annual police suicide tracking to better identify these trends. Departments are doing a fine job of spotting and taking immediate action on Critical Incidents.

COMMENTS ABOUT 2008 SUICIDES:

- "It was an absolute surprise."
- "We were shocked."
- "No one saw it coming."
- "He was a happy-go-lucky guy."
- "He was a good kid, quiet kid, no problems."
- "I can't imagine the troubles that led her to do this."
- "There's no story here. We don't know why."

The program should be broadened from "just suicide" to "mental health for all officers." The need to take officers out of the "victim" role, fearing the monster of PTSD and Suicide, and put them in charge of their own psychological well-being is what this program is designed to do. They should be offered a free prescription that's good for a lifetime. Call it a pill; call it a "vaccination"--whatever--that helps immunize them against the aftermath of trauma.

That's all it is--nothing more than an annual, voluntary visit to a therapist, counselor or psychologist of their choice without being labeled. Doing it is crucial, however--regardless of rank, and regardless of whether they think you need it or not.

CAUSES OF SUICIDE: POLICE OFFICER STRESS

Police stress is neither always unique nor obvious. Almost any single stressor in police work can be found in another occupation. What are unique are all the different stressors in the life of a Police Officer.

Many people see the dangers of acute stressors such as post shooting trauma and have programs dealing with them.

These stressors are easy to see because of the intense emotional strain a person suffers. But what about the not so obvious, chronic stressors; are they important?

Chronic stress has at least two effects on people. First, prolonged stress causes people to regress. Their psychological growth reverses, and they become more immature. They rapidly become more childish and primitive.

A common example is a sick person who is miserable and in pain for several days. Any wife will agree that her husband becomes self-centered, whiny and irritable; he expects constant attention and care. He behaves like a young, selfish child. People naturally regress during chronic discomfort.

Second, chronic stress numbs people's sensitivity. They can't stand to continually see human misery. They must stop feeling or they won't survive. The mind has this defense mechanism so people can continue working in horrible situations. If they kept their normal sensitivity, they would fall apart.

As they become insensitive to their own suffering, they become insensitive to the suffering of others.

When treated with indignity they lose not only a sense of their own dignity but also the dignity of others. The pain of others stops bothering them, and they are no longer bothered when they hurt others.

Police officers encounter stressors on every call which can suck their strength mentally and physically. Debilitation from this daily stress accumulates making officers more vulnerable to traumatic incidents and normal pressures of life.

The weakening process is often too slow to see; neither a person nor his friends are aware of the damage being done.

Programs for acute stress are important but are limited in their value for two reasons. First, they are a reaction to trauma that has occurred; an officer is already suffering.

Important support can be given to the officer, but almost nothing can be done to prevent an incident that causes trauma.

How does a police official stop an officer's partner from being killed next to him? Second, few officers are involved in traumatic incidents in a year compared with the whole department which meets stress in call after call.

If chronic stressors are identified, then police officials can take proactive steps. They can do something before an officer becomes another suicide statistic.

Departments should make the effort to stop making artificial distinctions between job-related and personal problems. The two are interwoven and contribute to each other. The end result is a group of people under the greatest stress in any job in America.

Stress plays a part in the lives of everyone. Some stress is not only inevitable, it can be good. For example, the physical stress of “working out” improves your cardiovascular system, and feeling pressure that causes you to study harder for an exam can improve your score.

Police stress, however, refers to the *negative* pressures related to police work. Police officers are not super-humans. Police officers are affected by their daily exposure to human indecency and pain. Dealing with a suspicious and sometimes hostile public takes its toll on police officers and that the shift changes, the long periods of boredom, and the ever-present danger that are part of police work do cause serious job stress.

Dr. Hans Selye’s classic *The Stress of Life* describes the effect of long-term environmental threats he calls “stressors.” Dr. Selye maintains that the unrelieved effort to cope with stressors can lead to heart disease, high blood pressure, ulcers, digestive disorders, and headaches. Stressors in police work fall into four categories:

1. Stresses inherent in police work.
2. Stresses arising internally from police department practices and policies.
3. External stresses stemming from the criminal justice system and the society at large.
4. Internal stresses confronting individual officers.

Police stress arises from several features of police work. Alterations in body rhythms from monthly shift rotation, for example, reduce productivity. The change from a day to a swing, or graveyard, shift not only requires biological adjustment but also complicates officers’ personal lives. Role conflicts between the job—serving the public, enforcing the law, and upholding ethical standards—and personal responsibilities as spouse, parent, and friend act as stressors.

Other stressors in police work include:

- Threats to officers’ health and safety

- Boredom, alternating with the need for sudden alertness and mobilized energy.
- Responsibility for protecting the lives of others.
- Continual exposure to people in pain or distress.
- The need to control emotions even when provoked.
- The presence of a gun, even during off-duty hours.
- The fragmented nature of police work, with only rare opportunities to follow cases to conclusion or even to obtain feedback or follow-up information.

Administrative policies and procedures, which officers rarely participate in formulating, can add to stress. One-officer patrol cars create anxiety and a reduced sense of safety. Internal investigation practices create the feeling of being watched and not trusted, even during off-duty hours.

Officers sometimes feel they have fewer rights than the criminals they apprehend. Lack of rewards for good job performance, insufficient training, and excessive paperwork can also contribute to police stress.

The criminal justice system creates additional stress. Court appearances interfere with police officers' work assignments, personal time, and even sleeping schedules. Turf battles among agencies, court decisions curtailing discretion, perceived leniency of the courts, and release of offenders on bail, probation, or parole also lead to stress.

Further stress arises from perceived lack of support and negative attitudes toward police from the larger society. Stress also stems from distorted and/or unfavorable news accounts of incidents involving police. The inaccessibility and perceived ineffectiveness of social service and rehabilitation agencies to which officers refer individuals act as further stressors.

Women and minority officers face additional stressors. They are more likely to face disapproval from fellow officers and from family and friends for entering police work.

Supervisors, peers, and the public question women officers' ability to handle the emotional and physical rigors of the job, even though research indicates women can do so. The need to "prove themselves" to male officers and to the public constitutes a major stressor for women officers.

Stress contributes not only to the physical disorders previously mentioned, but also to emotional problems. Some research suggests that police officers commit suicide at a higher rate than other groups.

Most investigators report unusually high rates of divorce among police. Although some maintain that researchers have exaggerated the divorce rate among police, interview surveys demonstrate that police stress reduces the quality of family life.

A majority of officers interviewed reported that police work inhibits non-police friendships, interferes with scheduling family social events, and generates a negative public image. Furthermore, they take job pressures home, and spouses worry about officers' safety.

Systematic studies do not confirm the widely held belief that police suffer from unusually high rates of alcoholism, although indirect research has established a relationship between high job stress and excessive drinking. Finally, officers interviewed cited guilt, anxiety, fear, nightmares, and insomnia following involvement in shooting incidents.

In the past, departments either ignored officers with problems or dealt with them informally by assigning them to desk jobs.

During the 1950s, some departments began to formalize their responses, usually by incorporating officer-initiated Alcoholics

Anonymous groups made up exclusively of alcoholic officers. In the 1970s, departments instituted "employee assistance" programs to deal with problem officers, particularly those suffering from alcoholism.

These programs have expanded into a broad range of responses to police stress. Some programs focus on physical fitness, diet, relaxation, and biofeedback to cope with stress. Others emphasize family counseling to involve spouses in reducing police stress.

POST TRAUMATIC STRESS DISORDER (PTSD)

PTSD was first recognized as a diagnostic category in the 1980 Diagnostic and Statistical Manual of Mental Disorders, (DSM III) and initially was created to describe the dramatically altered functioning of traumatized American soldiers who had served in combat zones.

The recognition that the job of a combat soldier could be traumatizing was soon followed by the observation that law enforcement officers, fire, rescue and EMS professionals also serve in high-risk jobs in which potentially traumatizing incidents were routine.

Since that observation, professionals have referred to the high stress and traumatizing aspects of these jobs by a variety of terms:

- "Duty-related stress"
- "Occupational stress"
- "Police stress"
- "Traumatic stress"
- "Critical incident stress"
- "Critical incident/post shooting trauma"
- "Work trauma"

- "Critical incident trauma"
- "Traumatic incident exposure"

Some of these terms group both the stressful and traumatizing aspects of these jobs as one. However, job situations which have the potential to be stressful are different from those which are traumatizing.

Deadlines, unsupportive supervisors, court testimony, traffic jams, and overwhelming workloads have the potential to be stressful, but are not normally traumatizing.

On the other hand, viewing the body of a murdered or burned child, seeing a co-worker die, being one's own death is certain and imminent are job-related incidents which have the potential to be traumatizing.

Post Traumatic Stress Disorder (PTSD) can develop when a person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others. The response to this traumatic event must involve "intense fear, helplessness or horror, PTSD is the only diagnostic category which is defined chiefly by its cause.

Although most people may experience only a limited number of traumatic incidents in their lifetime, law enforcement officers and fire and rescue service professionals are routinely exposed to incidents which involve death, injury or the possibility of injury or death, as well as exposure to the most vile and horrific of scenes and the most depraved of human behavior. It is understandable; therefore, that many of these professionals develop symptoms caused by job-related trauma.

Job-related trauma includes PTSD, partial PTSD (where some symptoms are present, but not enough to be diagnosed with PTSD), and complicated PTSD (a more severe form of PTSD developed from experiencing multiple traumas over an extended time period, particularly those which involve injury and violence).

A number of research articles have looked at the rates of PTSD in high-risk occupations. They found:

- **Law Enforcement Officers** who agreed to be in these studies had rates of PTSD ranging between 3% - 17%. A recent research study found that 45% of officers were having sleep difficulties typical of patients seen in insomnia clinics. In this study, stresses related to their work environment were strongly associated with sleep quality; sleep disturbances were associated with symptoms of PTSD. "These high rates of insomnia are particularly alarming, because sleep deprivation can drastically hinder mental and physical performance.
- **Fire Fighters** in urban departments with 625 Canadian fire fighters, twenty-two percent of fire fighters in U.S. urban departments were experiencing PTSD compared to 17% of Canadian fire fighters. (The U.S. sample had 9% women and 13% paramedics, not found in the Canadian sample). Other researchers have

found 33-41 % of fire fighters were experiencing emotional distress. Rates of PTSD in U.S. fire fighters are similar to those found in a study of German fire fighters, 18.2% and are higher than those generally found in wounded combat veterans, i.e., 20%. These researchers concluded that the high level of PTSD A suggests that this is a serious mental health problem of epidemic proportions in urban professional firefighters in the U.S."

- Twenty percent of **Emergency Ambulance Personnel** have been found to have PTSD. Rates of symptoms, such as depression, anxiety, sleep problems and undue worry range from 20% - 60%.
- Nineteen percent of **Rescue Workers** serving 9-11 sites have been diagnosed with PTSD in the two years following this tragedy.

To develop PTSD, a person must have been exposed to a traumatic incident; however, the majority of people who are exposed to a single traumatic incident do not develop PTSD. Therefore, although exposure to a traumatic incident is the major element in the development of PTSD, other factors interact to play a role in the development of symptoms.

Previous trauma has been found to play a significant role in the development of PTSD following exposure to a new traumatic incident, particularly trauma occurring during childhood and adolescence.

In addition to previous trauma, the development of PTSD is influenced by:

1. The characteristics and nature of the particular work-related traumatic event,
2. The number of traumatic incidents the worker has experienced prior to this incident, as well as the intensity and duration of each of these events,
3. Additional traumatic or stressful events that are taking place in the individual's personal life during the same time period,
4. The level of social support experienced by the worker following the traumatic incident, as well as
5. The employee's age (as age increases, probability of trauma decreases) and
6. Feelings of guilt, humiliation and shame which arise as a result of the incident.

For example, a police officer, fire fighter or EMT who has been exposed to numerous on-the-job traumatic incidents, has a child who is dying from cancer and who was physically abused as a child has a much higher chance of developing job-related traumatic symptoms in working a scene where a father beat his baby to death than a police officer, fire fighter or EMT working the same scene who had no traumatic experiences growing up, is happily married with no children and has been exposed to few job-related traumatic incidents.

BIOLOGICAL FACTORS

Although psychological factors play a role in the development of PTSD, the body's biological response to traumatic incidents is responsible for the development of symptoms common to PTSD.

Exposure to a traumatic incident, particularly those involving threats to survival, activates numerous brain and body systems. Levels of adrenaline, nor epinephrine, thyroid hormones, testosterone and other hormones rise dramatically to prepare the body for "fight or flight".

These hormones increase the heart rate, blood pressure and stimulate numerous other changes in the muscles, senses and other body structures. In most instances physical changes are short-lived and promptly subside.

However, individuals who develop PTSD after a traumatic incident continue to maintain high levels of these stimulating hormones and physical changes as if they are continuing to experience the traumatic incident.

These hormones and alterations in physical functioning commonly lead to other changes in the body, such as problems sleeping and concentrating. In addition, the physical changes freeze the memory of the traumatic event in the present memory, where it is often re-experienced again and again, as if it were re-occurring.

PTSD can cause a profound negative impact on many systems of the body as a result of these biological changes

1. THE CARDIOVASCULAR SYSTEM

- Higher resting and sleep heart rates
- Higher diastolic and systolic blood pressure, blood pressure variability and long-term hyper-responsiveness of blood pressure
- Elevated cholesterol, low-density lipoprotein, triglycerides and reduced high density lipoprotein-when PTSD is chronic.
- Nonspecific ECG abnormalities, atria-ventricular conduction defects and infarctions.

2. A COMPROMISED IMMUNE SYSTEM:

Leading to illness, infections, tumor development, slow wound healing, and the tendency to get sick when stressed.

3. CHRONIC PAIN, BACK PROBLEMS, HEADACHES, GASTROINTESTINAL PROBLEMS:

95% of fire fighters and paramedics indicated that they had a pain complaint in the week prior to the study (Beaton, Murphy; Pike, 1996). A survey of law enforcement officers found that in the month prior to the survey, 26% had headaches, 43 % had backaches, and 22% had digestive difficulties.

Most law enforcement officers and fire and rescue service professionals find their jobs to have many positive and rewarding facets, including the opportunity to help others, to make a difference in someone's life and to change the world in a positive manner.

The men and women who serve in these underpaid and generally undervalued professions often die or are critically injured attempting to help citizens that they have never met.

In doing their jobs, these individuals can develop debilitating symptoms after working traumatic job-related incidents.

These symptoms can lead to poorer job performance, an increased potential to be injured or killed on-the-job, increased potential for problems with alcohol, as well as problems which impact on their personal life.

Clearly, these professionals, their managers and their friends and family would all benefit from an understanding of job-related trauma and of treatment which can quickly restore their ability to function on their jobs at peak performance levels.

There are particular incidents in each of these professionals that seem to be more likely to be traumatizing than others

POLICE TRAUMA

Residuals of Police Occupational Trauma

This material examines after-effects of trauma in police work and draws upon a more extensive military literature to highlight problems and issues in police work. The exposure of police officers to trauma, while generally not as intense as combat, may be for a period of twenty years or more. With such long term exposure, officers who separate from policing are still likely to experience symptoms associated with Post Traumatic Stress Disorder (PTSD).

Police officers are in many ways similar to military combatants, experiencing events in their work that involve treachery, violence, and death.

It is argued here that police officers with long term exposure to trauma may, like the soldier, experience the after-effects of trauma long after separation from the war. For some, symptom-logy may be full-blown, for others, a residual condition may exist.

With return to civilian life, police officers take with them emotional baggage remaining from traumatic work experiences. Solomon (1992) suggests that persons who leave

traumatic situations tend to generalize avoidance to stimuli resembling the trauma in their new environment.

As a result they constrict their scope of activity, social ties and civilian functioning. This is viewed as a detrimental pattern of residual trauma carried over into the new environment of the separated police officer. The officer's family and close friends may also contribute to this problem by adapting themselves to this widened avoidance.

Officers may experience full or residual PTSD at the time of their separation from service. The "residual stress hypothesis" proposes that prior trauma exposure leaves residual effects which are widespread, deep, and long lasting (Figley, 1978). Solomon (1989; 1990; 1993) in studies of Israeli Veterans concluded that the trauma of combat leaves marked stress residues among combatants.

On the whole, Solomon found that trauma-related symptomatology declined over time, but psychiatric symptomatology remained stable. Her conclusion was that war becomes internalized and continues to cast a shadow on the lives of veterans.

Repeated trauma during the combat experience appears to be progressively more severe and limiting and leads to the deepening of symptoms. Scaturro and Hayman (1992) report clinical observations of separated combatants as displaying acute generalized anxiety, worry, and depression.

Many officers' seemed to experience a strong desire to resolve whatever ongoing psychological conflict they struggled with regarding the war. Yet is possible that, unless diagnosed with full PTSD, those presenting with partial symptoms may not receive the attention they deserve, laying a foundation for future and more entrenched difficulties.

PTSD morbidity rates should include those individuals who experience partial as well as full PTSD symptoms. It is necessary to attend to subclinical phenomena because individuals who only partially meet the full set of diagnostic criteria for PTSD also contribute to the level of morbidity.

The terminology of the person being in a "residual state" is used to describe the disorder. Individuals who, on a life-time basis, never meet the full criteria for PTSD are indistinguishable from those who do.

Persons who experience long term exposure to trauma and separate may have what is described as "post-traumatic character disorder", what is known as "complicated PTSD". These categories would better describe individuals who have exposure to repetitive, prolonged trauma.

Symptoms of persons chronically exposed to trauma appear to be amplified. Chronically traumatized people are hyper-vigilant, anxious and irritated, and without any recognizable baseline of "calm".

Studies of returning POWs exposed to repetitive trauma document increased mortality as a result of homicide, suicide, and suspicious accidents. The general conclusion that can be drawn from these studies is that, although not presenting with full PTSD following isolated traumatic episodes, repeat exposure can, over time, increase risk status.

Consequently, it becomes necessary to consider the wider implications of such experiences, including the risk becoming addicted to traumatic incidents and carrying the effects of work experiences beyond the point of separation from police work.

ADDICTIONS TO PRIOR OCCUPATIONAL TRAUMA

Police officers spend much of their careers preparing for the worse. Training generally emphasizes the "worst possible case scenario" and prepares officers to deal with that event only. As a result, many officers become occupationally and personally socialized into approaching situations with considerable suspicion.

This defensive stance towards life activities can become an obsession and a liability for officers. As one result of learned defensiveness, it is not uncommon to find a proportion of what is referred to as "action junkies"; officers who are addicted to risk behavior. Since police work is mostly routine, it is also interspersed with acts of violence, excitement, and trauma. Some officers become addicted to this excitement and cannot function effectively without it when they separate from service.

Addiction to highly stimulating and dangerous encounters has been explored by several authors. Two factors which appear to exacerbate the addiction of those exposed to such encounters.

The first is the existence of a series of mutually reinforcing excitatory states beginning with multiple combat experiences and the recurring exciting recall of such experiences. Such "highs" are frequently followed by a depression of a "downer" mood which borders on numbing. Such "highs" in his clinical experiences with Vietnam veterans:

The experiences appear to be highly reinforcing in the presence of a history of multiple combat exposures and seem to interact with other related excitatory experiences such as a compulsive need for presence of readied weapons, reenacting combat-like activities, seeking physical confrontation, and self-administered substance abuse patterns.

An "addiction to traumatic re-exposure" is theorized that of an endogenous opioid release could account for the calm upon re-exposure to stress that is reported by many traumatized persons.

Increased physiological arousal of traumatized persons decreases their ability to assess the nature of current challenges, and interferes with the resolution of the trauma.

Such persons have difficulty in making calm and rational decisions and tend to rely on instant action rather than thought. The arousal of intense emotional response to traumatic events leads to hypersensitivity and impaired potential for habituation and relearning.

The "combat rush" is a conditioned emotional response to trauma. While war is frightening and traumatic, combat may be characterized by periods of intense pleasurable stimulation. These experiences may be reinforcing, leading persons to "seek out" similar trauma. The "rush" experienced by traumatized persons as a response to dullness and boredom in life. They crave excitement as an alternative to a calm lifestyle.

An interesting hypothesis by Gilmartin (1986) purports that adrenaline addiction may be a result of learned behavior.

The author suggests that police work creates a learned perceptual set which causes officers to alter the manner in which they interact with the environment. Statement by officers that "cop work gets into the blood" is provided as evidence describing a physiological change that becomes inseparable from the police role.

The interpretation of the environment as always dangerous may subsequently reprogram the reticular activating system and set into motion physiological consequences.

This will be interpreted by the officer as a feeling of energy, rapid thought patterns, and a general "speeding up" of physical and cognitive reactions.

Gilmartin adds that police work often leads officers to perceive even mundane activities not from a neutral physiological resting phase, but from a state of hypervigilance, scanning the environment for threats.

Once a hyper-vigilant perception set becomes a daily occurrence, officers alter their physiology daily without being exposed to any types of threatening events. Thus, officers may continuously be on a physiological "high" without stimulation.

PRIOR TRAUMA AND THE LOSS OF GROUP SUPPORT

A police subculture resembles military sub-groups, where teamwork is necessary for survival against the enemy. One police officer commented that "the job is too tough without having to battle the public, the administration and the courts by yourself. It is not easy for police officers to leave this interpersonal web of protection.

One of the major regrets of separated officers is that they no longer feel a part of the department. It is as if someone had removed an integral part of their personality.

Separation and loss of support from the police group may serve to increase the already heightened physiological and psychological state associated with PTSD.

Social interactions with such groups are important after a traumatic event to reduce psychological symptomatology. This function is the "trauma membrane" effect, where a network of trusted, close persons served to protect traumatized persons from further distress.

Strong social ties, which resulted from association with others of similar characteristics, lifestyles, and attitudes, were successful in ameliorating distress. The near-group "social context" is an important element in recovery from distress. A cohesive social network helps to reduce the effects of trauma stress.

The absence of close ties has also demonstrated effects on psychological distress. It is suggested that members of dissimilar groups who experience trauma do not feel a sense of "connectedness" and therefore do not cope well with the traumatic event. Victims who experience isolation from strong cultural ties had an increased vulnerability to traumatic stress disorders.

Military wives who experienced isolation from cohesive military social groups did not cope well with emotional distress. Military families who experience prolonged absences of spouses, isolation from the civilian community, and potential loss of a family member to war do not cope well with trauma.

The powerful role of social support, particularly in groups with a strong, cohesive identity, in ameliorating distress has been acknowledged.

Upon separation from police service, officers exposed to trauma will lose ready access to the group and may no longer be able depend on other officers, the police agency, or police benevolent groups to reinforce a sense of understanding and recognition of their trauma.

LEFT-OVER TRAUMA

For police as well as military families, traumatic duty experiences and emotions that follow are a genuine disruption of emotional attachment and bond. Married soldiers had higher rates of PTSD than unmarried soldiers.

Many of the added pressures of marriage, including leadership, companionship and taking care of one's family and other marital responsibilities carry an emotional detachment. Married soldiers carried traumatic symptoms back to the family which made many of these responsibilities seem more difficult.

Another factor that police officers must face upon separation is getting another job because many officers who leave at mid-life are too young to actually retire. For the officer who has been exposed to trauma, job related concerns may be affected in different ways.

Persons involved with trauma in their lives often devote considerable amounts of psychic energy to deal with those traumas. This leaves the person void of energy to direct towards career and marriage.

The lack of adequate and satisfying work for the trauma-exposed person has its emotional costs in the family. Often there is an "assault" upon the person's sense of accomplishment and place in the family. The authors add that therapy may help the traumatized person to reappraise previously unexamined aspects of their lives, including traumatic experiences.

Police family members may have never experienced or cannot fully understand the nature of trauma that officers faced in their daily work. What they see are the effects of such trauma. A therapist must assess the impact of two phenomenological separate worlds which have collided in the family system". The integration of these two systems is necessarily the way to family well-being.

Retiring or leaving police work may not leave officers or their families free of the haunting vestiges of trauma.

Recognition of this fact is needed among persons who work in this occupation. There are no easy answers to this dilemma, but effective intervention during the police career may help.

Officers separated from the force may benefit from therapy which reorients the officer's perceptual set into other roles. As a civilian, the officer must learn to adjust to a role which does not involve constant scanning for threats.

Therapy may require teaching the officer to learn new reactive patterns. In addition, the wider family consequences of trauma work must be recognized. More research into the implications of repetitive and addictive traumatic stress phenomena is required to augment support and therapeutic strategies.

REACTIONS AFTER TRAUMA

Following a traumatic event, people, including police officers typically describe feeling things like relief to be alive, followed by stress, fear, and anger. They also find it difficult to stop thinking about what happened.

Stress reactions are what happen to most people and it has nothing to do with personal weakness. Many will also exhibit high levels of arousal. For most, if the following symptoms occur, they will slowly decrease over time.

Remember that most trauma survivors (including veterans, children, and disaster rescue or relief workers) experience common stress reactions. Understanding what is happening when you or someone you know reacts to a traumatic event will help you be less fearful and better able to handle things. These reactions may last for several days or even a few weeks and may include:

- Feeling hopeless about the future & detached or unconcerned about others
- Having trouble concentrating, indecisiveness
- Jumpy & startle easily at sudden noise
- On guard and constantly alert
- Having disturbing dreams/memories or flashbacks
- Work or school problems

You may also experience more physical reactions such as:

- Stomach upset, trouble eating
- Trouble sleeping & exhaustion
- Pounding heart, rapid breathing, edginess
- Severe headache if thinking of the event, sweating
- Failure to engage in exercise, diet, safe sex, regular health care
- Excess smoking, alcohol, drugs, food
- Worsening of chronic medical problems

EMOTIONAL TROUBLES SUCH AS:

- Feeling nervous, helpless, fearful, sad
- Feeling shock, numb, unable to experience love or joy
- Avoiding people, places, and things related to the event
- Being irritable or outbursts of anger
- Becoming easily upset or agitated
- Self-blame or negative views of oneself or the world
- Distrust of others, conflict, being over controlling
- Withdrawal, feeling rejected or abandoned
- Loss of intimacy or feeling detached

It is easier to recover with help from personal support systems such as family and friends, when you are ready to talk. Recovery is an ongoing gradual process. It doesn't happen through suddenly being "cured" and it doesn't mean that you will forget what happened.

For most, fear, anxiety, remembering, efforts to avoid reminders, and arousal symptoms, if present, will gradually decrease over time. Most people will recover from trauma naturally.

If your emotional reactions are getting in the way of your relationships, work, or other important activities you may want to talk to a counselor or your doctor. Good treatments are available.

COMMON PROBLEMS THAT CAN OCCUR

Posttraumatic Stress Disorder (PTSD): PTSD is a condition that can develop after someone has experienced a life-threatening situation. People with PTSD often can't stop thinking about what happened to them.

They may try to avoid people and places that remind them of the trauma and may work hard to push thoughts of the event out of their head.

Feeling numb is another common reaction. Finally, people find that they have trouble relaxing. They startle easily and are often on guard.

Depression: Depression involves feeling down or sad more days than not, and losing interest in activities that used to be enjoyable or fun. You may feel low in energy and be overly tired. People may feel hopelessness or despair, or feeling that things will never get better.

Depression may be especially likely when a person experiences losses such as the death of close friends. This sometimes leads a depressed person to think about hurting or killing him or herself. Because of this, it is important to get help.

Self-blame, guilt and shame: Sometimes in trying to make sense of a traumatic event, people take too much responsibility for bad things that happened, for what they did or did not do, or for surviving when others didn't. Remember, we all tend to be our own worst critics and that guilt, shame and self-blame are usually unjustified.

Suicidal thoughts: Trauma and personal loss, can lead a depressed person to think about hurting or killing themselves. If you think someone you know may be feeling suicidal, you should directly ask them. You will NOT put the idea in their head. If they have a plan to hurt themselves and the means to do it, and cannot make a contract with you to stay safe, try to get them to a counselor or call 911 immediately. National Suicide Prevention Lifeline <http://www.suicidepreventionlifeline.org/> 1-800-273-TALK (8255)

Anger or aggressive behavior: Trauma can be connected with anger in many ways. After a trauma people often feel that the situation was unfair or unjust. They can't comprehend why the event has happened and why it has happened to them. These thoughts can result in intense anger.

Although anger is a natural and healthy emotion, intense feelings of anger and aggressive behavior can cause relationship and job problems, and loss of friendships. If people become violent when angry, this can just make the situation worse as people can become injured and there may be legal consequences.

Alcohol/Drug abuse: Drinking or "self-medicating" with drugs is a common way many cope with upsetting events to numb themselves and to try to deal with the difficult

thoughts, feelings, and memories related to the trauma. While this may offer a quick solution, it can actually lead to more problems. If someone close begins to lose control of drinking or drug use, it is important to assist them in getting appropriate care.

Recovery: Immediately following a trauma, almost everyone will find themselves unable to stop thinking about what happened. Many will also exhibit high levels of arousal. For most, fear, anxiety, remembering, efforts to avoid reminders, and arousal symptoms, if present, will gradually decrease over time.

Use your personal support systems, family and friends, when you are ready to talk. Recovery is an ongoing gradual process. It doesn't happen through suddenly being "cured" and it doesn't mean that you will forget what happened.

Most people will recover from trauma naturally over time. If your emotional reactions are getting in the way of your relationships, work, or other important activities you may want to talk to a counselor or your doctor.

THE STRESS FACTOR

Many things contribute to the law enforcement stress factor, and not all of them have to do with a lack of communication. Low pay, shift work and working with the less positive side of humanity all chip away at an officer's coping skills over time.

No one calls the cops to say they like them and think they're great, they call them when they have problems with no regard to how the officer may feel.

Stress is also cumulative, if nothing is done, and an officer fails to take care of himself and do everything he can to be strong, physically, emotionally and psychologically, then it's more likely to build up. But if an officer is exercising, eating right, has a good support system in place and spirituality, his chances of being traumatized by cumulative stress are much lower.

Stress is a problem that cannot be ignored by the police organization and it's critical that all members of a department and department heads recognize the signs of PTSD.

The "T" in TRAUMA stands for trauma, and this trauma must be significant enough for the person to be fearful of his or her own life. The "R" signifies recall. In other words, the individual is experiencing flashbacks or reliving the event.

He may appear very frightened or take cover because he believes the scenario is happening right then. The affected individual also may be plagued by nightmares.

The "A" represents avoidant. The officer may become socially withdrawn and avoid specific places, people and even television shows. He may not wish to discuss topics reminiscent of the trauma. And finally, the "H" denotes hypervigilance.

In other words, the individual experiences atypical distress emotions when exposed to situations that trigger a memory from the initial event. The officer may appear paranoid, experience heart palpitations or sweat profusely.

Other indicators include losing time, calling in sick frequently, impaired memory and concentration, anxiety, becoming more accident prone, being short tempered, gaining or losing weight, and substance abuse.

When signs crop up, supervisors need to check in with the officer and inquire whether he faces additional stressors at home. Does he have a new baby? Is his spouse sick? Are there problems in his marriage? If there are circumstances that suggest other stressors then steering the individual toward appropriate services should occur immediately.

Because several risk factors may be present in the officer who develops PTSD that supervisors may not be aware of and supervisors should take note of any prior events that might contribute to stress issues later on. If there is a history of trauma such as physical or sexual abuse, a family history of mental illness, these things may affect his ability to cope with stress.

Many agencies lack a clear sense of how to help struggling officers and react punitively when such problems arise. Management should be trained to recognize stress-related problems and assist the officer in getting help "without fear of losing his job or being put on leave without pay.

It's critical for the department to develop and encourage officers to use a support network or program, made up of other police officers, chaplains, therapist or even an outside counselor. Having someone to talk to is critical for the police officer.

Unfortunately, many departments lack such resources or peer support programs. Some health insurance allows officers to seek outside care but nothing in the way of support. They normally do not have anything to help officers with PTSD and until recently lacked policies on how to deal with it," he recalls.

Properly trained peer support groups such as CISM can engage in active listening, which encourages people to verbalize what's going on with them. Such support teams do not evaluate what is being said, lead the conversation or problem solve. They help the affected individual determine the issues, prioritize and look for concrete steps to improve their situation.

POLICE STRESS AND SUICIDE

Police stress in general and police suicide in particular has been ignored, misrepresented, and inadequately studied.

In part this is because far too many police suicides have been covered up, often as the article suggests, because of embarrassment, life insurance considerations, and potential law suits.

The result of under-reporting has been that remedial actions that could have saved lives have not been taken, and too many police departments have not developed police stress programs and critical incident debriefing procedures.

The percentages of suicide in law enforcement are staggering by any measure no matter how unreliable. But even one police suicide is one too many. The fact is that virtually all suicide caused by depression and anger is preventable with appropriate intervention.

Police officers are no different than anyone else when it comes to the vicious cycle of despair that accompanies, and is part and parcel of suicidal depression as depression feeds on itself. Instead of recognizing that feeling hopeless is a symptom of depression, you interpret the feeling as a fact, and begin to think thoughts that support the fuel the feeling and make it worse.

Unfortunately police officers tend not to avail themselves of psychotherapy because they see going to a counselor as a sign of weakness. They also may not trust therapists because the therapists they've met have not been the kind of people they feel they can talk to.

There's one form of suicide that can be remedied without a police stress therapist or counselor, and that's suicide caused by insensitive police administration. If chiefs and command officers paid more attention to morale, and were alert to signs of distress in the ranks, there would be less police officer depression.

In instances when officers feel betrayed or abandoned by their bosses and hung out to dry, for whatever reason, it is common first for anger to emerge, but depression usually lurks just below the surface. Outrage and resentment, often justified, can mask the underlying depression.

While it sounds adolescent, and police officers in particular rarely admit thinking it, suicide is often preceded by the thought: I'll show them. Police suicides that occur on duty are often the result of rage at the police bureaucracy.

Officers can become so involved in visualizing the scene of being discovered dead at the wheel of their cruiser that it doesn't really sink in that they won't be around to witness the goings on.

Often police officers succumb to the embarrassment and humiliation of being caught in illegal activities by committing suicide. A police officer who faces going to prison is always a high suicide risk.

There's really no such thing as run-of-the-mill police stress. Police officers are so adept at pretending everything is okay that what appears to be minor stress can really be the tip of

the iceberg. Every warning sign of stress must be taken seriously. It is better to err on the side of caution than ignore a problem that could result in the death of an officer.

Police officers have one of the highest suicide rates in the nation, possibly the highest. They have a high divorce rate, about second in the nation. They are usually problem drinkers about twice as often as the general population. These facts are warning signals for unseen problems that are not being handled.

Police work is "the most stressful occupation in America even surpassing the formidable stresses of air traffic control."

CHRONIC STRESS

First, prolonged stress causes people to regress. People regress during chronic discomfort.

Chronic stress numbs sensitivity. When an officer sees human suffering, they mentally tell themselves that they must stop feeling or they won't survive. The mind has this defense mechanism so people can continue working in horrible situations.

If they kept their normal sensitivity, they would fall apart. As they become insensitive to their own suffering, they become insensitive to the suffering of others. When treated with indignity they lose not only a sense of their own dignity but also the dignity of others.

Police officers encounter stressors during every call. When stress accumulates it makes officers more vulnerable to traumatic incidents and normal pressures of life. Often, neither the officer nor his friends and family members are aware of the damage being done.

PROGRAMS FOR ACUTE STRESS ARE LIMITED IN THEIR VALUE FOR TWO REASONS:

1. First, they react to trauma that has occurred; and if an officer is already suffering severe damage can occur. Support can be offered, but almost nothing can be done to prevent an incident that causes trauma. How does a police official stop an officer's partner from being killed next to him?
2. Second, few officers are involved in traumatic incidents in a year compared with the whole department which meets stress in call after call.

If chronic stressors are identified, then police officials can take proactive steps. They can do something before an officer becomes another suicide statistic. Departments should stop making artificial distinctions between job-related and personal problems.

The two are interwoven and contribute to each other. The end result is a group of people under the greatest stress in any job in America

FOSTERING COPING BEHAVIORS

Law enforcement can be a very lonely and dangerous job. An officer's shift may begin quietly and erupt into violence without warning.

A single traumatic incident, be it the death of a fellow officer, child neglect call or an officer-involved shooting, can send officers into a downward spiral where without help they will hit rock bottom.

Because of this, it's also important for organizations to educate officers on what symptoms they may expect in the days, months and even years following a tragic incident, and inform them about where they can turn for help.

Education is a tool and can be considered a treatment. Education helps officers cope with difficult situations and helps the department recognize when there is an immediate need. They learn what to look for, how to recognize problems and what to do when they are having trouble. Police officers often do not realize these behaviors are not part of normal routine.

PTSD can be avoided and prevented by someone simply sitting down and talking to the officers or speaking in a lecture or workshop. You want to catch PTSD early. If it becomes chronic, it can be difficult to treat.

Interventions quickly after an incident, where a peer or a counselor sits down with the officer and asks questions such as: "What did you see?" "What did you smell" "What did you hear?" "What are you thinking about?" Is the key for prevention techniques for PTSD.

Often officers are thinking something that is not accurate, it's scary but it's not accurate. If you give officers a chance to talk it out, they can realize that what they are seeing, thinking or whatever isn't what actually went down.

If an officer took time off of work to attend his son's basketball game the night his partner was killed, for instance, he may come to believe if he had worked that shift, he could have saved him.

The department needs to help the officer entertain an alternative way of looking at the incident and dealing with it. They must recognize that they are not doing themselves any good by continuing maladaptive thinking and behaviors.

WARNING SIGNS

Sometimes, a suicidal person may indicate that they plan to commit suicide, here are some signs you should know about.

- Has the person had a close relative commit suicide?
- Has the person attempted suicide in the past or threaten it now?

DOES THE PERSON SHOW SIGNS OF DEPRESSION, SUCH AS?

- Mood changes (gradual, or sudden)
- Changes in behavior (gradual or sudden)
- Gain or loss of weight
- Lack of interest in a favorite activity
- Lack of interest in life in general
- Changes in a child's behavior patterns
- Trouble sleeping, or excessive sleeping
- Poor concentration or indecisiveness
- Withdrawing from others
- Lack of self-confidence or low self-esteem
- Tiredness
- Agitation
- Hopelessness

IS THE PERSON:

- Making plans for the care of children?
- Giving away valued possessions or pets?
- Suddenly calling up or visiting people he/she hasn't seen in a long time?
- Showing sudden interest in insurance, wills, burial plots, etc.?
- Showing sudden calmness: the "calm before the storm"?
- Expressing hopelessness, either about themselves, or other things?
- Abusing alcohol?
- Abusing drugs?
- Going through a divorce, break-up of a relationship, etc.?
- Being investigated on charges of crime or serious misconduct?

MYTHS ABOUT SUICIDE

"People who talk about suicide won't really kill themselves"

People who commit suicide often talk about killing themselves. They may come right out and say "I'm going to kill myself," or they may hint at suicide: "Things would be better if I weren't around." Take all threats of suicide seriously.

"If you talk about suicide to someone who may be suicidal, you may encourage them to commit suicide."

If you are worried that someone is thinking about committing suicide, or is suicidal, talking to them about it will cause them to do it.

THE STIGMA OF SUICIDE

In the general population, a stigma surrounds suicide. This stigma can be exaggerated when the victim is a police officer. A lot of times, other officers think that officer was weak or had a psychological problem.

It is very common for the other police officers, especially the partners, to try and find fault with the officers who killed themselves.

This is a natural reaction because if they can't find fault, it could happen to anyone. The stigma surrounding suicide often seeps into the department's response to the family of the deceased.

DEPRESSION

Sadness is a part of life. Often, we feel sad because of stressful things that happen to us (the death of a loved one, the breakup of a relationship, serious illness, the loss of a job). Depression is sadness that is much more intense than, or lasts much longer than, the ordinary sadness we might expect to feel under the specific circumstances.

Also, while we may feel depressed as a reaction to a specific, stressful event in our lives, we can also be depressed even though no "major" stressful event has happened.

One difference between depression and ordinary sadness is that depression often impairs our ability to function. Depression results from chemical action in the brain, which is why anti-depressant medications can help treat it.

Someone who suffers from depression is said to be "clinically depressed," or to have a "Bipolar disorder." Note that a depressed person may not be depressed all the time, but may simply be depressed at certain times.

Some people even have depression that alternates with extreme "up" moods: they are said to have a "bipolar disorder," or be "manic-depressive." Even people with a bi-polar disorder may be depressed enough to be suicidal when they are having a depressive episode.

DEPRESSION MAY HAVE A NUMBER OF CAUSES INCLUDING:

- The effects of some medications
- Alcohol or drug abuse
- Certain diseases

Because of this, it is usually a good idea for someone who suffers from depression to see a doctor to make sure that the depression does not have a medical cause.

IMPORTANT THINGS TO KNOW ABOUT DEPRESSION

- Being depressed does not mean that you are "weak" or "crazy"
- Professional help is very important in dealing with depression
- Depression can be successfully treated with medication and counseling in the large majority of cases
- You can still keep your job even though you are being treated for depression

Having someone you know commit suicide can be devastating. (It can be especially difficult for police officers, because they are programmed to "be in charge," and may feel that they have to, and can, "fix everything.")

YOU MAY FEEL

- Sad or depressed at the loss of a person that you knew and cared about
- Guilty or responsible for the person's death because you "did something" to "cause" it
- Guilty or responsible for the person's death because you didn't realize that they were suicidal, or couldn't prevent the person from committing suicide
- Angry at yourself because you couldn't prevent the person from committing suicide
- Angry at the person who committed suicide because
- They "left" you, possibly without warning
- They didn't trust you enough to tell you about their problems
- They caused problems in your personal or work life by committing suicide
- They left a "mess" or "loose ends" for you to "clean up"
- Guilty because you are angry at the person who committed suicide

PERFECTLY NORMAL FEELINGS

- It is okay to be sad, upset or angry about what happened
- No one but the person who committed suicide is "responsible" for it
- Neither you, nor anyone else except the person who committed suicide, could absolutely have prevented it

It is very rare that someone dies by suicide because of one cause. Thus, there are usually several causes, and not just one, for suicide.

Many people die by suicide because depression is triggered by several negative life experiences, and the person does not receive treatment – or does not receive effective treatment – for the depression. (Some people need to go through several treatments until they find one that works for them.)

Some of the negative life experiences that may cause depression, and some other causes for depression, include:

- The death of a loved one.
- A divorce, separation, or breakup of a relationship.
- Losing custody of children
- A serious loss, such as a loss of a job, house, or money.
- A serious illness.
- A terminal illness.
- A serious accident.
- Chronic physical pain.
- Intense emotional pain.
- Loss of hope.
- Being victimized (domestic violence, rape, assault, etc).
- A loved one being victimized (child murder, child molestation, kidnapping, murder, rape, assault, etc.).
- Physical abuse.
- Verbal abuse.
- Sexual abuse.
- Unresolved abuse (of any kind) from the past.
- Feeling "trapped" in a situation perceived as negative.
- Feeling that things will never "get better."
- Feeling helpless.
- Serious legal problems, such as criminal prosecution or incarceration.
- Feeling "taken advantage of."
- Inability to deal with a perceived "humiliating" situation.
- Inability to deal with a perceived "failure."
- Alcohol abuse.
- Drug abuse.
- A feeling of not being accepted by family, friends, or society.
- A horrible disappointment.
- Feeling like one has not lived up to his or her high expectations or those of another.
- Bullying. (Adults, as well as children, can be bullied.)
- Low self-esteem.

Again, the above causes may trigger depression, and untreated depression is the number one cause for suicide.

Suicides during the Christmas/New Year's holiday period are no secret to veteran law enforcement officers.

What may come as a surprise is the high number of officers that, to use the old phrase, "eat their gun." The stressors of the holidays and police work form a deadly combination that leads some officers to kill themselves.

Over the years, police suicides have been swept under the rug even more than they are today. Officers resisted the idea of counseling for fear of being blackballed in the law enforcement profession. The negative connotation still persists.

Here are some sobering statistics: police officers and deputy sheriffs by any measure far surpass the National Center for Disease Control general population number of 12 per 100,000 people. Different studies have taken a stab at pinpointing the number. A New York City Police study revealed a rate of 30 per 100,000. Another study, by the National

Association of Chiefs of Police, detailed that officers die at their own hands at a rate double of that from the actions of others while in the line of duty.

It is estimated that some 300 officers "eat their gun," or use some other means, to end their own lives each year. The figure is one that should get people's attention, but for the most part it hasn't. Police executives and instructors dedicated to officer survival issues need to address this issue as critical to an officer's survival.

Several factors contribute to officers being in the top rankings of suicide rate charts. Officers tend to see people at their worst. The developing cynicism lends itself to desperate acts. They do not regularly interact with the majority of the population that is good, hard-working, and law-abiding.

Officers also have rotating shifts that tends to also separate them from their family, friends and other areas of socialization. Alcohol and substance abuse become self-medicating methods used in lieu of dreaded mental health assistance.

And of course, there is the ever-present availability of that firearm on their belt. Many people can ride out the momentary impulse to kill themselves due to the not having a gun with them most of the time. Not so for law enforcers who, especially when combined with their unique job stressors, have that ever-present instrument of deadly force.

So what can we do? Be alert. Friends and family of officers should watch for changes in behavior and other warning signs. They should not be afraid to intervene and act when suicidal tendencies are suspected.

More than any other occupation, law enforcement is an emotionally and physically dangerous job. Police officers continually face the effects of murder, violence, accidents and disasters during life's tragedies exact a heavy toll on police officers and their families.

The results are alarming: high divorce rates, suicide, domestic violence, heart attacks, cancer, depression and alcoholism. Law enforcement, the media, and the public foster the myth that police officers can experience trauma and violence without suffering any ill effects. Research has shown just the opposite: when stressors are prolonged and overwhelming, an individual's ability to cope becomes difficult.

Suicide is a serious problem that is not often talked about in police circles. It is very hard, if not impossible, for us to understand why someone chooses to end his or her life. Shock and disbelief are usually the first responses to an officer's suicide.

REACTIONS AFTER A SUICIDE

Reactions to suicide can sometimes be irrational and destructive. Remember, no one can "second-guess" or take responsibility for another person's reactions to the events that are happening in his/ her life. Suicide is not the only response to life's problems. Suicide is the ultimate act of violence that hurts many people around the victim.

Anger and guilt are natural and normal responses to suicide. Yet, these emotions are very difficult for police officers to talk about. However, many friends and family members of the suicide victim talk about having feelings of guilt for not preventing the suicide. They believe that they should have seen it coming.

Sometimes suicide is an impulsive act, one that has not really been planned out by the victim. A major difference between the general public and police officers is the immediate availability of a weapon. When a police officer decides to commit suicide, he or she doesn't have to go out and get a gun - the means are available at all times. In fact, the number "one" method of suicide by police officers is their gun.

Anger is normal after suicide and should be expressed - it's part of the grieving process. Sometimes the anger is directed towards the victim. It doesn't mean that you didn't love the person because you're angry. I don't believe that people who commit suicide understand the pain it causes for family and friends.

For children, a parent's suicide leaves a lifetime legacy of torment. Many child survivors have told me that their parents didn't love them enough to stay and persevere through life's problems.

Sometimes anger is misdirected at family members, friends, colleagues or organizations. Anger can be very isolating since it can distance people from each other.

It's not pleasant being around someone who is always angry. Talk about your anger to someone who can help you understand it.

Otherwise you may say or do things that you will regret later on. You have every reason to be angry - that's okay. (Anger is often a common emotion for police officers anyway). What's not okay is taking out your anger unfairly on yourself or others.

Your anger is not going to go away on its own. Unless you find a way to express it, you may suffer emotionally or physically from its effects. You could become verbally abusive to citizens or family members.

When you find yourself short on patience, quick to lash out and criticize or lethargic and emotionally down, it's time for professional help. Another response is emotional numbing where you just don't feel anything.

Reactions after a violent suicide, especially for those who find the person, are more complicated and intense. While most police officers have seen the aftermath of violent suicides, it's much different when the victim is a fellow officer.

The shock and horror upon discovering the victim and the image that is engrafted in the mind can be overwhelming. Grief becomes more complex when this occurs. The mental picture will remain with the person sometimes accompanied by flashbacks, nightmares and thoughts.

Police officers all too often hide their feelings so they won't appear weak. But emotions are normal and in order to heal, you must unburden what you have had to endure.

Discovering the body of a friend or loved one is shocking and painful. It's an experience that you will never forget. It is important to share the powerful emotions that this experience brings.

HEALING & RECOVERY

The Chaplain must be gentle with fellow officers. Grieving is a long process, one that is very personal and sometimes difficult to understand.

Talking to friends, co-workers, family and Chaplains about the suicide will help ease the pain. While traditionally this is very hard for police officers to do, it's a vital part of healing and recovery.

Unlike a "line of duty" death, police suicides are often enshrouded in shame and silence. While social attitudes have become more informed about suicide, there remains a stigma that people must deal with. All too often people are quick to form judgments.

Survivors are left to somehow make sense of this terrible tragedy maybe even feeling responsible in some way for contributing to it.

It is important to discourage rumors about the "reason" for the suicide. While seeking to place blame on others is a natural response, it's not helpful in the long run. Life is very complicated and there are usually several contributing factors in a suicide death.

To think that one person or one event is the sole cause is not consistent with what we know about suicide. We can never know for sure what is going on in another person's mind any more than we can know all the reasons that cause a person to choose suicide.

CLOSURE

No matter what a person's belief or feelings are about suicide, funerals are an important ritual for closure and acceptance of the reality that the person has died. It is a final "goodbye" that we share with each other.

TAKING CARE OF EACH OTHER

There exists among police officers a very special bond. One reason for this is that police officers are isolated from the rest of the world by virtue of the kinds of work-related events they experience.

They are bonded in tragedy and the knowledge of how cruel life can be. The everyday stress of being a police officer can lead to serious difficulties when you add personal problems, too.

The "image armor" that the public and the media portray also places a burden on police officers. But police officers have problems like anyone else.

When a fellow officer is experiencing personal problems, the Chaplain must get involved by suggesting to him/her that help is available. A major contributing factor in police suicide is marital and relationship problems. It is also the number "one" reason why officers come to the Chaplain. The job of policing affects an officer's family more than any other job I know.

All counseling is confidential except in life threatening situations. Officers should be informed about this policy before they talk to a Chaplain. When an officer is suicidal, the policy in all cases is to remove the officer's weapon and provide medical intervention immediately.

There really is no other way. Many people have considered suicide at some point in their lives. This does not mean that they are "suicidal."

Conversely, there are some people who do not talk about suicide before taking their lives. Each case is unique and not always easy to predict despite the warning signs.

However, the early warning signs in and of themselves indicate that intervention and/or counseling may be warranted.

Studies show that police suicides are several times higher than in age-matched populations are being reported. This statement is remarkable, because it is highly unlikely that any occupational group has a suicide rate 'several times higher than in age-matched populations'.

Indications are that the suicide rate among the police is appreciably greater than for other occupational groups.

Research on police suicide has widely varying results. The rates range from 5.8 suicides per 100 000 police per year in London to 203.7 per 100 000 per year in Wyoming.

It is essential that the police Chaplain teach and support the officers within the department how to take care of each other. Officers use the bond that they have to assist each other during a time of crisis. The Chaplain can have a profound role in “self help” for officers and their peers.

RESOURCES FOR POLICE SUICIDE

When I've been speaking at conferences about my research on police PTSD, the biggest complaint I hear from counselors and from family members of cops is that there are no support groups for survivors of police suicide. However, there are groups that provide resources and comfort to grieving families. Here are a few of them:

Tears of A Cop: Tears of A Cop's main function is to provide information on police officer suicide. It offers survivor support, a chat room and an email support list. The organization features an online memorial dedicated to officers who killed themselves.

National Police Suicide Foundation: Another important organization is the National Police Suicide Foundation. The group provides suicide awareness and prevention programs and support services. The executive director is Robert E. Douglas, Jr., a former police officer and senior chaplain for the International Conference of Police Chaplains.

He has written a number of helpful publications, such as "Hope beyond the Badge, An Officer's Support Book," and "Death With No Valor." I especially like their small size because you can read them in an hour or so.

IMMEDIATE AFTERCARE

BY KEITH BETTINGER

In the last twenty years, there have been many positive changes in law enforcement. Years ago, officers were taken off foot posts, and placed in patrol cars.

Now, officers are being returned to the community in order to get to know the people, and to work with them, so together, they can solve the community's problems.

Twenty years ago, an officer with an alcohol problem was hidden from view. Now, many departments have employee assistance programs to help the officer. Officers with marital problems could not get help from the department. Admitting that you had any type of personal problem was tantamount to saying you could not handle the job.

With the advent of kinder and gentler police departments, assistance programs became more popular. Federal laws concerning confidentiality, protected officers that sought

assistance, from misdirected supervision. However, even though many of these programs have been most beneficial to officers and their families, there is always room for improvement.

One of the areas law enforcement agencies need to make improvements is in the immediate aftercare and debriefing following critical incidents. For too many years, officers, who have experienced critical incidents, were expected to accept it as part of the job, and return to work, and function normally, as if nothing had ever happened.

For many this is not necessarily so. Many suffer from various forms of Post Traumatic Stress Disorder following their involvement in critical incidents, and departments should realize they have an obligation to this officer, to his family, to the community and to his coworkers to help him overcome the stress of the critical incident.

Annually, America loses about 150 law enforcement officers in various lines of duty deaths. In Stuart Gellman's book, COPS, The Men and Women Behind the Badge, (a study of a selected group of Tucson, Az. officers),

Gellman says for each officer killed in the line of duty, three others commit suicide, dozens develop heart disease and peptic ulcers, and three out of every four are divorced. These casualties of our own emotions are staggering.

Why does this happen? It happens because most officers do not want to admit that they are human. These same officers have to learn that there is no "ROBO" in front of the word cop. The officer on the street is as human as anyone else, and subject to the same frailties.

How can officers overcome this stress? What can departments do to reduce the stress of critical incidents?

First thing a department has to do is take a long honest look at itself and be willing to admit there is a need for change. The department is returning to community orientated policing.

Why doesn't it think of itself as a community within a larger community? In Webster's Seventh New Collegiate Dictionary, community is defined as; ":

A group of people with a common characteristic or interest living together within a larger society". That also seems to adequately describe a police department.

When an officer, a member of this community, does not function properly, his or her well being can become a problem that must be addressed by the community, namely the department.

If the problem is not addressed, than the officer will continue to be dysfunctional, and the department too, will suffer.

In 1963, the Kennedy Administration returned a large segment of mental health programs to the community. It was believed since institutionalization did not work; the public would be better served by treatment programs involving crisis intervention and prevention, and were orientated around the community. If the department wants its officers to be able to cope with critical incidents it has to have a program orientated towards this philosophy of crisis intervention.

A department has to know not only what a critical incident is, but also what a debriefing is. Calibre Press, Inc. of Northbrook, Illinois defines a critical incident as any situation that forces you to face your own vulnerability and mortality, or potentially overwhelms your ability to cope. A critical incident is characterized by being sudden and unexpected, and disrupts your sense of control, and beliefs in how the world works.

The problem with debriefings is that many administrators do not know what a debriefing is, and use the title in general terms. One dictionary defines a debriefing as an interrogation to gather information. Another dictionary says it is the receiving of information regarding a completed mission.

The latter seems to be the direction departments should take when conducting debriefings. A positive debriefing should generate a cathartic experience for the officer. He should mentally walk through his incident again with the assistance of a debriefer.

He should reexamine his actions, and realize that even if a mistake was made, he was working with the best information that was available to him at the time.

Once a department realizes what a critical incident is, the sooner it will be able to deal with the aftermath in a realistic manner. This can be done with two groups who have experience in dealing with critical incidents. The first is the mental health professional, and the other is the peer counselor, an officer who has been through a similar incident. Before becoming a peer counselor, the officer should receive some training from a facility that teaches crisis intervention techniques.

If a department is going to provide immediate aftercare and conduct debriefings, it has to have a written policy, with rules and procedures, that clearly define what is a critical incident, what events will be covered as critical incidents, and also must clearly state the roles of both the professional and the peer counselor.

The departmental guidelines should assure that members of the department's employee assistance unit are notified when an officer is involved in a critical incident that results in death or serious physical injury to someone.

If this event is the direct result of actions of the involved police officer, someone should respond immediately to the scene to help the officer through the initial interviews.

This situation can best be served by the peer counselor, who has had a similar experience, and can gently explain to the officer what will take place and what to expect.

Even though investigators can do this, it will mean more coming from someone who has shared a similar experience.

This on scene intervention does not preclude the involved officer from being debriefed by a professional. The officer should be contacted by the employee assistance unit, and an appointment should be set up for the mandatory debriefing. If the debriefing is mandatory, the stigma of having to see a mental health professional is removed.

All too often during an investigation, a role reversal takes place. An officer who has been involved in a critical incident, especially a shooting, goes from being the officer in charge, to being questioned by supervisors and investigators as if he was a suspect.

As part of the department's policy regarding such events, investigators and supervisors should be instructed to treat the officer as a victim. All the same respect and courtesies that are extended to any other crime victims should be afforded to the involved officer.

The officer should be treated with respect. No one should make light of what he has just gone through. His personal needs should be attended to, such as making sure he notifies his family that he is alright. Supervisors or investigators should be sure that the officer is taken to a hospital, and given a physical examination to ascertain that his heart and blood pressure are within acceptable limits, and that he didn't receive any physical injury of which he is not aware.

Take the time to ask would he like a glass of water or some nonalcoholic beverage. Under no circumstances should the officer be given any alcoholic beverages. This will only cloud his thought process and either delay the stress of the event, or compound it.

During the investigation stage, consideration must be given to the officer's right to counsel, and should be included in the written policy.

It should be the officer's union that provides him with legal services. Some anxiety can be caused for the officer by suggesting that he have a lawyer present during the investigation. However, the officer is entitled to the same rights and privileges any other citizen has. The attorney can also help to explain any of the legal technicalities of the investigation, and ease the officer's stress.

If an officer is involved in a shooting, many departments have a policy of taking the officer's firearm. After it is taken, the weapon becomes part of the chain of evidence as it is tested, and remains in the custody of the department.

If an officer's critical incident is his involvement in a shooting, and the shooting is justified, consideration should be given to replacing the officer's weapon before he leaves work. Psychological harm can be done if the officer is sent home unarmed.

It raises questions of doubt in the officer's mind. He wonders if the department suspects him of wrongdoing, or doubts his capabilities as an officer.

If, at all possible, provisions should be made to rearm the officer. The method of providing the officer with a replacement weapon should be part of the department's documented policy regarding critical incidents.

Employee's assistance units do not normally work twenty four hours a day. Departments that experience the luxury of having such units, usually have the unit members working during normal business hours. If an emergency should arise, the duty officer should have a notification list available so he may contact the member of the employee assistance unit, who has the standby duty. Once this is done, the unit member can respond from home.

If a critical incident happens, that results in the death or serious physical injury of an individual, or is some other horrific event, and it is not the result of actions taken by a police officer, or acted out against the police officer, then, the situation can be handled somewhat differently.

The employee assistance unit can be notified during business hours. They can contact the involved officer, and schedule the mandatory debriefing. The involved officer can also be put in contact with a peer counselor who can discuss the event with the officer, and help to relieve any anxiety he might be suffering.

When an officer is to meet with a mental health professional for a debriefing, that professional should specialize in victimology. This meeting, separate from any meetings with peer counselors, should be conducted within three days of the event. This appointment should be paid for by the department.

After an officer attends the required meeting with the debriefer, he should have the option to meet with another professional, for a second opinion. If the officer wants to meet with another specialist, this session should also be paid for by the department.

Should the officer not know who to consult, the employee assistance unit should have a list of care providers who are willing to meet with the officer, and provide him with the second opinion. The employee assistance unit should tell the officer why they recommend victimology specialists, but advise him he is free to see whoever makes him feel comfortable.

All the professionals on the list to provide care should be aware of what services are offered by the employee assistance unit and the peer counselors, and how these departmental programs might help the officer and his family.

The professional, should encourage the officer to voluntarily participate in any self help programs that the department might offer.

After the debriefing has been completed, the officer's return to duty must be examined. As part of the department's policy on aftercare following critical incidents, the department should also have written guidelines regarding the officer's return to duty.

If the critical incident involved the officer causing death or serious physical injury to someone, he should be excused from patrol duties on a mandatory basis, and assigned to less stressful duties. This should be done at least until that week's tour of duty is completed. If this is done on a mandatory basis, the department relieves the officer of any stigmatization of wrong doing, or inability to function properly as an officer.

As part of the department's policy on debriefings and aftercare, consideration has to be given to the officer's return to duty. The officer should be allowed to make a paced return to duty. No two people react the same way to similar incidents. If an officer no longer wants to work in the same area where the incident took place, if it is at all possible, his request should be granted. If he wants a temporary change of assignment to clerical duty, and such an assignment is available, give him the opportunity.

The department should also consider allowing the officer at least three days administrative leave if the officer caused the death or serious physical injury of another person. This administrative time should be available to the officer for at least a month following the event. This time allows the officer and his family to make adjustments to the life changing events that can affect the entire family.

In the department's written policy, it should be clearly stated that the department is aware that stress takes its toll on the involved officer and his family. Since this critical incident has possibly affected the officer and his family, they should be afforded the opportunity, as a family, to make adjustments to this life changing event. The time off should not be considered a reward. It is merely an opportunity to adjust to the stress of the situation.

Any services that have been provided to the officer should also be made available to the family. Many times they endure criticism and abuse from community members. Sometimes, in order to protect the officer, they do not tell him of their experiences. Too often, they silently endure, and the family suffers.

Police departments generate volumes of paperwork. All cases are written documentation of what has occurred, and what conclusions the investigating officer has ascertained. When an officer is confronted with a critical incident, his thought process can become confused. Some facts seem very important following the incident, while others can be easily forgotten.

His thought process can be further interfered with by hours of necessary interviews. With this in mind, the department should develop a policy of allowing an officer at least two to three days, following the incident, to submit his written reports.

Some supervisors and investigators might question the logic of such a policy, but it is in everyone's best interest. If the officer is allowed the time to relax and think, he will be able to write a clear, concise, and chronological report documenting the event as it happened. If he is forced to submit a report immediately following the event, any additional information will have to be submitted on a supplementary report.

At a grand jury or a civil suit, this might give the impression that the officer was remiss in his actions, and was given information to submit, in order to cover his actions so they appear correct. The minor delay in report writing is beneficial to both the officer and the department.

After an officer has survived a critical incident, it is very important that the Chief visit with the officer, to let him know that the department is supporting him.

All too often, the officer is left to fend for himself, wondering if he was right or wrong. A personal visit from the Chief is a sign of solidarity, showing that the department is standing with the officer.

After a critical incident has been investigated, it is beneficial to the department as well as the involved officer, for the department to have a method of providing pertinent information to the department members. By having something, similar to a press release, but for department members only, a great deal of gossip could be curtailed. The officer can escape being questioned by fellow officers if they are provided with correct information. It would be in the department's best interest to incorporate such a procedure into their guidelines.

It should be remembered that this memo for departmental information purposes should be truthful, and not written in a manner that builds the incident beyond what actually has taken place. It has to be remembered that should any civil suit be brought against the department or the officer, all notes and material can be subpoenaed and introduced as evidence. If an attorney for the defense sees discrepancies in the officer's and the department's statements, it can be enough to raise doubts in the defendant's favor.

These simple steps will help instill a sense of community within the department. This is not something that can be instilled overnight. However, the department can start by implementing training that shows all officers the benefits of such a program.

The training should begin with recruits in the academy; It should also include senior officers brought back for in service training, and supervisors who are receiving supervisory instruction.

As officers learn how to deal with fellow officers who have been involved in a critical incident, the stress will be reduced, and a positive attitude towards coworkers and the department should develop. The sense of community should become stronger.

If the department is not prepared to deal with critical incidents, its sense of community will be weakened. If an officer is involved in a critical incident, he should be able to turn to his coworkers for support in his time of crisis.

If the administration and fellow officers are not supportive, then the officer will be further traumatized, and his thought process weakened further.

This could lead him to make a decision to reduce his stress. His decision could include leaving the department. If this happens, the stress of the incident will still remain with the former officer. A valuable asset to the department will be lost, and a moral obligation to the employee, will not be fulfilled.

THE PSYCHOLOGIST

Even if an officer acknowledges he or she needs to seek professional help, the choices might prevent him from actually making that appointment.

Numerous departments offer an Employment Assistance Program (EAP), which allows officers to see a mental health practitioner for any personal problem. Although these can be good services, most officers are wary of sharing emotional information with anyone affiliated with the department. "They have a lack of trust.

Most police officers who admit to seeking professional help usually pay for it privately when needed.

Most officers feel that they couldn't afford for the department hierarchy to think they had a nut job or think they were working for a crazy. Officers think that when you are seeking help, people think you're crazy. This is prevalent today."

POLICE WORK AND STRESS-RELATED PROBLEMS

Several factors in police work create stress and many of the common coping mechanisms officers use intensify the problem. Officers have been trained to make order out of disorder. They have been trained to take control of situations. If they hesitate, they put themselves or others in danger. They feel whatever their emotion is they have to put them on the back burner. The public expects it and unfortunately so does the department.

Many elements of law enforcement contribute to stress reactions, including shift work, pending retirement, negative public perceptions, unsupportive management and physical ailments. When these are compounded or aggravated by personal problems, such as relationship, financial and substance abuse, police officers find themselves under immense amounts of stress. Officers put personal feelings in that "junk drawer" as things happen.

In a perfect world, you should be going through the junk drawer and tossing things but we keep stuffing that drawer until it busts the hinges." If an officer does not deal with stress in a healthy manner, depression, burn-out and suicide could be the result.

CRITICAL INCIDENTS

Any look at police work-related stress would be incomplete without addressing critical incidents. "Police departments need to become more aware and learn about certain mental

disorders like posttraumatic stress disorder (PTSD), when there is a critical incident, they need to have peer support and psychological counseling. You have to have the appropriate professionals helping the officers cope with what they witnessed and what they had to do in the performance of their jobs.

PTSD affects your family and your friends. It can be devastating especially if you don't know what it is. You're frustrated with your family, friends and doctor. Why do police officers commit suicide because their department didn't recognize it. The officer is left alone with no way out.

Today, many departments are hiring ex-military officers. The departments need to examine and do extensive background checks to see what the ex-military officers have been through during their tour of duty with the military.

Many of the ex-military are returning with PTSD but have never been officially diagnosed by a Doctor. When you are dealing with someone who is suffering from PTSD and then you put them out on the street, you may be watching a virtual time-bomb unfold right before your eyes.

ACCESS TO FIREARMS

Ninety-seven percent (of officers' suicides) use their own service weapon. Officers have a special relationship with their gun. It is a source of control, of confidence and of comfort. In the academy, officers are taught to shoot with accuracy, how to clean their firearm, and tactics for maintaining control of it in a fight.

Although some critics argue the high rate of using a gun in a police-involved suicide is due to accessibility, others disagree. It is familiarity, it's an old friend. The weapon has significance. It has an identity. It picks up the personality of a best friend. It becomes 'someone' who is trustworthy, reliable and 'someone' with a solution."

OFFICER BURNOUT

Burnout is a real term used in psychology to express a syndrome in which a person who works, often in a high demand job, suddenly becomes disillusioned, exhausted and disinterested in work.

Work performance suffers, the individual with burnout may seem withdrawn, and some people, feeling that there's no recovery from the condition, leave careers at which they've been very successful, or behave in ways that cause them to get fired.

There are different theories as to what causes burnout: some suggest it is related to working in a high stress job for long periods, while others argue it is simply clinical depression.

You'll note frequent burnout in certain professions, such as (emergency workers, rescuers, doctors, and nurses). Other professions that seem to produce more burned out workers more often involve a high degree of stress are police officers.

Though people may be more likely to be burned out in these professions, there are many others who spend their lives working at a certain type of job and at some point end up burned out.

Symptoms of being burned out get fairly obvious as the person feels more stressed and exhausted. People are emotionally exhausted, they no longer feel as if they're effective, and they're not personally involved in their jobs. Alcohol or drug use may occur or increase, and like a person with depression, it may be hard for these people to attend work.

A burned out employee might use sick days more often, be late to work frequently, and be clearly unenthused at work. Symptoms may manifest in anger toward the people served by the worker. An officer who was once a delight to see may constantly be angry and indifferent toward friends and family.

One thing noted in many burnout cases is that many people who develop the symptoms were once very dedicated and excellent at their jobs. A piece that is seldom mentioned is how the workplace may have changed to value these workers less.

An interesting contrast is that burnout in Europe is treated as a health and safety hazard, and organizations there must strive to avoid their employees becoming burned out. This means employers must work hard to make sure their employees feel valued and are not overworked.

In the US, a person who gets burned out is not viewed in the same manner. It is the employee's responsibility to avoid stressing to the point where something happens. Police agencies attempt to provide services to avoid compassion fatigue, another term for being burned out, often specific to the law enforcement field and other emergency service professions.

There are a number of ways to attack this condition. Some people find the best course is to change professions completely, or to take a job in their field that is less stressful. Another method that others try is to seek therapy, and attempt to get at the heart of what causes them stress about their jobs, and how this can help them become wiser and better at what they do.

In the interim, while waiting to make a decision about continuing a certain career path, it helps to do what you can to minimize stress and exhaustion.

Getting exercise, sleeping properly and recognizing symptoms of disillusionment, dissatisfaction and cynicism as burnout are important. Burnout is often made worse when people deny they have it and turn to temporary solutions like consuming too much alcohol, which ultimately increases the problem.

There is no hard and fast solution for burnout. Talking to a counselor or to a therapist may help the person determine what they should do. Efforts should be also be made to avoid the condition by finding work opportunities with less stress, and by reducing stress in daily life through a number of stress relieving techniques.

CAUSES OF BURNOUT

Police have too much to do and not enough time to do their job. Crime and calls for police service are increasing incessantly, but resources and time to do the job are not increasing accordingly. One poster said, "The faster I work, the behinder I get."

Another poster said, "We, the dedicated, have done so much with so little for so long, we are now qualified to do the impossible with nothing."

These sayings express feelings of frustration with a shadow of hope that something will be done to improve the situation, but the reality remains, despite the hope, that police have a job that must be done well in seemingly impossible circumstances.

Not only are the demands on police officers increasing, the rate of increase is increasing, that is, the demands on police are accelerating, not just growing. Changes in crime, court decisions, and community expectations occur faster than people can cope with the changes. We are all suffering from the stress that Alvin Toffler called "future shock" in his excellent book with that title.

Police officers must do impossible tasks and meet unrealistic deadlines in the worst of working conditions. When an officer is on a bridge in cold rain protecting the scene of an accident caused by a burglar escaping from a building and is being cursed by a passing motorist who had to slow down on the freeway, the officer wishes that she had the problems of an office worker who is frustrated because the transformer in a light is buzzing and the coffee isn't ready yet.

The community expects the officer to clear the freeway immediately, care for injured people, and gather all evidence necessary to convict the fleeing felon, not inconvenience other people, and keep citizens and administrators happy.

The demands at home don't relent either. An officer must meet the needs of his family and spend time with them. Yet he works shift work, attends court, and works overtime. He has little control over these times and how they affect his family. He does not receive a large salary to compensate for the time he can't spend with his family.

He is further demoralized because he is seldom recognized or appreciated for his dedicated work. In fact, officers are sometimes criticized by the news media, officials and citizens after putting themselves in harm's way to aggressively protect and serve. No wonder so many of you are suffering from job burnout. You're burned up.

The causes of burnout mentioned are not the only causes, and police work is not the only profession that suffers burnout. Regardless, the fact remains that many police employees are suffering from burnout. Officers need to remember that dedicated civilian employees are just as committed and suffer many of the same stresses.

SYMPTOMS OF BURNOUT

Burnout appears as symptoms in several areas including job performance, health and emotional stability.

Job performance is often affected by lessened productivity, carelessness, and absenteeism. Officers begin to make fewer calls and initiate fewer activities. They become careless, even sloven, in their appearance, and they don't take good care of equipment and cars.

A person might drink more, sleep less, and eat erratically. Drinking more intensifies tiredness because excess alcohol interferes with normal sleep cycles that rejuvenate emotional reserves. Low quality foods from fast food places contribute similarly to alcohol.

On the physical side, the body begins to give out under the distress. People have indigestion, ulcers, and body aches. Higher blood pressure is common. Officers complaining of or feeling more physical ailments than normal need to heed their bodies which are shouting that there are problems.

At an emotional level people become depressed and despair of continuing to try. They are often lethargic, apathetic, and tired. They become anxious and irritable. Their very demeanor is a bright, flashing sign showing the problems within.

If you see these symptoms in yourself or a fellow officer, you might be seeing the effects of job burnout, and the "blue code of silence" doesn't apply. Officers suffering burnout often don't see the temporary nature of their feelings nor the need for support.

COMBATING BURNOUT

The best way to combat burnout is to prevent it. An ounce of prevention is worth a gallon of ulcer medication.

Maintaining physical health and exercise is the most obvious and concrete way to prevent burnout.

The paradox is that as a person begins to despair and feel fatigued, they usually stop exercising and taking care of themselves. They skip meals and eat junk from fast food establishments. They begin to sleep less. A downward spiral begins.

When a person gets into the cycle of working longer hours they must start to work smarter and set realistic goals. They need to be taught to do what they can do, not what they can't do. They are only responsible for what you can do. Administration is responsible for providing resources for the things that employees can't do.

One of the most important and hardest things an officer can do is learn to leave the job at work and become a normal human after hours. It's important to enjoy friends and family and have at least as many friends outside of law enforcement as they do within.

It's not suggested that an officer never talk to spouses, family or friends about what they do as an officer or the feelings they have when doing your job. Don't protect them. On the contrary, family, especially spouses, needs to understand who they are as an officer. What I am saying is that the officer is a person first and police work is their career.

Part-time jobs are a prime contributor to job burnout. If one works as an officer during off-duty-hours, they never get away from the job which is one of the things they need most to do. If an officer can live without the off-duty jobs, they shouldn't work them.

They need to do something else to make extra money. It's better to have a few less bucks than to lose a family or a career. Are those few hours per week at a part-time job worth being stressed out all week long, week after week?

Make sure there are people to talk to, preferably away from police work. Talking with someone who cares and is sympathetic helps sort out feelings objectively. They should avoid people who continually gripe about the police department and never seem to grow. They will only feed the despair and will return the favor by feeding the bad feelings in them.

This self-perpetuating cycle is why "choir practices" never really helped officers out of their burnout. The truth is that choir practices encourage job burnout.

Earlier I pointed out that burnout results when a dedicated police officer doesn't receive the rewards and recognition expected for a job well done. People have dealt with that problem for centuries.

BIBLE VERSES HELP EXPLAIN HOW SOME PEOPLE LOOK AT REWARDS:

Pro 29:26 "Many seek the favor of a ruler, but from the LORD a man gets justice."
(RSV) Col 3:23 "Whatever your task, work heartily, as serving the Lord and not men, 24 knowing that from the Lord you will receive the inheritance as your reward; you are

serving the Lord Christ." (RSV)

Ultimately, you work for the Lord and you will be judged by the Lord. If your supervisor overlooks your dedicated work, you can be sure that your Lord will remember. Eternal rewards and recognition are better than immediate ones as a brick of gold bullion is better than a copper penny. Keep your spiritual perspective. After all, you are an important part of a much larger war of good against evil in which crime forms but a single campaign.

NOTES

CHAPTER 18: COMMUNICATION AND LISTENING SKILLS

Often, officers are not comfortable talking with the supervisor or even other officers about problems they are experiencing. They do not want to take the problem home to the spouse or parents as they do not want to alarm them. Where do they go?

The police chaplain must have good listening skills to be able to listen with empathy and compassion and then calmly offer assistance when such assistance is appropriate.

The chaplain stands ready to respond 24/7. Chaplaincy is a ministry of presence and the chaplain knows they need to be with the officer whenever and wherever their service is needed.

Law Enforcement Chaplaincy is no place for a chaplain who doesn't like to have his sleep interrupted. It is not a vocation or avocation for the person who is enamored of a uniform and wishes only to be used on "state occasions." The Chaplaincy must be filled by a person whose primary desire is to help law enforcement personnel wherever and whenever the call may come.

ACTIVE LISTENING

Listening makes the person you are speaking to feel worthy, appreciated, interesting, and respected. Ordinary conversations emerge on a deeper level, as do our relationships. When we listen, we foster the skill in others by acting as a model for positive and effective communication and it helps them feel that we understand what they are saying.

Whenever you are counseling, greater communication brings greater understanding. When chaplains listen to the officers and it helps build their self-esteem. When someone knows that they have "been heard" and not just "listened to", they talk more.

In the business world, listening saves time and money by preventing misunderstandings. And we always learn more when we listen than when we talk.

Listening skills fuel our social, emotional and professional success, and studies prove that listening is a skill we can learn.

The Technique: Active listening is really an extension of the Golden Rule. To know how to listen to someone else, think about how you would want to be listened to. While the ideas are largely intuitive, it might take some practice to develop (or re-develop) the skills. Here's what good listeners know -- and you should, too:

1. **Face the speaker:** Sit up straight to show your attentiveness through body language.

2. **Maintain eye contact:** to the degree that you all remain comfortable.
3. **Minimize external distractions:** Turn off the TV. Put down your book or magazine, and ask the speaker and other listeners to do the same.
4. **Respond appropriately:** to show that you understand. Murmur ("uh-huh" and "um-hmm") and nod. Raise your eyebrows. Say words such as "Really," "Interesting," as well as more direct prompts: "What did you do then?" and "What did she say?"
5. **Focus solely on what the speaker is saying:** Try not to think about what you are going to say next. The conversation will follow a logical flow after the speaker makes her point.
6. **Minimize internal distractions:** If your own thoughts keep horning in, simply let them go and continuously re-focus your attention on the speaker, much as you would during meditation.
7. **Keep an open mind:** Wait until the speaker is finished before deciding that you disagree. Try not to make assumptions about what the speaker is thinking.
8. **Avoid letting the speaker know how you handled a similar situation:** Unless they specifically ask for advice, assume they just need to talk it out. Remember, it's not about you, it's about them and what the problem is.
9. **Even if the speaker is launching a complaint against you, wait until they finish defending yourself:** The speaker will feel as though their point had been made. They won't feel the need to repeat it, and you'll know the whole argument before you respond. Research shows that, on average, we can hear four times faster than we can talk, so we have the ability to sort ideas as they come in...and be ready for more.
10. **Engage yourself:** Ask questions for clarification, but, once again, wait until the speaker has finished. That way, you won't interrupt their train of thought. After you ask questions, paraphrase their point to make sure you didn't misunderstand. Start with: "So you're saying..."

As you work on developing your listening skills, you may feel a bit panicky when there is a natural pause in the conversation. What should you say next? Learn to settle into the silence and use it to better understand all points of view. Ironically, as your listening skills improve, so will your aptitude for conversation.

ACTIVE LISTENING AND EFFECTIVE COMMUNICATION.

Active listening intentionally focuses on who you are listening to, whether in a group or one-on-one, in order to understand what he or she is saying.

As the listener, you should then be able to repeat back in your own words what they have said to their satisfaction. This does not mean you agree with, but rather understand, what they are saying.

- Before responding or questioning, give the speaker time and space to rest after talking, then express appreciation and interest in the topic.
- Briefly restate the key points to show you are interested and understand what the speaker intended.
- If you have a question, ask it in a positive, non-judgmental manner.
- Maintain eye contact and don't argue the topic

PREPARE WITH A POSITIVE, ENGAGED ATTITUDE

- **Focus your attention on the subject:**
Stop all non-relevant activities beforehand to orient yourself to the speaker or the topic
- **Review mentally what you already know about the subject:**
Organize in advance relevant material in order to develop it further (previous counseling, newspaper articles, prior real life experience, etc.)
- **Avoid distractions:**
Seat yourself appropriately close to the speaker
Avoid distractions (a window, noise, etc.)
- **Acknowledge any emotional state:**
Suspend emotions until later, or
Passively participate unless you can control your emotions
- **Set aside your prejudices, your opinions:**
You are present to learn what the speaker has to say.
- **Be other-directed; focus on the person communicating:**
Follow and understand the speaker as if you were walking in their shoes
Listen with your ears but also with your eyes and other senses
- **Be aware: non-verbally acknowledge points in the speech:**
Let the argument or presentation run its course
Don't agree or disagree, but encourage the train of thought
- **Be involved:**
Actively respond to questions and directions
Use your body position (e.g. lean forward) and attention to encourage the speaker and signal your interest

Active Listening is a very successful set of listening skills and techniques which enable the listener to accurately construe what the speaker are intending to say. In turn, the speaker feels heard, and understood.

Soon the communication between the speaker and listener flows smoothly, free of messy misunderstandings.

Consequently, the people in communication stand a far greater chance at solving problems, resolving conflicts, fostering deeper intimacy, and creating a closer and more trusting relationship.

ACTIVE LISTENING SKILLS AND TECHNIQUES INCLUDE:

- Using your body language effectively
- Incorporating Reflective Listening and Paraphrasing techniques
- Ask "Clarifying Questions" to make sure he/she accurately hears what the speaker is trying to communicate
- Making astute "Content to Process shifts, "which enables the listener to hear the many layers of thoughts and feelings that lie beneath the surface of what is being said out loud.

BODY LANGUAGE AND ACTIVE LISTENING

When communicating with others our body language can reveal how we feel about what the speaker is saying. For example,

- Rolling eyes
- Yawning
- Closing eyes
- Slouching shoulders
- Drooping head
- Moving your hands restlessly
- Clenching your jaw or Puffing out your chest
- Breathing shallowly
- Avoiding eye contact

In order to use your body effectively when listening to someone, do your best to breathe deeply, and offer the person good eye contact. Meaning, soften your eyes, so they appear receptive to what the person is saying, and non-threatening.

- Do your best to make sure that your body appears relaxed, so that you appear open to what the person is saying to you.
- Be still if you can, so that you don't appear distracted or preoccupied by other things going on around you.
- Finally, nod your head from time to time, so that the person talking knows that you are following what he or she is saying.

There are, of course, many other non-verbal ways to communicate to the person speaking that you are open and receptive to what is being said. When you make a conscious effort to use your body language in these ways, you will likely find that your verbal exchanges with others become more fluid, more respectful, and more productive as well.

REFLECTIVE LISTENING

Reflective listening is a technique that encourages the listener to repeat back to the speaker exactly what he or she has said, in their own words. For example, take the following exchange:

An officer appears exasperated because he believes his wife rarely hears what he is saying. So he tells her, "I'm sick and tired of her not listening to me, and not caring enough to understand my feelings!!

Clearly this officer rarely feels that his wife gets the gist of what he is saying. But one way for his wife to diffuse his anger and frustration would be to reflect back to him precisely what he has said.

Using the reflective listening technique, she would say: "I hear you saying that you are sick and tired of me not listening to you. Moreover, you think that I don't care enough to understand your feelings.

Often time's two very intelligent people don't accurately hear what one another is saying. The listener may simply hear what he wants to hear, and disregard the rest. Or he may make an inaccurate interpretation of what has just been said. Or intense feelings that are aroused in our interactions with others make it difficult for us to hear much of anything at all!! One way to lower the margin for error and significantly increase the likelihood that a speaker is heard involves mirroring back precisely what he or she has said, word for word.

PARAPHRASING

Paraphrasing is an active listening technique that challenges the listener to accurately capture and paraphrase back the essence of what has been communicated to him or her.

In this instance, he must do so in his own words. Doing so demonstrates that he truly gets the overall gist of what has been said. In turn, the person sharing his thoughts and feelings feels heard, and sufficiently understood.

Take the aforementioned example with regards to the officer and his wife: Remember, the officer has said the following:

"I'm sick and tired of your not listening to me, and not caring enough to understand my feelings!!

In this instance, the wife might paraphrase back to him the following: "Honey, you're angry with me because you don't think that I care enough to listen to you, and that I don't even bother to understand your feelings. I get that you feel adamantly about the situation.

In this instance, the wife has communicated to her husband what she has heard him say, but in her own words. In her communication to him, she uses her intuition and insight as

well, and shares with him her own sense of what he is likely feeling. For example, she speculates that he is feeling angry with her.

When she reads between the lines and names what he is feeling, his anger will likely dissipate, and his tone of voice will likely soften, for he will feel accurately seen and heard by her. When she lets him know that she understands that he feels adamantly about this issue, he will once again feel as though she gets how important this matter is to him.

CLARIFYING QUESTIONS

Clarifying Questions are asked in order to gain a deeper and more accurate understanding for what has been said. Such questions lessen the chances that a listener will walk away from a conversation feeling unsure of what the speaker has said.

Therapists, for example, often ask clarifying questions, for they do not want to make assumptions about what their client is thinking and/or feeling.

Instead they want to accurately distill what the client is saying, and they want to learn more about their clients' thoughts and feelings as well.

Take, for example, the following exchange. Jack and Jill are boyfriend and girlfriend, and they are taking a walk along the ocean on a cold, wintry day. Jack owns a beautiful cashmere sweater, and he happens to be wearing it. Noticing that Jill appears cold, he offers her his sweater. As he hands it to her, he says, "Just remember to give it back to me when you're done using it."

Suddenly Jill appears sour, and glum, and begins to tear up. She wraps the sweater up in her hand, and defiantly tries to give it back to Jack. In turn, Jack feels confused, and hurt. He doesn't understand what in the world has upset Jill. In his mind, all he is guilty of is lovingly and selflessly offering his girlfriend his cashmere sweater, as she appeared cold to him.

In his confusion, Jack could choose to respond to her strange reaction with anger: He could say, "What is wrong with you!! You're such a brat!! Why do you act like such a baby for no reason? I try to be nice to you, and what do I get in return? I get frowns, and scowls, and bad looks....You're nuts!!"

Concentrating on the feelings that a person has concerning a particular situation does not mean we don't need additional information for a deeper understanding of the dynamic of the emotions of the crisis.

It just means that for a person to feel understood, the listener must first come through with a response (verbal or nonverbal) that indicates an awareness of the feeling. The facts of a situation are seldom as important as we feel about the situation.

LEVELS OF LISTENING:

Level One: The receiver's expressions are clearly unrelated to what the sender is feeling at the moment. The receiver tends to respond to the content of the discussion and either does not attend to the feelings being expressed or avoids them.

Level Two: While the receiver does respond to the expressed feelings of the sender, he does so in a very surface or minimal way. The sender is likely to respond with, no, that's not what I was feeling.

Level Three: The verbal or behavioral expressions of the receiver are essentially interchangeable with the sender, in that they express essentially the same affect and meaning. The sender responds "Right that's how I feel."

Level Four: The response of the receiver adds noticeably to the expressions of the sender in such a way that he continues to explore his feelings at a deeper level.

Level Five: The receiver responds to the sender in such a way as to add significantly to the feelings and meaning the sender is trying to express. Not only does the sender feel that you are with him, he feels you deeply understand both his feelings and behavior.

Interpretive: Diagnosing, psychoanalyzing, reading-in, offering insights (what you need is, what's wrong with you is...) your problem is, or I know what you need.

Probing: Questioning, cross examining, prying, interrogating i.e.: Who, what, where, when and why.

Understanding: This response revolves around the notion that when an individual expresses a message and that message is paraphrased in fresh words, with no charge to the essential meaning, the sender will expand upon or further explore the idea, feeling and attitude contained in the message.

Active listeners should be able to see through anger and frustration, and understand that more than likely what is being said. If the Chaplain in this instance has the presence of mind to address sadness, insecurity, self-doubts, and anxiety, the sender in turn might feel attended to, heard, and cared for.

In conclusion, "Active Listening" skills play a significant role in helping people solve problems, resolve conflicts, foster deeper intimacy, and create more loving, harmonious relationships.

These skills also help people to have more empathy for whoever is speaking, for they are better able to get into the other person's shoes, and listen to their perspective on things, and understand how reasonable it might be for him or her to feel and/or think the way they do.

Active listening skills also enable a listener to show that while they may not agree with the other person; they value his or her own unique point of view. People feel seen and heard, understood, and cared for. Needless tensions fall by the way side, and a sense of harmony and mutual respect between people take their place.

Active listening is like learning another language." Most people are far more interested in what they themselves have to say rather than what others are saying to them.

"The opposite of listening," "is waiting." Instead of listening carefully, many people subconsciously send the message "I want you to hurry up and shut up so I can talk."

And while waiting for their turn to speak, people often don't pay attention to what others are saying. "They're too busy organizing what they're going to say.

Proponents of active listening say it can improve all sorts of relationships. Husbands and wives, parents and children, students and teachers, doctors and patients, and employees and bosses (and fellow employees) all can benefit from paying closer attention to what each other says as well as from using active listening as a means of showing respect to one another.

WHY LISTENING ISN'T ALWAYS EASY

Learning to listen well can be challenging, "The listener may struggle at first because so many of us have spent years focusing on getting our own messages across rather than on fully understanding someone else. Active listening also "requires that the individual do something with what he/she hears."

It begins with focused attention to the speaker and extends to comprehension, interpretation and evaluation of the message. "Remembering what is heard and responding appropriately are also included in the active listening process."

ACTIVE LISTENING BASICS

In most instances, active listening consists of a few deceptively simple techniques:

- Offering encouragement by nodding or saying "uh-huh" or "I see"
- Restating the basic ideas, using terms such as "If I understand you correctly, ..." or "So what you're saying is ..."
- Reflecting on the feelings that the speaker is trying to convey: "Seems like that bothered you a lot ..."
- Summarizing the speaker's key ideas

A structured approach serves several purposes. "It allows the speaker to hear the message as interpreted by the listener and to adjust it if it has been misunderstood or is incomplete. It also prevents the listener from becoming judgmental, so that the speaker is free to express him/herself without becoming defensive."

"The active listening response encourages the speaker to continue speaking." This type of listening is empowering because the speaker's thoughts and feelings are reflected and reaffirmed, providing a safe and supportive context."

At first, active listening techniques can seem stilted and artificial. But with practice, experts agree that you can learn to incorporate active listening skills seamlessly into your everyday conversations. "Active listening is a learned behavior, but it's something anyone can learn."

MORE TIPS

Additional tips for becoming a proactive listener:

- Shut up. Stop talking.
- Cheat. Pick up a pencil and paper and take notes.
- Sit down with the person. Say, "Let's sit down and talk." This shows that what the person is saying is important.
- Be aware of your body language and facial expressions. If you keep looking over the speaker's shoulder to see who else is in the room, the speaker won't think that you're listening.
- Ask open-ended questions — and ask questions that will elicit the information you want to know.
- Ask for clarification. It's OK to say you're not sure what the speaker has said and to ask him to repeat himself.
- Paraphrase. Repeat the main ideas back to the speaker. But don't interrupt — wait until the speaker's finished her thought. Then say something like: "It sounds as though you could use some help with that project."

COMMUNICATION SKILLS

It is not surprising that good communication leads to rewarding personal relationships and career success. It encourages the resolution of difficult issues, identifies common goals and desires, and fosters feedback that opens relationships.

Boosting communication skills can enhance all aspects of your life since the way you express and assert yourself can be the key to building strong relationships.

After taking a good look at your current relationships both in business and at home, determine whether you might benefit from boosting communication skills in your life.

Communication skills simply do not refer to the way in which we communicate with another person. It encompasses many other things - the way in which we respond to the person we are speaking, body gestures including the facial ones, pitch and tone of our voice and a lot of other things.

The importance of communication skills is not just limited to the professional world, since effective communication skills are now required in each and every aspect of our life. However, we will discuss the importance of communication skills in two areas namely business and relationships.

Good Communication skills within Chaplain/Officer relationships develop good relationships and healthy lifestyles and a good relationship can only be maintained by maintaining healthy communications. They are the ones we stay with on a regular basis. They are also the ones who see us at our best as well as our worst.

Good communication skills help relationships to develop along good lines, and ensure that arguments and disagreements are kept to a minimum. Good communication will avoid arguments and insults.

Another important part of communication in relationships is taking the initiative yourself. Do not wait for an officer to call you after a long break. Instead take the phone and also take initiative to start the conversation.

Often people have this problem while communicating, which comes from fear. They always think a thousand times whether to approach a person or not. But a person with good communication skills is always the first to start a conversation.

Given the importance of communication skills in both the personal and the corporate world, any individual who want to make progress with their life should develop this important skill.

Good communication skills can help you in both your personal and professional life. While verbal and written communication skills are important, research has shown that nonverbal behaviors make up a large percentage of our daily interpersonal communication. How can you improve your nonverbal communication skills?

The following top ten tips for nonverbal communication can help you learn to read the nonverbal signals of other people and enhance your own ability to communicate effectively.

NONVERBAL COMMUNICATION SIGNALS

People can communicate information in numerous ways; so pay attention to things like eye contact, gestures, posture, body movements, and tone of voice. All of these signals can convey important information that isn't put into words.

By paying closer attention to other people's nonverbal behaviors, you will improve your own ability to communicate nonverbally.

LOOK FOR INCONGRUENT BEHAVIORS

If someone's words do not match their nonverbal behaviors, you should pay careful attention. For example, someone might tell you they are happy while frowning and staring at the ground. Research has shown that when words fail to match up with nonverbal signals, people tend to ignore what has been said and focus instead on nonverbal expressions of moods, thoughts, and emotions.

WATCH YOUR TONE OF VOICE WHEN SPEAKING

Your tone of voice can convey a wealth of information, ranging from enthusiasm to disinterest to anger. Start noticing how your tone of voice affects how others respond to you and try using tone of voice to emphasize ideas that you want to communicate. For example, if you want to show genuine interest in something, express your enthusiasm by using an animated tone of voice.

USE GOOD EYE CONTACT

When people fail to look others in the eye, it can seem as if they are evading or trying to hide something. On the other hand, too much eye contact can seem confrontational or intimidating. While eye contact is an important part of communication, it's important to remember that good eye contact does not mean staring fixedly into someone's eyes. How can you tell how much eye contact is correct? Some communication experts recommend intervals of eye contact lasting four to five seconds.

ASK QUESTIONS ABOUT NONVERBAL SIGNALS

If you are confused about another person's nonverbal signals, don't be afraid to ask questions. A good idea is to repeat back your interpretation of what has been said and ask for clarification. An example of this might be, "So what you are saying is that..."

USE SIGNALS TO MAKE COMMUNICATION EFFECTIVE

Remember that verbal and nonverbal communication work together to convey a message.

You can improve your spoken communication by using nonverbal signals and gestures that reinforce and support what you are saying. This can be especially useful when making presentations or when speaking to a large group of people.

LOOK AT SIGNALS AS A GROUP

A single gesture can mean any number of things, or maybe even nothing at all. The key to accurately reading nonverbal behavior is to look for groups of signals that reinforce a common point. If you place too much emphasis on just one signal out of many, you might come to an inaccurate conclusion about what a person is trying to communicate.

CONSIDER CONTEXT

When you are communicating with others, always consider the situation and the context in which the communication occurs. Some situations require more formal behaviors that might be interpreted very differently in any other setting.

Consider whether or not nonverbal behaviors are appropriate for the context. If you are trying to improve your own nonverbal communication, concentrate on ways to make your signals match the level of formality necessitated by the situation.

BE AWARE THAT SIGNALS CAN BE LOOK FOR INCONGRUENT BEHAVIORS
WATCH YOUR TONE OF VOICE WHEN SPEAKING
USE GOOD EYE CONTACT
ASK QUESTIONS ABOUT NONVERBAL SIGNALS
USE SIGNALS TO MAKE COMMUNICATION EFFECTIVE
LOOK AT SIGNALS AS A GROUP
CONSIDER CONTEXT

PRACTICE, PRACTICE, PRACTICE MISREAD

According to some, a firm handshake indicates a strong personality while a weak handshake is taken as a lack of fortitude. This example illustrates an important point about the possibility of misreading nonverbal signals.

A limp handshake might actually indicate something else entirely, such as arthritis. Always remember to look for groups of behavior. A person's overall demeanor is far more telling than a single gesture viewed in isolation.

PRACTICE, PRACTICE, PRACTICE

Some people just seem to have a knack for using nonverbal communication effectively and correctly interpreting signals from others. These people are often described as being able to "read people."

In reality, you can build this skill by paying careful attention to nonverbal behavior and practicing different types of nonverbal communication with others. By noticing nonverbal behavior and practicing your own skills, you can dramatically improve your communication abilities.

The Chaplaincy program's purpose is to serve and assist officers in helping to meet the spiritual needs of the personnel, families, and the community. The Chaplain offers spiritual guidance and assistance to Sheriff's personnel in crisis situations. He also serves as a link in the communication between personnel in crisis and their own spiritual advisors.

Each day, the law enforcement officers are faced with potentially dangerous situations. They must make split-second decisions that are just and right. Many times, law enforcement officers need to express their frustrations and problems to one who fully understands the circumstances surrounding their duties and obligations.

Law enforcement officers need, at times, to discuss their problems with someone who understands, yet is detached enough not to become emotionally involved and the only way they can do this is through good communication.

The law enforcement officer's clergy person or religious advisor, although trained in the ministry, is not necessarily abreast of the particular problems of a law enforcement officer. In such cases, a law enforcement chaplain could listen with empathy, advise calmly and offer assistance when appropriate.

On call 24 hours a day, law enforcement chaplains stand ready to respond. A key word is "service" and law enforcement chaplains pride themselves that they respond when a law enforcement officer is seriously injured or some other incident occurs where their presence is needed and requested.

It also provides an added dimension to police work in making immediately available to people in crisis situations a trained and caring professional who can assist in times of loss, confusion, depression or grief. These calls are often as appropriate for a chaplain as for an officer.

Our Police Chaplaincy Program can also provide a means for the churches in the community to reach out to those in need by having experienced and trained persons available to care for people through communication verbal and non-verbal.

From the officer behind the wheel of a patrol car to the victim of domestic violence, the Chaplain must learn to "relate" to the needs that encompass each situation. Through effective communications, help can be offered without delay.

For the Chaplain who is a good communicator, success for the program can be guaranteed through caring, empathy, compassion and good communications.

Once the patrol officer or citizen learn that the Chaplain will be there to listen when they are needed a good relationship will develop.

A healthy relationship is one in which there is open communication. Certainly, it's not going to be free of all conflict because conflict is really a part of intimacy. But, having a healthy relationship means you find healthy ways of dealing with that conflict and trauma.

All of life happens in relationships that have good communications. "Maintaining unhealthy relationships can be detrimental over time. It deteriorates your capacity to be successful in the profession of a Chaplain. So, if an officer is dealing with a relationship or job stress, the Chaplain must identify the need and then offer help.

Chaplains must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with officers, their families, and professional associates.

UNDERSTANDING YOUR COMMUNICATION STYLE

Good communication skills require a high level of self-awareness. Understanding your personal style of communicating will go a long way toward helping you to create good and lasting impressions on others. By becoming more aware of how others perceive you, you can adapt more readily to their styles of communicating. This does not mean you have to be a chameleon, changing with every personality you meet. Instead, you can make another person more comfortable with you by selecting and emphasizing certain behaviors that fit within your personality and resonate with another.

THERE ARE THREE BASIC COMMUNICATION STYLES:

- Aggressive
- Passive
- Assertive

ELEMENTS OF THE AGGRESSIVE STYLE

1. Mottos and Beliefs:

- "Everyone should be like me."
- "I am never wrong."
- "I've got rights, but you don't."

2. Communication Style :

- Close minded
- Poor listener

- Has difficulty seeing the other person's point of view
- Interrupts
- Monopolizing

3. Characteristics:

- Achieves goals, often at others' expense
- Domineering, bullying
- Patronizing
- Condescending, sarcastic

4. Behavior :

- Puts others down
- Doesn't ever think they are wrong
- Bossy
- Moves into people's space, overpowers
- Jumps on others, pushes people around
- Know-it-all attitude
- Doesn't show appreciation

5. Nonverbal Cues:

- Points, shakes finger
- Frowns
- Squints eyes critically
- Glares
- Stares
- Rigid posture
- Critical, loud, yelling tone of voice
- Fast, clipped speech

6. Verbal Cues:

- "You must (should, ought better)."
- "Don't ask why. Just do it."
- Verbal abuse

7. Confrontation and Problem Solving:

- Must win arguments, threatens, attacks
- Operates from win/lose position

8. Feelings Felt:

- Anger
- Hostility
- Frustration
- Impatience

9. Effects:

- Provokes counter aggression, alienation from others, ill health
- Wastes time and energy over supervising others
- Pays high price in human relationships
- Fosters resistance, defiance, sabotaging, striking back, forming alliances, lying, covering up
- Forces compliance with resentment

ELEMENTS OF THE PASSIVE STYLE

1. Mottoes and Beliefs:

- "Don't express your true feelings."
- "Don't make waves."
- "Don't disagree."
- "Others have more rights than I do."

2. Communication Style:

- Indirect
- Always agrees
- Doesn't speak up
- Hesitant

3. Characteristics:

- Apologetic, self-conscious
- Trusts others, but not self
- Doesn't express own wants and feelings
- Allows others to make decisions for self
- Doesn't get what he or she wants

3. Behaviors:

- Sighs a lot
- Tries to sit on both sides of the fence to avoid conflict
- Clams up when feeling treated unfairly

- Asks permission unnecessarily
- Complains instead of taking action
- Lets others make choices
- Has difficulty implementing plans
- Self-effacing

4. Nonverbal Cues:

- Fidgets
- Nods head often; comes across as pleading
- Lack of facial animation
- Smiles and nods in agreement
- Downcast eyes
- Slumped posture
- Low volume, meek
- Up talk
- Fast, when anxious; slow, hesitant, when doubtful

5. Verbal Cues:

- "You should do it."
- "You have more experience than I do."
- "I can't....."
- "This is probably wrong, but..."
- "I'll try..."
- Monotone, low energy
- Avoids, ignores, leaves, postpones
- Withdraws, is sullen and silent
- Agrees externally, while disagreeing internally
- Expends energy to avoid conflicts that are anxiety provoking
- Spends too much time asking for advice, supervision
- Agrees too often
- Powerlessness
- Wonders why doesn't receive credit for good work
- Chalks lack of recognition
- Gives up being him or herself
- Builds dependency relationships
- Doesn't know where he or she stands
- Slowly loses self esteem
- Promotes others' causes
- Is not well-liked
- Believes self and others are valuable
- Knowing that assertiveness doesn't mean you always win, but that you handled the situation as effectively as possible

- "I have rights and so do
- Effective, active listener
- States limits, expectations
- States observations, no labels or judgments
- Expresses self directly, honestly, and as soon as possible about feelings and wants
- Checks on others feelings
- Non-judgmental
- Observes behavior rather than labeling it
- Trusts self and others
- Confident
- Self-aware
- Open, flexible, versatile
- Playful, sense of humor
- Decisive
- Proactive, initiating
- Operates from choice
- Knows what it is needed and develops a plan to get it
- Action-oriented
- Firm
- Realistic in her expectations
- Fair, just
- Consistent
- Takes appropriate action toward getting what she wants without denying rights of
- Open, natural gestures
- Attentive, interested facial expression
- Direct eye contact
- Confident or relaxed posture
- Vocal volume appropriate, expressive
- Varied rate of speech
- "I choose to..."
- "What are my options?"
- "What alternatives do we have?"
- Negotiates, bargains, trades off, compromises
- Confronts problems at the time they happen
- Doesn't let negative feelings build up
- Enthusiasm
- Well being
- Even tempered
- Increased self-esteem and self-confidence
- Increased self-esteem of others
- Feels motivated and understood
- Others know where they stand

6. Confrontation and Problem Solving
7. Feelings Felt
8. Effects

ELEMENTS OF THE ASSERTIVE STYLE

- Mottoes and Beliefs
- Communication Style
- Characteristics
- Behavior: Nonverbal Cues
- Verbal Cues
- Confrontation and Problem Solving
- Feelings Felt
- Effects

Clearly, the assertive style is the one to strive for. Keep in mind that very few people are all one or another style. In fact, the aggressive style is essential at certain times such as:

- When a decision has to be made quickly;
- During emergencies;
- When you know you're right and that fact is crucial;
- Stimulating creativity by designing competitions destined for use in training or to increase productivity.

PASSIVENESS ALSO HAS ITS CRITICAL APPLICATIONS:

- When an issue is minor;
- When the problems caused by the conflict are greater than the conflict itself;
- When emotions are running high and it makes sense to take a break in order to calm down and regain perspective;
- When your power is much lower than the other party's;
- When the other's position is impossible to change for all practical purposes (i.e., government policies, etc.).

Remaining aware of your own communication style and fine-tuning it as time goes by gives you the best chance of success in a Law Enforcement Chaplaincy profession.

People often have problems when they communicate with each other. The communication process is very complex and there are many opportunities for breakdowns to occur.

As a result, people can become frustrated, instructions are not carried out correctly, people get offended, and conflict can occur. You can minimize these problems and increase the odds that others will understand you by following these simple steps:

Take responsibility for the communication: When we communicate with others it is very tempting to blame them for not understanding us. Surely we with our outstanding oratory skills cannot possibly be at fault.

The problem with this attitude is that it does not achieve our outcome of getting the other person to comprehend what we are trying to say. When we take responsibility for getting a message across to others it frees us to do whatever it takes to achieve that result.

Check non-verbal feedback: When you speak to someone don't assume that you are making yourself clear to the other person. Check for non-verbal feedback. People give us many clues as to whether or not they understand us. Do they look confused? Are they unusually quiet?

When asked if they have any questions, do they answer with a hesitant no? These are all subtle signs that the individual is not sure of what you just said. Continue communicating until you see signs that your message has gotten through.

Be flexible: When communicating with others, he/she who has the most flexibility wins. If you speak to someone and you can tell by the non-verbal cues that he has no idea what you are talking about, change the way you are communicating with a particular person.

Recognize that people understand information in different ways: People do not understand things in the same way. Some people understand things better when they see them, others when they hear them and others when they do or get a feeling about them. Use non-verbal cues to determine if the person understands you.

Don't Make People Wrong: When we communicate with others the chances are very good that we will have to change strategies along the way. Don't make people wrong because their communication style is different from yours. If you do, you will not only have to deal with communication problems but also conflict and negative feelings. Instead recognize that each person's uniqueness adds color to the mosaic of life and do whatever you need to do to get your message across correctly.

While it isn't possible to completely eliminate communication problems, by following these steps you can minimize misunderstandings, reduce frustrations, and achieve better outcomes.

As for Michael, he's learned to draw pictures for me when we talk and now I understand him just fine.

HOW TO DEVELOP GOOD COMMUNICATION SKILLS

Make eye contact: Whether you are speaking or being spoken to, looking into the eyes of the person you are in conversation with can make the experience much more successful.

Eye contact conveys interest, and encourages your partner to be interested in you in return. In less intimate settings, when giving a speech or when in front of several people, holding the eyes of different members of your audience can personalize what you are saying and maintain attention.

Be aware of what your body is saying: Body language can say so much more than a mouthful of words. An open stance with arms easily to your side tells anyone you are talking to that you are approachable and open to hearing what they have to say. Arms crossed and shoulders hunched, on the other hand, suggest disinterest in conversation or unwillingness to communicate.

Often, communication can be stopped before it starts by body language that tells people you do not want to talk. Good posture and an approachable stance can make even difficult conversations flow more smoothly.

Have courage to say what you think: Communication skills begin with simple communication. Take time each day to be aware of your opinions and feelings. When you are aware of what you believe on a certain issue, you can better convey those thoughts to others. Individuals who are hesitant to speak because they do not feel they have worthwhile opinions need not fear: what is important or worthwhile to one person may not be to another and may be more so to someone else. In a world so very big, someone is bound to agree with you, or to open your eyes to an even deeper perspective. The courage to say what you think can afford you the opportunity to learn more than you did before.

Speak loudly enough to be heard: When you are saying what you think, have the confidences to say it so as to be heard. An appropriate volume can inform listeners that you mean what you say, you have thought about what you are saying, and what you are saying is worth hearing. An appropriate tone and volume ensure your listeners hear exactly what you are saying, and decreases room for misunderstanding.

Practice: Communication skills can be practiced every day in settings that range from the more social to the more professional. While some people feel the need to take a special college course on communications, or to attend community lectures on giving speeches, you might find that these simple behavior tips can open up new communication opportunities to you. New skills take time to refine, but each time you use your communication skills you open yourself to opportunities and future friendships.

EFFECTIVE COMMUNICATOR SKILLS

"Asking questions" is an excellent way to initiate communication because it shows other people that you're paying attention and interested in their response.

- Ask focused questions that aren't too broad
- Ask open ended questions
- Ask for additional details, examples, impressions

- Giving Feedback. Several types of feedback--praise, paraphrasing, perception-checking, describing behavior, and "I-messages"--are discussed in the paragraphs that follow.

When giving feedback: it is useful to describe observed behaviors, as well as the reactions they caused. They offer these guidelines: the receiver should be ready to receive feedback; comments should describe, rather than interpret; feedback should focus on recent events or actions that can be changed, but should not be used to try to force people to change.

One especially important kind of feedback for administrators is letting staff members know how well they are doing their jobs.

Effective leaders give plenty of timely positive feedback. They give negative feedback privately, without anger or personal attack, and they accept criticism without becoming defensive.

Perception Checking: Perception checking is an effort to understand the feelings behind the words. One method is simply to describe your impressions of another person's feelings at a given time, avoiding any expression of approval or disapproval.

Describing Behavior: Useful behavior description: specific body language, observable actions without value judgments, and without making accusations or generalizations about motives, attitudes, or personality traits. "You've disagreed with almost everything he's said" is preferable to "You're being stubborn."

NONTHREATENING METHOD OF REQUESTING BEHAVIOR CHANGE

"I"-messages reflect one's own views and rely on description rather than criticism, blame, or prescription. The message is less likely to prompt defensive reactions and more likely to be heard by the recipient. One form of "I"-message includes three elements:

- The problem or situation,
- Your feelings about the issue, and
- The reason for the concern.

For expressing feelings, you can refer directly to feelings ("I'm angry"), use similes ("I feel like a fish out of water"), or describe what you'd like to do ("I'd like to leave the room now").

IMPROVING THE NONVERBAL COMPONENTS OF COMMUNICATION?

Whether you're communicating with one person or a group, nonverbal messages play an important role. Study found 93 percent of a message is sent non-verbally, and only 7 percent through what is said.

Body orientation: To indicate you like and respect people, face them when interacting.

Posture: Good posture is associated with confidence and enthusiasm. It indicates our degree of tenseness or relaxation. Observing the posture of others provides clues to their feelings.

Facial expression: Notice facial expressions. Some people mask emotions by not using facial expression; others exaggerate facial expression to belie their real feelings. If you sense contradictions in verbal and nonverbal messages, gently probe deeper.

Eye contact: Frequent eye contact communicates interest and confidence. Avoidance communicates the opposite.

Communication has been part of our civilization for so long that it's hard to fathom why some people still fail to understand each other. Every day, people continue to make mistakes because of misunderstanding. Every day, people fight and argue because they misinterpreted what the other person was saying. Messages get garbled because people lack effective communication skills.

Effective communication skills, unlike what some people might claim, don't come inherently to each of us. Effective communication skills are not fixed from birth. Sure, some people may be born with disabilities that prevent them from communicating in the way others do, but the effectiveness of the way they communicate can be nurtured through different ways.

If people with disabilities can develop effective communication skills, why can't you? Here are a few tips that you can use to develop effective communication skills:

Understand the power of perception: The way you perceive a message to be may not necessarily be shared by others. You need to see the message you are trying to send the way others would perceive it. Here is an example:

Opening a gift: In America, people like to open their presents in front of the person who gave it. This way, they can show their appreciation for that gift. In other countries, however, they wait for the guest to leave, then open the presents.

This isn't a show of disrespect, but it's to prevent people from seeing the disappointment on the receiver's face if he/she doesn't get what he/she wants. The way we interpret the actions of other people vary greatly from person to person. This means that generalization

is the last thing you want to do. Developing effective communication skills demands understanding.

Pay attention to details: In order to develop effective communication skills, you need to understand the importance of details. Small details can sometimes change a whole message. One example of this is the comma. It's a little detail in a whole sentence, but when used in terms of finance, one mistakenly placed comma can cost you a lot of money.

This is also true in terms of non-verbal communication. Gestures like handshakes have little details from which a person can judge its sincerity.

If you don't want to be misunderstood, make sure you pay attention to the details.

Know before you speak: People pay little attention to the meaning of words. This is the main reason why language continues to deteriorate today. In order to have effective communication skills, you need to learn the meaning of a word before you use it. This doesn't mean just looking it up in a dictionary, you need to learn if a word has different meanings based on context.

This is also true for non-verbal communication. In order to develop effective non-verbal communication skills, you need to learn the meanings of symbols before you start sending them out. This means you have to watch what you wear, the gestures.

ROAD BLOCKS TO COMMUNICATIONS

- Directing
- Ordering
- Commanding
- Warning
- Threatening
- Moralizing
- Preaching
- Persuading
- Providing solutions
- Judging
- Negatively
- Criticizing
- Blaming
- Name Calling
- Ridiculing
- Shaming
- Patronizing
- Psychoanalyzing
- Diverting
- Avoiding
- Kidding

- Teasing
- Sarcasm
- Comparing

It is essential that the non-sworn Law Enforcement chaplain possess the ability to communicate clearly and non-threatening to those people who come to the police department.

How we relate with the persons we are sworn to protect and defend, as well as to fellow employees, speaks volumes about who we are as well as our belief in what is right and wrong.

NOTES

CHAPTER 19: POSSIBLE DEPARTMENTAL SOLUTIONS

Every department must have a program in place to act as a conduit for trauma, stress and PTSD intervention. There are many good programs available today in this country. Below is a list of the programs that will be discussed in this module.

The Joint Commission on Chaplaincy Accreditation and Education does not recommend or refer any one of these programs but we do inform each department of the programs that are successful and available.

All of the programs in this module have been approved methods of stress management and are all being practiced throughout the nation. The decision lies strictly upon the department and what works for that individual department.

AVAILABLE PROGRAMS:

QPR: CPR for Suicide Prevention

CISM: Critical Incident Stress Management

CISD: Critical Incident Stress Debriefing

EFT: Emotional Freedom Techniques

EMDR: Eye Movement Desensitization and Reprocessing

WHAT IS QPR?

QPR stands for Question, Persuade and Refer. QPR is a nationally-recognized best-practice model of suicide risk assessment and management developed by the QPR Institute.

WHY IS SUICIDE PREVENTION TRAINING IMPORTANT?

National reports recently issued by the U.S. Surgeon General: National Strategy for Suicide Prevention (2001) and the Institute of Medicine: Reducing Suicide, a National Imperative (2002), identify suicide as a major public health problem. Both reports note that most in the helping professions are poorly trained in the detection, assessment and management of potentially suicidal individuals.

The Surgeon General's report calls for an increase in the proportion of clinical social workers, nurses, substance abuse treatment providers, law enforcement professionals, lawyers, pastoral, family and mental health counselors and psychologists and others in the helping professions to secure training in the assessment and management of suicide risk, and the identification and promotion of protective factors.

The suicide prevention QPR and QPRT courses offered through EWU's Continuing Education office help fill this vital training gap for students and professionals in rural, suburban and urban areas.

THE DIFFERENCE BETWEEN THE QPR AND QPRT COURSES?

The QPR Suicide Triage Training course is designed specifically for professionals and "first responders" who would typically assess and refer potentially suicidal persons. The QPRT Suicide Risk Assessment and Training course is for human services professionals who evaluate and treat potentially suicidal persons.

IS THE QPR COURSE A PREREQUISITE FOR THE QPRT COURSE?

No. Although a portion of the curriculum contained in the QPR Suicide Triage Training course is also included in the QPRT Suicide Risk Assessment and Training course, the courses are specifically designed for two different audiences. See next question for specific audiences.

QPR is a three step suicide intervention that trains people to Question, Persuade and Refer those at risk for suicide. The success of the intervention hinges on the now replicated fact that the vast majority of those considering suicide tell someone what they are planning to do to before they do it.

This documented need, to tell someone you is about to kill yourself is, in some ways, our only window of opportunity to act boldly to prevent a tragedy. People willing to take such action are called gatekeepers.

The Centers for Disease Control has recommended gatekeeper training as a top priority in its national mission to reduce the American suicide rate. QPR is a gatekeeper training program designed and targeted specifically to train such gatekeepers. Gatekeepers, or first finders, are those people in every community or institution who, because of their contact with those at risk for suicide, are often in the best position to detect, identify and refer people thinking about suicide.

Like CPR, QPR trains people in a given community, work setting, or institution to know what steps to take when a suicidal communication is intercepted. The more people trained in QPR, the greater the odds a suicidal person has to survive his or her crisis. By analogy, if you must have a heart attack outside a hospital, have it in Seattle. Why? Because Seattle, Washington has more CPR certified citizens per capita than any other city in the United States.

QPR is based on this same, public health philosophy. The more QPR trained people in any defined community, the greater the odds a suicidal person will receive emergency intervention, which leads to treatment, which leads to survival.

Since mental health professionals typically wait in their offices for people needing help to call them for appointments, it is this author's view that unless a non-traditional, community based, wide spread behavioral health education training program that proactively detects, identifies, and refers those contemplating suicide, the suicide rates among law enforcement personnel will not decline in the near term. Denial of the problem, coupled with a passive response system, loses lives.

THE NATURE OF THE SUICIDE JOURNEY

Attempted or completed suicide can be seen as the end of a psychological journey, a journey that begins with the idea that suicide solves problems, and that sometimes ends with an act of self-destruction, either fatal or non-fatal. Once the idea of suicide is under consideration as a final solution to life's suffering and problems, the journey to find a time, place and means may be long or short.

Sometimes the journey to suicide is a matter of hours; more typically it is a matter of days, weeks or even years. Typically, the acute phase of a suicide crisis begins and ends within approximately three weeks from the onset of the crisis. The final crisis is often triggered by some last straw, precipitating event that tips the person in the final, acute hours of unrelenting psychological pain.

If an intervention is made in the beginning of this journey, preferably at the early, "ideational" phase, Questioning, Persuading and referring someone can quickly abort the journey to a suicidal act. Alternative solutions can be offered, hope instilled, and treatment, in whatever form it takes, can begin to bring about better health status, both physically and psychologically. Most people, if they do not die in their first suicide crisis, not only begin to feel better almost immediately, but go on to live long and productive lives, as did Abraham Lincoln.

QPR is specifically designed to detect persons in the thinking or ideational, or early planning phase of a suicide plan. QPR may also detect people who are much further along in their journey to suicide and, in some cases; the person may have already made one or more non-lethal attempts.

The QPR intervention is initiated by a trained gatekeeper upon his or her interpreting suicidal communications, whether spoken, written, coded or un-coded, behavioral or suggested by a set of what may reasonably be seen to be a personal crisis from which the individual may be unable to perceive a graceful, face-saving exit.

Designed to be taught in a single hour, QPR teaches audiences how to recognize the clues and warning signs sent by someone on a suicide journey, and how to make a successful intervention by asking the Question, Persuading the person to get help, and Referring them to a known and familiar resource. Resource and referral training, as well as the role of drug and alcohol intoxication in suicide crises are also taught.

It is important to note that research has found many otherwise caring people encouraged the use of, or supplied alcohol to friends or loved ones during a suicidal crisis.

Several post mortem toxicology studies have found alcohol blood levels exceeding the legal limit in the majority of completed suicides -- even in those cases where alcoholism was never diagnosed. There is, in a word, no safety for suicidal people without sobriety.

The *National Strategy for Suicide Prevention 2001* specifically calls for enhancing clinical knowledge and skill in the prevention of suicide in healthcare settings, as well as improving the policy and procedures that address client safety.

As you also know, preventing officer suicide attempts and completions is a critical officer safety issue in all law enforcement organizations. Before selecting one or more training programs to address this often overlooked area of practice and care, we invite you to explore the QPR Institute's systems approach to suicide risk reduction.

The QPR Institute offers an ecological care model that specifically addresses the challenges of preventing suicidal behavior. This integrated systems approach is now used by more than 1,000 agencies, Law enforcement, hospitals, military commands and individual practitioners across the United States.

SCREENING FOR SUICIDE

Before suicide risk can be assessed, it must first be detected. Most busy agencies lack the time necessary to conduct a comprehensive suicide risk assessment, but do have an affirmative duty to screen for suicide risk in identified high-risk groups and individuals. As part of its systems approach, the QPR Institute provides Gatekeeper training designed to teach primary staff how to screen for suicide potential.

SUICIDE WARNING SIGNS: RECOGNITION AND REFERRAL TRAINING

Agency staff is not always in the best position to recognize when an officer is emitting suicide warning signs. Failure to recognize an actions or warning signs may be an opportunity to avoid an adverse event.

The QPR Institute provides Gatekeeper training designed to teach non-law enforcement support and administrative staff how to recognize and refer someone who may be sending suicide warning signs.

SUICIDE RISK ASSESSMENT TRAINING

Once risk has been detected, it must be assessed and managed. To assist professionals responsible for patient safety in this task we provide a standardized, evidence-based suicide risk recognition and assessment skills training program for professionals at all levels of experience.

In comparing training programs, here are six key questions to ask:

1. Is it field tested?
2. Is it evidence-based?
3. Has the training been evaluated by objective 3rd parties?
4. Does the training provide a standardized documentation protocol?
5. Is there a competency-based credentialing option?
6. Is the training offered online and for continuing education credits?

The assessment protocol we teach is the *QPR Suicide Risk Management Inventory*©, 1999, published by the QPR Institute and available in adult, youth, and inpatient hospital and now Law Enforcement and first responder versions. This is the most widely-used standardized risk assessment interview protocol in use today. The training is standardized and is designed to establish specific competencies in the detection, assessment, and management of suicide risk in all settings.

For a comprehensive description of how the QPR Suicide Risk Reduction Program has been successfully implemented by the largest non-profit provider of mental health services in the United States, we urge you to review a summary description of the Joint Commission's recent article in *Perspectives of Patient Safety* describing this project by the Devereux Foundation.

FREQUENTLY ASKED QUESTIONS

Here are frequently asked questions about the *QPR Suicide Risk Management Inventory*© as well as linked files for supporting research and additional information about this tool. Please note that some of these files are extensive.

Question: *What is the QPR Suicide Risk Management Inventory?*

Answer: The QPR Suicide Risk Management Inventory is a highly-tested, structured interview protocol designed to detect, assess and manage emergent suicide risks. The QPR program does not have psychometric properties, but does produce a shared, documented, safety and monitoring plan to reduce the immediate risk of suicidal behaviors.

Question: Can Law Enforcement use the protocol effectively without training?

Answer: No. Our experience in training more than 10,000 professionals in the United States and abroad shows that the safe and effective use of the QPRT requires a structured 7-8 hour (online or face-to-face) training program taught by experts in the field of suicide risk assessment, management and prevention.

This is a core competencies training program and requires passing a nationally standardized 25-item exam to earn a certificate. For an example of pre/post QPRT training scores on this quiz by profession.

Question: When is the QPRT suicide risk assessment interview conducted and documented in the protocol format?

Answer: At initial intake, at all significant transitions in care, at termination and/or when additional risk factors or suicide warning signs are observed.

These recommendations are in keeping with guidelines suggested by the Joint Commission on the Accreditation of Healthcare Organizations.

Question: Why not just document a suicide risk assessment in the progress notes?

Answer: Historically, QPR providers have noted their suicide risk findings in progress notes. Unfortunately, this documentation is often sparse and uninformative to other decision-making staff, which may lead to poor communication and contribute to an adverse event.

Because suicide is the leading cause of premature death in law enforcement and because there is an increasing focus on officer safety as relates to suicidal behavior a thorough assessment and documentation of suicide risk is necessary to:

- a) Prevent suicidal behaviors and
- b) Avoid liability

Question: Is this documentation system helpful in avoiding claims of suicide liability?

Answer: In 1998 the QPRT Suicide Risk Management Inventory© and associated risk reduction practices won the J.J. Negley Associates, Inc. Presidents Award for Avoiding Suicide Malpractice for the medical field. This \$15,000 award was given to Spokane Mental Health (where the program originated) by the National Council for Behavioral Health Care Organizations at their annual convention in Chicago, Illinois.

Question: Is the QPRT a stand-alone tool?

Answer: In many settings, a QPRT assessment is sufficient to set up a care and safety plan. However, the QPRT is a key part of a larger institutional suicide risk reduction program which mandates training at all staff levels in a law enforcement organization to help ensure officer and staff safety.

Question: How can my staff get QPRT training?

Answer: Online QPRT training is available through the School of Social Work and Department of Educational Outreach at Eastern Washington University. QPRT training is also available in a classroom setting hosted by your organization, for your staff and/or others in your community. Highly experienced licensed trainers are available nationally.

Question: Are continuing education or college credits available?

Answer: Yes, National Board of Certified Counselor credits are available for all face-to-face classes and continuing education credits are available for all online courses, including 6.5 hours of CE from the American Psychological Association. The QPR Institute will assist your organization with the necessary goals and objectives to meet local continuing education requirements should you schedule a face-to-face training.

Question: Do you have a train-the-trainer option?

Answer: Yes. The QPR Institute offers a train-the-trainer option for teaching the QPRT. To become a licensed instructor requires approximately 36 hours of self-study, online training, reading, and quizzes. For successful QPRT applicants who become licensed to teach QPRT, faculty appointments to the QPR Institute and opportunities to travel and train others may be available. For more information on this option please contact the QPR Institute.

Question: Are there ongoing costs associated with using the QPRT protocol?

Answer: Yes. The QPRT protocol is a copyrighted assessment tool and may not be replicated without permission. However, the QPR Institute sells hard copy protocols from its website or they can be ordered by phone. Another option is our site license to replicate and distribute the protocol in unlimited quantities based on a simple, anticipated utilization formula.

Question: Who developed the QPRT and what is its history?

Answer: The QPRT training program/protocol was developed by an experienced multidisciplinary team of mental health, substance abuse treatment professionals, and suicide prevention specialists.

Question: What evaluations of the training have been conducted?

Answer: Every QPRT course is evaluated by participants and, where possible, by independent, third party evaluators.

Question: Can training staff in the use of the QPRT lead to quality-improvement projects?

Answer: The QPR Institute provides two turn-key CQI programs that may be completed using training data collected from QPRT training.

Question: Have consumers of service ever evaluated their experience in being assessed for suicide risk with the QPRT?

Answer: Yes. Consumers of mental health services were surveyed for their reactions to the QPRT interview.

Question: Given the move to evidence-based practice and the demonstration of competencies, is there a credentialing process to assure that those trained in using QPRT in a practice are doing it correctly?

Answer: Yes. The QPR Institute provides a four-step credentialing process to determine staff competency to conduct a suicide risk assessment and management/monitoring plan. We also provide annual review standards, quality of documentation standards, and quality-assurance guidelines.

Question: Who is using QPR Institute programs now?

Answer: QPR programs are currently in use by a wide variety of healthcare organizations, universities, military units, schools, and tribes. The derivative program, (QPR Suicide Triage Training for 1st responders) is used by dozens of police departments and the US Army, among others.

A FINAL NOTE

Before adopting any suicide risk reduction training program, we ask that leadership consider the following:

- Suicide prevention funding often follows tragedy or in an adverse event. While a bad outcome may stimulate a call for training, one-time training fails to address the ongoing need for maintaining safety practices and necessary staff competencies to address these issues over time.
- Suicide is a public health problem that impacts not only officers, but staff, their family members, and the communities we all serve. According to the Centers for Disease Control, most suicide deaths in America occur in between the ages of 25 and 55. This is our work force and it is your work force. Please consider that to reduce suicidal behaviors in all areas of concern requires that leadership participate in and help build institutional and community support for suicide prevention activities throughout the communities that sustain us.
- To help organizations address the issue of program implementation and sustainability we invite you to explore a series of self-study questions.
-

INTERVENTION AND PREVENTION

Most officers who commit suicide are not mentally ill or weak. Many have failed to cope effectively with their stress. Often afflicted with professional and personal troubles, an officer often feels trapped and out of control. When they see no way out, suicide is often the result.

Officers are trained to deal with people who are suicidal and to talk them down from shooting themselves or taking pills; they don't apply it to themselves. When they are in tremendous pain at the time of suicide, they don't use the skills. It is up to those around them to notice if an officer appears to be struggling and take action.

PEER SUPPORT

Departments around the country have taken action by implementing peer support units (PSU's) or crisis teams. Some department has crisis officers who are there for support for the officer and department chaplains are now available.

Peer support units, chaplains and crisis teams offer things traditional departmental mental health programs cannot. "There is a confidentiality that is born from within that peer group.

It is a peer who has been through the same experiences they have. When they say they know how you feel. They do know

LIVING WELL

Stress management or therapy isn't the only treatment organizations should alert officers to. Encouraging a healthy lifestyle is equally important.

Promoting physical activities and competitive sports is also a very good idea. The agency can sponsor a department softball or basketball team or offer incentives for staying in shape. The department should offer exercise equipment and a place for officers to out regularly. An incentive program is also a good idea.

In-service training opportunities should also include topics such as problem solving, goal setting, relaxation techniques, talking about difficult situations, healthy eating, and relaxation and meditation techniques. All of these things make an individual stronger and better equipped to handle stress.

When providing such training, supervisors ensure programs that are headed by those with backgrounds in law enforcement.

When the department provides cultural awareness training, a lot of officers will think it's humorous, unless you bring in someone who is a police officer and understands their issues and can talk about them in an in-service setting.

WHAT CAN WE DO?

Police officials should stop distinguishing between personal problems and job-related problems. Many departments look closely into the personal lives of applicants during background investigations.

Departments understand the importance of a person's personal life in police work. After the person is hired a strange thing happens. Many departments forget the importance of a police officer's personal life when it comes time to help him.

The fact remains that police work affects an officer's personal life, especially the family, and his personal life affects job performance. Any separation of the two is unreal.

Officials can't stop stress in police work, but they can recognize it and help officers in three areas. First, they can provide help to individual officers. Second, family life can be helped. Third, the stress caused by the police organization itself can be reduced.

Direct help for individual officers can come in many forms. Every large department should have a psychologist and a chaplain for the officers and ensure that insurance plans have good provisions for outpatient counseling with outside psychologists, psychiatrists and therapists.

Doubly important is confidentiality; the department should not know when an officer uses a department counselor or insurance for counseling.

Programs for individuals often help reduce organizational stress. When a department provides a psychologist and a chaplain, the officers see that someone at the top does understand their problems and is trying to help.

This perception is much better than the attitude of many officers that no one at the top cares. Even worse officers often believe that administration is out to get them. Departments need to have policies for transferring people temporarily for family problems.

Traumatic incidents such as post shooting trauma are acute stressors but should be mentioned. Services that help the acute, individual stress of traumatic incidents also help chronic, organizational stress.

When an officer shoots and kills someone, he isn't given time to deal with his trauma. He must protect the crime scene, make arrests, notify the proper people and tell officials what happened. He maintains the image of being in complete control.

Usually he has to tell the story several times to his supervisors, homicide, internal affairs and any special sections in the department. Other officers have their jobs to do and can't take time to support the officer personally.

The department can help with procedures that support the officer. Get other officers to handle the work as soon as possible and get the officer out of the public eye. Don't make him relive the incident three to six times in official interviews. Let everyone needing a complete story interview him at one time.

Start a traumatic incidents group or a procedure in which someone can be present to give personal support to the officer. A traumatic incident team is comprised of officers who have previously been in traumatic incidents. They are trained to help officers going through trauma and are called immediately to the side of an officer involved in such an incident. The members of the traumatic incident team are volunteers who help in addition to their normal duties.

Officers and supervisors should be taught about the symptoms and effects of job stress. Proactive training helps ward off stress when officers encounter it.

When an officer suffers from stress, reactive counseling and training such as biofeedback should be available.

Departments can reduce officer isolation and do community relations at the same time by supporting community activities such as youth athletics or charitable organizations. Official support could be given for officers to be coaches and referees in leagues.

Officials should actively look for positions on boards of directors for community organizations such as mental health associations and seek to place officers as representatives of the Police Department. Police will get balance in their lives and citizens will better understand the police. A cooperative attitude will grow on both sides.

Family life can be helped in several ways. Counseling through the psychologist and chaplain should be available for family members. Seminars for spouses will let them learn about the department first hand. Spouses don't understand the department and often have a biased opinion after hearing officer's complaints.

Police appreciation dinners sponsored by the community and the department are excellent. They give officers and their families a chance to sit down in a congenial atmosphere with the people who appreciate them.

The police organization is very important in the lives of its officers and often creates stress unwittingly. Orders and regulations tend to sound oppressive in their pronouncements when they don't need to.

If a passage mainly gives information for handling a situation, then why word all of it in the imperative voice? Save the imperative for imperative orders. Orders and regulations can be reviewed by someone trained to see the human impact that certain wordings have on people.

Poor communication causes chiefs and officers as much grief as anything. Departments can improve by having a complete system of communication. A simple well-written newsletter for information, not propaganda, bridges the communication gap. In short, the organization needs to remove its own problems before pointing at individual officers and putting all the blame on them.

Police officers are suffering from stress, and one result is lessened service to the community. All police stress needs to be defined and combated, not just a few obvious ones. The task is difficult, but the rewards for doing it surpass the effort.

As we struggle to understand why an individual chooses to end their own life, law enforcement agencies need to respond to survivors with understanding, compassion and support.

Many law enforcement agencies are reluctant to discuss this Issue and through the department's denial and inability to cope with such a tragedy, any efforts to provide assistance to the survivors are minimal.

There is no shortage of support groups these days. In any town in America, you are likely to find support groups for eating disorders, cancer survivors, and alcohol and drug addiction. If your pet has died, there is a grief support group for pet owners. But there is a lack of support groups for survivors of police officers who have committed suicide.

Not only do these survivors feel the pain of grief, they feel the isolation that is forced on them by members of their "police family."

Is the way a person dies any more painful than another? When an officer is killed in the line of duty, the reactions are shock, denial, and anger. The same reactions occur when an officer commits suicide. Although the reaction may be the same, the response is different. Accepting the fact that an individual chose to end their own life can be an impossible task.

It is difficult to know what to say or do for these survivors, but it is important to remember that suicide is an individual act.

The person themselves made the decision to take his or her own life. Whether you believe it was morally, religiously or spiritually right or wrong, the decision was made and cannot be undone. Why an individual takes their life is a question that goes unanswered. If you did not recognize the signs, then how could you possibly know the answer?

Often, what works in one situation may not work in others as it is determined by people, choice of method and strategies. Certainly, the lessons or approaches developed can be shared and translated across countries and communities, keeping the socio-cultural values and belief systems in mind. Only the combined efforts of individuals and families, communities, professionals and governments can help in mitigating the problem.

Prevention of suicide is a challenge to society. With multiple approaches and meaningful interventions, many lives can be saved. It is critical that we identify the person at risk, analyze the thoughts and circumstances and act immediately and appropriately.

Most persons pass through different stages of ambivalence and undetermined responses of "willing to live and a wish to die" before attempting suicide. The majority of these people are extremely unhappy with life, feel that the doors are closed and choices are none.

For some, suicide is an impulsive phenomenon, the impulse lasting for only a short time. If the ongoing crisis can be defused, they can be pulled out of such situations. Some of them are rigid in their thoughts and behaviors. Such people require long-term persuasion to change their behavior. Preventing suicide requires interventions at individual, family and professional levels.

CRITICAL INCIDENT STRESS MANAGEMENT (CISM)

Critical Incident Stress Management is a short term intervention process that focuses mainly on identifying the problem to enable the individual(s) affected to return to their daily routine(s) more quickly and with a lessened likelihood of experiencing long term crisis related stress.

The purpose of crisis intervention is to determine the severity of the traumatic event and what stage of crisis the person is in and offer immediate help if necessary. Once a determination has been made, a defusing or a debriefing can be offered at that time.

Many Police Department today make Critical Incident Stress Management for debriefing and defusing (CISM) interventions available, if not mandatory, for anyone who may need an intervention.

CISM interventions have proven to be beneficial in the areas of grief, crisis or trauma and studies have shown that officers or emergency workers involved in traumatic situations have a decrease in the effects of detrimental mental stress for the people involved.

A chaplain is not a police officer, but an ordained representative of God. A chaplain is an approved and experienced person of their denomination. A chaplain will not interfere with an officer's duties or performance however; a chaplain will be subject to an officer's request for CISM intervention, while on duty.

A chaplain believes that God is the answer in all situations. The chaplain is prepared to bear witness to the forgiving love and redeeming power of God, through Jesus Christ to those in crisis. They pray that God will guide them, direct their steps, their thoughts, words and actions. They seek to be a channel of God's love. They promise to serve as a source of support and counsel to the law enforcement community including, CISM counseling.

Eventually, traumatic events take its toll. Without an outlet to release accumulated stress of the job, the police officer becomes a “time bomb” with no release.

Police officer suicides, divorce, heart disease, domestic violence and police homicides have doubled in the last 10 years. While they may wear protective gear while on duty to protect the body, there is no protective gear that protects the mind or psyche.

Most police officers describe their work as 90% boredom and 10% sheer terror. It’s the element of “not knowing what is going to happen next” not fear or anger that adds to the confusion of a police officer and his/her duties and they need an outlet for frustrations and fear.

Police officer must suppress any type of stress for the sake of the department or their feelings of fear or anger. Chaplains deal with fragile human emotions complicated by everyday problems and through CISM, those emotions can be dealt with in the open.

Chaplains realize that it’s the “reaction” to the crisis and not the “actions” of the situation that cause a “break-down” of human emotion.

It is our belief that emergency service workers who have been exposed to critical incident stress while performing a public service should have access to critical incident debriefing interventions designed to help them identify and cope with their responses to these events.

The cost of such services should not be borne by workers but should either be provided by management in the form of employee assistance programs or provided by trained debriefing teams on a no fee basis.

CISD Programs have been developed to provide debriefing following critical incidents to any emergency response agency requesting assistance. The focus of this service is to minimize the harmful effects of job stress, particularly in crisis or emergency situations. As such, the highest priorities for the team are to maintain confidentiality and to respect the feelings of the individuals involved.

It is not the function of the team to replace on-going counseling, but to provide immediate crisis intervention. Through the CISD process, the team provides emergency personnel with a tool to potentially alleviate stress related symptoms.

Workers who require additional psychological intervention should be referred for follow-up services to agencies or mental health professionals who are familiar with current advances in trauma theory and have experience in working with trauma victims.
Program Administration

CRITICAL INCIDENT STRESS DEFUSING

A defusing is normally offered to individuals with a direct involvement to the incident and is often done informally within 8 hours of the incident, sometimes at the scene if necessary.

Post Traumatic Stress Disorder (PTSD) frequently results from not talking about or being able to put into perspective a critical incident. Once PTSD develops, the impairment the long-term emotional response to the trauma causes is harder to heal. Prevention is preferred. Any CISM member can defuse. The processes objectives are:

STEPS TO DEFUSING

- Introduction: establishment of guidelines
- Details of event: Given for individual perspectives
- Emotional responses: Given subjectively
- Personal reactions and actions:
- Symptoms: Exhibited since the event
- Instruction Phase: Where individuals are returned to normal tasks
- Follow-Up: always done after intervention
- Rapid reduction in the intense reactions to a traumatic event
- Re-establishing the group's social network so people do not isolate themselves from each other.

CRITICAL INCIDENT STRESS DEBRIEFING (CISD)

This is a group meeting or process using both intervention and education to mitigate or resolve the psychological distress associated with a critical incident. To maximize effectiveness; a debriefing should occur 24 to 72 hours after an event. CISD usually uses all team members:

- A mental health professional – as leader or co-leader
- Pastor/Chaplain
- Peers

It is not therapy even though mental health professional(s) are part of the team; the process's objectives are to mitigate the critical incident's impact on:

- Primary victims, those directly traumatized by the incident
- Secondary victims, emergency services personnel who witnessed or managed the critical incident; and
- Tertiary victims, dependent family members

- Accelerate recover processes in people experiencing normal stress reactions to the critical incident

CORE INTERVENTIONS OF CISM:

- Pre-incident education and preparation
- One on one crisis intervention
- Demobilization (public safety disaster response personnel)
- Crisis management briefings (large group of primary victims)
- Defusing
- Critical Incident Stress Debriefing (CISD)
- Significant other/Family support
- Organizational/Community consultations
- Chaplain/Pastoral crisis intervention
- Follow up services and/or referrals

CISM is an integrated system of interventions designed to prevent and/or mitigate the adverse psychological reactions often accompanying disaster, traumatic or crisis related events. CISM is not therapy. Its goal is to return the affected person or group to a normal functioning level.

CISM concentrates on mitigating post-traumatic stress reactions. CISM has proved to be a means to assist persons in dealing with the symptoms of Critical Incident Stress.

The intervention process involves peers with oversight from experienced mental health professionals with advanced training.

All interventions are strictly confidential unless the interventionist determines that the person being helped is a danger to themselves or to others. The emphasis is always on keeping people safe and returning them quickly to more normal levels of functioning. Examples:

- Death or serious injury
- Suicide, attempted suicide
- Natural disaster
- Acts of terrorism or extreme violence

CISM TEAMS

Training Requirements: CISM teams must be certified by an accredited training source to provide training and responding to critical incidents.

Composition: CISM teams should consist of:

Team Coordinator: This position should be held by a qualified person who has obtained extensive training in basic and advanced CISM techniques.

Mental Health Professional: This team member should be a psychiatrist, psychologist, social worker, or other license mental health professional who has attended either the basic or advanced courses for CISM.

Chaplain/Pastor: This person shall appropriately bring to bear a moral or spiritual perspective in the proceedings. This person should, at the conclusion, particularly note resources and activities, which are apt to enhance wholeness following the debriefings, similar to referrals made to mental health and physical resources and activities.

Peers: These are volunteers who have been recommended to the CISM team. If possible, peers should be drawn from locations throughout the area and should have had training in peer support or ICISF certified courses. Selection criteria for peers are:

- Emotionally mature
- Good communication and interpersonal skills
- Ability to transcend the scope of gender, rates and pay grades
- Have attended ICISF basic and advanced courses.

Contingency Plan: CISM teams shall have a plan that includes these elements:

- Risk assessment program: to identify high risk persons or groups
- A survey of CISM resources
- Response plan

Coordination: CISM teams shall coordinate their interventions with other ongoing activities with other affected areas, which may include Police, Fire, EMS, etc.

Pre-Incident Preparation Training: Pre-incident training helps individuals prepare to cope with traumatic events.

People forewarned about traumatic stress generally are able to manage it better and tend to recognize its signs earlier. It is useful for everyone facing exposure to a traumatic event and promotes optimal performance.

Training Objectives:

- Teach effective approaches to stress
- Help avoid ineffective approaches
- Emphasize the normalcy of feeling stress in abnormal situations

Critical Incident Reporting:

When a critical incident occurs, CISM officers in charge shall notify the chain of command by the most expedient means to request CISM services. Officers in charge should notify the person in charge with necessary information which should include:

- Contact person's name, phone number and location
- Whether there is an immediate need (within 24 hours) to have a CISM team on scene.
- Whether the incident is completed or ongoing

Officer Responsibilities:

- Establish, train and support at least one CISM team to meet the needs of each group.
- Provide rapid means of communication by which to be notified of critical incidents
- Provide support for teams and conduct pre-incident preparation training
- Report CISM activity to command chain
- Coordinate establishing CISM teams
- Ensure personnel selected as peer support personnel are trained in ICISF interventions.
- Maintain a roster of trained peer support personnel
- Approve peer support personnel for interventions. CISM team members personally affected by an incident will not participate in its intervention.
- Coordinate training for all personnel
- Determine of intervention level. If trained in the ICISF Mitchell Model, the Chaplain/Pastor may serve as a listener and guide during interventions.
- Ensure CISM confidentiality and effectiveness. No team member shall make any written notes during or about a CISM intervention. An after action report may be used by team members only to discuss at team meetings as to lessons learned about the intervention process. The after action report shall be very generic and shall not include names or any specifics about the intervention.
- Respond as necessary and/or coordinate with chaplains or pastors or other specialists to support others within the group

- Coordinate and monitor non-member teams responding to critical incidents.

OFFICERS IN CHARGE SHALL:

- Report as soon as possible a critical incident to their peers.
- Conduct pre-incident preparation training.
- Solicit volunteers to serve as CISM team members.

CISM ACTIVITY MEASURES: To monitor CISM effectiveness, the Director shall compile a report of the measures to be kept on file.

- Number of CISM pre-incident training sessions and number of operational teams.
- Number of critical incidents due to:
 - Mishaps
 - Emergency response or law enforcement
 - Workplace violence, terrorism or suicide; and
 - Other.

RESPONSIVENESS: (the average time in hours of all incidents)

- Time between when incident occurred and notice to CISM teams
- Time between notice and CISM team's arrival on scene

ON-SCENE SUPPORT SERVICE

Services provided under "on-scene" conditions are brief, practical crisis intervention functions to limit the level of distress member's encounter. On scene support does not interfere with operations. These service providers usually are peers, with chaplains, pastors or mental health professionals called only of needed.

THE PROCESS OBJECTIVES ARE:

- Stabilize the situation and protect from additional stress
- Mobilize a wide range of resources to assist distressed persons
- Normalize the experience and reduce the feelings of uniqueness and abnormality
- Restore to function as quickly as possible.

DEMOBILIZATION

Demobilizations are generally used during a disaster or in a large-scale catastrophic critical incident. A primary stress prevention and intervention technique, it is applied immediately after personnel are released from the scene and before they return to normal duties. It is two segments: first, a 10 to 15 minute lecture on understanding and managing stress reactions and, second, a 20 minute rest session. The process objectives are:

- Providing a transition from the traumatic event to normal routines
- Reducing the intensity of immediate stress reactions
- Assessing preliminary group needs for additional support services
- Forewarning participants about potential reactions
- Providing information about the incident and members' reactions
- Providing practical information for managing stress and establishing linkages for additional support
- Establishing positive expectations about outcome

FOLLOW-UP SERVICES

If CISM provides initial services post-incident, follow-up services are mandatory. The staff is responsible for ensuring follow-up services are provided or accessible.

Peers may be used if they have added training and experience in such services as individual crisis intervention; family debriefings; unit training; and/or referral to other mental health services.

Follow up procedures are an extremely important part of Crisis counseling.

GOAL FOR RIDE ALONGS

The ride-along programs requirements for the CISM Program have been established in order to allow Team Leaders to obtain first hand exposure to the world of emergency services.

OBJECTIVES

After participating in the ride-along(s), it is expected that the team leaders will have:

A better understanding of the routine daily activities associated with emergency services work.

- An enhanced view of the actual rescue activities at the emergency scene.

- A greater awareness of the emergency service worker's responses to critical events and their usual coping methods after the event.
- Insight into their own psychological and physiological reactions to being present at an emergency scene and personally witnessing traumatic events and or serious injury.
- An improved perception of witness/bystander reactions to traumatic experiences.
- A greater appreciation for the emergency services worker, including personality traits, motivations, peer relationships and their commitment to their profession.

REQUIREMENTS

Initially Team Leaders are required to make at least one ride-along with each of the following emergency services. All required ride-along(s) must be complete a total of 12 hours minimum of observation time by the end of the first year on the CISM Team.

Police (4 hours)

1. Police (4 hours)
2. Fire (4 hours)
3. Paramedic Unit (4 hours)

Observations for the following are optional, but recommended:

1. Private Ambulance (2 hours)
2. Hospital Emergency Room (2 hours)
3. Emergency Dispatch Center (4 hours)

After completing of the Team Leader's initial training requirements, they are required to complete four (4) hours of ride-along annually for the next 2 consecutive years to meet the continuing education requirements for the CISM Team.

PROCEDURES

Team Leaders will be responsible for setting up each ride-along with the appropriate agency. Attached is a listing of the agencies which have agreed to allow CISM Team Members to participate in ride-along(s) or observations. Team Members should call the contact persons directly and make arrangements for each ride-along.

The time for ride-along(s) is negotiable with each agency and may be changed if they do not fit your schedule. However, please keep in mind that the best times are those in which the most activity occurs.

In most cases you are required to sign a legal waiver disclaiming any liability on the part of the agency while you are riding/observing.

Complete the Ride along Report Form of your activity. Please complete this form and return to the CISM Program Coordinator within the required training period, i.e. by December 31st.

TEAM MEMBERSHIP: RECRUITING AND SELECTION PROCESS:

Criteria to be selected for an interview for Team Leader:

- Graduate degree in a recognized mental health profession and registered, licensed, or certified to practice in the specialty area (if required).
- Cited practice experience as a therapist or counselor in private, group, or agency practice.
- Possess or be eligible for professional liability and malpractice insurance;
- Training and/or experience with CISD or related involvement with victims of trauma.

CRITERIA TO BE SELECTED AS A PEER DEBRIEFER:

- Currently affiliated with an emergency services agency either as a paid employee or a volunteer;
- Knowledge, training and/or experience in stress management or CISD;
- Knowledge in counseling?
- Applicable work history or experience which demonstrates personal characteristics such as leadership ability, self-confidence, ability to communicate effectively, and ability to work as a team.

TEAM MEMBERSHIP DUTIES/RESPONSIBILITIES

RECRUITMENT/QUALIFICATIONS - VOLUNTEER TEAM MEMBERS

WHO ARE CANDIDATES FOR TEAM MEMBERSHIP?

Team Leader: Licensed mental health professional with strong background in counseling and interviewing skills, e.g., psychiatrist, psychologist, social worker, psychiatric nurse, physicians with family practice training, counselors, etc.

PEER DEBRIEFERS:

Emergency service workers (police officer, firefighter, paramedic, EMT, etc.), with current or recent employment in the field.

WHAT ARE THE QUALITIES LOOKED FOR IN TEAM MEMBERS?

It is important that all team members be sensitive persons who will keep confidential the information shared in debriefing sessions. Team members must be well adjusted, empathetic, respected by peers, credible and non-judgmental.

WHAT ARE THE MINIMUM EDUCATIONAL REQUIREMENTS?

- Team Leader: Graduate degree in a recognized mental health profession; registered, licensed or certified to practice in specialty area. Trauma and/or critical incident debriefing experience strongly recommended.
- Peer Debriefers: Employment or volunteer status as an emergency service worker. Post-high school (e.g. community college or university level courses in sociology, psychology, or similar behavioral sciences with appropriate knowledge of group processes, communication skills, interpersonal relationships, etc.) desirable, but not required. On-the-job training and workshops/seminars in dealing with critical incident stress, also desirable but not required.

ARE THERE OTHER DESIRED SPECIAL TRAITS OR PERSONAL CHARACTERISTICS?

Yes, mainly dependable, flexible, patient, out-going, creative approachable, etc. Able to respond on-call for incident debriefings, defusings, demobilizations or to emergency scenes (rarely).

WHAT SPECIAL SKILLS ARE NEEDED?

- Ability to listen and communicate effectively with others.
- Training in communication skills or leading groups is desirable, but not required.

WHAT KIND OF COMMITMENT IS INVOLVED?

The volunteer team member must be willing to complete a required initial 2 day training session (16 hours), attend team meetings/continuing education sessions (6 annually, 3 hours each) and complete required reports. Must be able to respond to team assignments to conduct a debriefing on short notice during periods of volunteer duty. Mental health professionals will be required to participate in "cross training" with rescue workers (police, fire or EMS), including 12 hours of "riding along" annually.

WHAT CAN BE EXPECTED AS EXPENSES?

Training will be provided at no charge. Carpools to debriefings and training sessions are encouraged.

- Agencies/organizations requesting debriefings will be asked to cover team expenses to, at and from the site of the debriefings; however, details for reimbursement of out-of-pocket expenses (travel, meals, personal supplies, etc.) have not yet been worked out.
- Mental health professionals must be responsible for their own professional liability/malpractice insurance.

ARE THERE GUIDELINES OR PROTOCOLS FOR DEBRIEFINGS?

Yes, the most common CISM model is based on a CISD process developed by Jeffrey Mitchell, PhD., University of Maryland at Baltimore, in 1983.

A information packet about the Critical Incident Stress Management Program is available on request.

WHERE CAN APPLICATIONS TO BE OBTAINED?

Application forms for Team Leader or Peer Debriefers or CISM Informational Packets should be obtained from the team leader:

Being able to talk about what happened, having people listen, and not being judged in the talking. Learning more about the incident.

EMDR: EYE MOVEMENT DESENSITIZATION AND REPROCESSING (EMDR)

PURPOSE OF DEFINITION

The purpose of this definition is to serve as the foundation for the development and implementation of policies in all EMDRIA's programs in the service of its mission.

This definition is intended to support consistency in EMDR training, standards, credentialing, continuing education, and clinical application while fostering the further evolution of EMDR through a judicious balance of innovation and research. This definition also provides a clear and common frame of reference for EMDR clinicians, consumers, researchers, the media and the general public.

FOUNDATIONAL SOURCES AND PRINCIPLES FOR EVOLUTION

Francine Shapiro, Ph.D. developed EMDR based on clinical observation, controlled research, feedback from clinicians whom she had trained and previous scholarly and scientific studies of information processing.

The original source of EMDR is derived from the work of Shapiro as it is described in her writings (Shapiro, 2001). Shapiro made clear that she is committed to the development of EMDR in a way that balances clinical observations and proposed innovations with independent empirical validation in well designed and executed scientific studies. Previously held and newly proposed elements of EMDR procedure or theory that cannot be validated must give way to those that can.

AIM OF EMDR

In the broadest sense, EMDR is intended to alleviate human suffering and assist individuals and human society to fulfill their potential for development while minimizing risks of harm in its application. For the client, the aim of EMDR treatment is to achieve the most profound and comprehensive treatment effects in the shortest period of time, while maintaining client stability within a balanced family and social system.

FRAMEWORK

EMDR is an approach to psychotherapy that is comprised of principles, procedures and protocols. It is not a simple technique characterized primarily by the use of eye movements. EMDR is founded on the premise that each person has both an innate tendency to move toward health and wholeness, and the inner capacity to achieve it. EMDR is grounded in psychological science and is informed by both psychological theory and research on the brain.

EMDR integrates elements from both psychological theories (e.g. affect, attachment, behavior, bioinformational processing, cognitive, humanistic, family systems, psychodynamic and somatic) and psychotherapies (e.g., body-based, cognitive-behavioral, interpersonal, person-centered, and psychodynamic) into a standardized set of procedures and clinical protocols. Research on how the brain processes information and generates consciousness also informs the evolution of EMDR theory and procedure.

HYPOTHESES OF THE EMDR MODEL

The Adaptive Information Processing model is the theoretical foundation of the EMDR approach. It is based on the following hypotheses:

1. Within each person is physiological information processing system through which new experiences and information are normally processed to an adaptive state.
2. Information is stored in memory networks that contain related thoughts, images, audio or olfactory memories, emotions, and bodily sensations.

3. Memory networks are organized around the earliest related event.
4. Traumatic experiences and persistent unmet interpersonal needs during crucial periods in development can produce blockages in the capacity of the adaptive information processing system to resolve distressing or traumatic events.
5. When information stored in memory networks related to a distressing or traumatic experience is not fully processed; it gives rise to dysfunctional reactions.
6. The result of adaptive processing is learning, relief of emotional and somatic distress and the availability of adaptive responses and understanding.
7. Information processing is facilitated by specific types of bilateral sensory stimulation. Based on observational and experimental data, Shapiro has referred to this stimulation as bilateral stimulation (Shapiro, 1995) and dual attention stimulation (Shapiro, 2001).
8. Alternating, left-right, visual, audio and tactile stimulation when combined with the other specific procedural steps used in EMDR enhance information processing .
9. Specific, focused strategies for sufficiently stimulating access to dysfunctional stored information (and in some cases, adaptive information) generally need to be combined with bilateral stimulation in order to produce adaptive information processing.
10. EMDR procedures foster a state of balanced or dual attention between internally accessed information and external bilateral stimulation. In this state the client experiences simultaneously the distressing memory and the present context.
11. The combination of EMDR procedures and bilateral stimulation results in decreasing the vividness of disturbing memory images and related affect, facilitating access to more adaptive information and forging new associations within and between memory networks.

METHOD

EMDR uses specific psychotherapeutic procedures to:

- 1) access existing information
- 2) introduce new information
- 3) facilitate information processing and
- 4) inhibit accessing of information (Lipke, 1999).

Unique to EMDR are both the specific procedural steps used to access and process information, and the ways in which sensory stimulation is incorporated into well-defined

treatment procedures and protocols, which are intended to create states of balanced or dual attention to facilitate information processing.

EMDR is used within an 8-phase approach to trauma treatment (Shapiro, 1995, 2001) in order to insure sufficient client stabilization and reevaluation before, during and after the processing of distressing and traumatic memories and associated stimuli.

In Phases 3 – 6, standardized steps must be followed to achieve fidelity to the method. In the other 4 phases there is more than one way to achieve the objectives of each phase. However, as it is a process, not a technique, it unfolds according to the needs and resources of the individual client in the context of the therapeutic relationship. Therefore, different elements may be emphasized or utilized differently depending on the unique needs of the particular client.

To achieve comprehensive treatment effects a three-pronged basic treatment protocol is used to first address past events. After adaptive resolution of past events, current stimuli still capable of evoking distress are processed. Finally future situations are processed to prepare for possible or likely circumstances.

FIDELITY IN APPLICATION THROUGH TRAINING AND OBSERVATION

It is central to EMDR that positive results from its application derive from the interaction between clinician, method and client. Therefore graduate education in a mental health field (e.g., clinical psychology, psychiatry, social work, counseling, or marriage and family therapy) leading to eligibility for licensure, certification or registration, along with supervised training, are considered essential to achieve optimal results.

Meta-analytic research (Maxfield & Hyer, 2002) indicates that degree of fidelity to the published EMDR procedures is highly correlated with the outcome of EMDR procedures. Evidence of fidelity in procedure and appropriateness of protocol is considered central to both research and clinical application of EMDR.

ABOUT EMDR:

Eye Movement Desensitization and Reprocessing (EMDR) is a complex, integrative method of individual psychotherapy in which the therapist guides the client through a procedure to access and resolve troubling experiences and emotions. EMDR brings together elements of many psychological orientations, including psychodynamic, cognitive-behavioral, client-centered, gestalt, and bio-energetic approaches to psychotherapy.

WHAT IS EMDR USED FOR?

EMDR is most commonly used to address emotional disturbance related to disturbing or traumatic events. In addition to reactions to trauma, EMDR is used to help troubling symptoms such as anxiety, depression, guilt and anger. It can also be used to enhance emotional resources such as confidence and self-esteem.

RESEARCH FINDINGS IN EMDR:

EMDR is the most clearly researched psychotherapy method for effectiveness with posttraumatic stress disorder, having more double blind, placebo-controlled studies published in peer-reviewed journals than any other psychotherapy method.

HOW DOES EMDR WORK?

The underlying premise of EMDR is that panic and anxiety experiences are processed differently by the brain than are usual experiences. One theory of memory is that during severe stress a part of the brain responsible for modulating emotions (the amygdale) temporarily shuts down another part of the brain (the hippocampus) responsible for usual memory processing.

The traumatic experience is trapped outside of the usual brain processing power, and EMDR allows the client to access the experience and transform it to declarative memory using the hippocampus. With EMDR the hippocampus may not be so shut down by the emotions evoked by the experience so that that the client can withstand while doing the processing.

Distraction by and attention to the bilateral stimulation may play a part in helping the client experience the emotions as tolerable. How bilateral distraction to each side specifically facilitates processing of distressing experiences is not yet understood.

PRECAUTIONS IN EDMR THERAPY:

There are specific procedures to be followed depending on the client's presenting problem, emotional stability, medical condition, and other factors. Specifically, the following may occur:

Distressing, unresolved memories might surface through the use of the EMDR procedure. Some clients have experienced reactions during the treatment sessions that neither they nor the administering clinician may have anticipated, including a high level of emotion or physical sensations.

Subsequent to the treatment session, the processing of incidents or material may continue, and other dreams, memories, flashbacks, feelings, etc., may surface.

Memories of past events targeted for EMDR treatment may be altered (clarity of memory may either be experienced as decreased or enhanced, while associated emotion may be greatly decreased).

FINDING THERAPISTS TRAINED IN EMDR:

It is very important that the therapist be formally trained in EMDR. Otherwise, there is a risk that EMDR could be incomplete, ineffective, or even harmful. EMDR training programs will send a list of local clinicians they have trained.

WHAT TO EXPECT:

EMDR may be used in any phase of therapy depending on the needs and resources of the client. See "Eight Phases of EMDR" below for details of the procedure.

PREPROCEDURE:

An introductory interview (psychiatric evaluation) helps define problems, goals and potential targets. It is also used to assess whether EMDR may be an appropriate treatment modality. Prior to using EMDR, the client's self-soothing skills are assessed and, if needed, reinforced. The entire eight step EMDR procedure is discussed with the client. Usually a Trauma/Resource List is completed by the client.

POSTPROCEDURE:

For up to several days after an EMDR session, the client may feel discombobulated. S/he is asked to jot down any new sensations, feelings, thoughts or insights. These will be discussed in the next session. A measure of distress is taken and any residual disturbance related to the target issue in the previous session is reassessed.

EIGHT PHASES OF EMDR:

A comprehensive description of the EMDR processes can be found in Eye Movement Desensitization and Reprocessing (Shapiro, 2001). The basic EMDR protocol involves an eight-phase process that usually occurs over several sessions. A short description of the process is described below:

PHASE 1: CLIENT HISTORY AND TREATMENT PLANNING:

This phase usually occurs over the first few sessions. Often the person being evaluated is asked to complete an information form that includes questions about current and past medical status, family and childhood history, and current symptoms. During the interview, the clinician asks supplementary questions. These questions include facts about the person's past as well as current and past symptoms.

Detailed information is necessary in order to arrive at an independent assessment of the client's condition. In complicated situations, contact with the person's family may be requested. For children, parents are involved in the consultation. The clinician generally shares his/her impressions with the client and a decision about how to go about treatment is agreed upon.

PHASE 2: PREPARATION

If it is agreed that EMDR would be used in therapy, there are several steps in preparation for the actual processing of the material. A degree of trust must exist between the client and clinician. The clinician explains the theoretical background for EMDR and describes the actual steps in the process.

The therapist learns about and teaches the client self-soothing techniques. One of the techniques is to establish a "safe place" in the client's imagination to which the client can return during times of emotional disturbance. The client lets the clinician know what kind of bilateral attention process he/she would prefer. Safety procedures are discussed and set in place. The client's concerns and fears are addressed.

PHASE 3: ASSESSMENT: PRESENTING ISSUE OR MEMORY:

Assessment begins the core of the EMDR process. The client is asked what the target incident will be. He/she is asked what picture represents the worst part of the experience. The client associates words best go with the picture (or experience) that express a negative belief (called a negative cognition) about him/herself in the present time. Next, the client decides what he/she would like to believe about self in place of the negative thought.

The client assesses the validity of the positive thought (called a positive cognition) relative to the target experience, on a seven-point scale. The client describes the emotions associated with the target event and scales the disturbance on an eleven-point scale. The client describes the related body feeling.

PHASE 4: DESENSITIZATION

The desensitization process begins with the client holding in focus a picture, a negative self-perception and a body sensation associated with a disturbing event. The therapist then helps the client focus on a bilateral stimulus while holding the target event in mind.

The stimulus may consist of rapid hand movements or moving lights in the client's field of vision; alternating tones to the ears; or alternating taps on the hands. These sets of bilateral attention may last from less than a half minute to several minutes, depending on the client's response. The client is asked to clear his/her mind and to allow whatever comes in awareness.

After giving a short description of what thought or feeling that comes up in the client's mind, the client does another set of eye movements (or other method of bilateral stimulation). Over many sets of bilateral stimulation, the therapist guides the client thorough the processing of whatever comes to mind.

PHASE 5: INSTALLATION OF POSITIVE COGNITION

When the processing of the disturbing memory is complete, as measured by the amount of residual disturbance of the memory, the positive thought (positive cognition) is revisited and scaled as to validity in the presence of the original experience. Sets of bilateral attention are applied until the positive thought is experienced as being totally valid.

PHASE 6: BODY SCAN

The client is asked to clue his/her eyes, concentrate on the target experience and mentally scan the entire body. If sensations or lack of sensations are reported, short sets of bilateral stimulation are applied until the sensation subsides or a positive feeling is experienced.

PHASE 7: CLOSURE

The client may continue to process the material for days or even weeks after a session, perhaps having new insights, vivid dreams, strong feelings, intrusive thoughts, or renewed recall of past experiences. These experiences may feel confusing to the client, but they are considered to be a continuation of the healing process. These new sensations and experiences are recorded and reported to the therapist at the next session. If the client becomes concerned or surprisingly disturbed, he/she should call the therapist right away.

PHASE 8: RE-EVALUATION

At the beginning of the next session, the client reviews the week, discussing any new sensations or experiences and reviewing his/her log. The disturbance of the previous session's target experience is assessed to help decide on the course of action. Generally, the eight-phase process is applied to past events, current triggers and anticipated future events related to the target event.

NOTES

CHAPTER 20: CULTURAL and SPIRITUAL SENSITIVITY

OBJECTIVES

1. Identify and acknowledge one's own cultural and spiritual heritage, including one's cultural, values, biases and subjectivity and how it impacts one's attitudes in providing care.
2. Describe the various components in culture and spirituality.
3. Identify and demonstrate appropriate cultural and spiritual sensitivity in one's approach to providing care.

Our Nation today has an extreme diverse racial and ethnical society. Although understanding "cultural diversity" had been one of our goals for many years, learning about each cultural and ethnical group could take years. However, a Chaplain who works in the profession of Law Enforcement has that responsibility from the beginning and the time needed may not be afforded while en-route to a traumatic events.

PROGRAM GOALS

Our goal is to provide a class in which the Law Enforcement Chaplain can confront the dilemma of difference," and our hope is to transcend the difficulties difference implies. We want to persuade Chaplain Leaders to listen actively and ask questions that would help them learn about cultural diversity.

PROJECT DESIGN

If at first you don't succeed, try again. This adage, often taught to small children, became the goal of the staff working on cultural diversity; and we began active listening/learning module for Chaplains, with clarified goals and objectives.

Our immediate goal is to seek to understand differences in knowledge, ideas, and attitudes among persons of diverse cultural backgrounds to improve communication regarding the Chaplains decision making while acting in the capacity of Law Enforcement Chaplains.

Our long-range goal is to elevate the importance of learning about diverse cultures in programs for improving Crisis Intervention and Crisis management by building and enhancing relationships with leaders from diverse communities and to develop and test the effectiveness of a cultural diversity while performing crisis intervention by the Law Enforcement Chaplain.

SELF-ASSESSMENT TOOLS

Completing these activities FIRST is an essential part of your learning. It is designed to assist you in identifying your own cultural and spiritual heritage and beliefs.

The culture in which we are raised greatly influences our attitudes, beliefs, values, and behaviors. Our families taught us how to believe about and treat people who were different than we are.

In order to promote sensitive and effective care to persons from cultures that are different from our own, two things must occur:

1. An awareness of one's own cultural values and beliefs and recognition of how they influence our attitudes and behaviors
2. An understanding of the cultural beliefs and values of others and how they are influenced by them.

There has been a dramatic increase in the population of the United States in recent decades, as well as changes within the population itself. As Pastoral and Chaplain care providers we find ourselves providing service to an environment from many different cultures, traditions, languages, and spiritual backgrounds.

The goal of this system is to provide the agencies in which we serve the best possible care for all. In our multicultural society, the challenge is in determining how we can provide services in ways that are appropriate and sensitive to these differences.

Culturally insensitivity is usually not intentional. It is, rather, caused by not having the knowledge we need to understand another person's frame of reference. Sometimes our insensitivity is a result of our fear of the unknown or of something new, or we try to deny that there are differences by viewing everyone as the same.

At other times, our insensitivity is simply due to time constraints; have too much to do and feel pressured to complete our tasks and move on to the next victim who is waiting.

When we are culturally insensitive misunderstandings can result between the victim, and/or the family's expectations and ours. When miscommunication occur, it becomes difficult for us to provide the best and appropriate care as people vary in their beliefs of the prevention, cause, and treatment of illnesses, mental, physical or emotional as well as in their understandings of the processes of violence, life and death.

These beliefs dictate the practices used to maintain health and to prepare for and experience the processes of life, including death.

Too often we interpret the behaviors of others as negative because we don't understand the underlying value system of their culture. It is a natural tendency for us to assume that our own values and customs are more sensible and right. It is necessary, then, for us to become aware of the cultural assumptions from which we develop our judgments. This is the first step to becoming more culturally sensitive.

Chaplains and Pastoral Care Providers and victims often begin their relationship separated by a huge cultural gap. As providers, we live within the atmosphere of the crisis, violence, death and dying profession, with a set of beliefs, practices, habits, likes, norms, and rituals. These are all factors that comprise a given culture.

We speak a different language filled with our own terminology, and our understanding and beliefs regarding can differ greatly from the population we serve.

Cultural sensitivity and competence embodies attitude, knowledge and skills. It permits individuals to respond with dignity and respect to all people. It is a continuum that encompasses several stages.

We don't become culturally sensitive or competent overnight. It is a process that takes time, attention and self-awareness. Unless we can identify and then step outside our own framework, it can be difficult for us to understand another person's point of view.

Cultural competence can and should occur in both individuals and organizations. It is the state of being capable of functioning effectively in the midst of cultural differences. It is being sensitive not to impose our personal values on someone else because they are different.

It is the ability to establish relationships with people in the midst of diversity. It is celebrating differences, the recognition of similarities, and a clear commitment to seeing differences as differences and not deficits. The culture in which we are raised or in which we work greatly influences our beliefs, values, and behaviors.

Assessing our individual cultural heritage is the first and most important step to identifying what may cultivate or block our communication with and care of a person from another culture.

Self-Learning is a way to begin that process. Culture is the learned or shared knowledge, beliefs, traditions, customs, rules, arts, history, folklore and institutions of a group of people used to interpret experiences and to generate social behavior. Cultural identity includes a number of different things, including:

SYMBOLIC OBJECTS

Such as spiritual or religious items of clothing. When encountering objects, with which you are not familiar, politely ask about their significance, but don't press the issue if the patient or family does not appear willing to explain.

LANGUAGE

Which includes slang terms, words that indicate status, and level of intimacy. Always use surnames unless you are given permission by the person or family member to use their first name.

TOPICS AND PATTERNS OF CONVERSATION

In many cultures, it is inappropriate to initiate a serious conversation immediately. Take a few moments to introduce yourself to the person and family in order to build rapport and trust.

TONE OF VOICE

Use a soft tone of voice, emphasize courtesy and respect, and refrain from harsh criticism or confrontation.

NON-VERBAL CLUES: GESTURES, FACIAL EXPRESSIONS, BODY LANGUAGE AND PERSONAL SPACE

A handshake is customary among many Americans; however it is not always welcome among other cultures where it may be considered rude or intrusive, especially between opposite genders.

CONCEPT OF TIME, INCLUDING PASSAGE, DURATION AND POINTS WITHIN

Individuals who are past-oriented value tradition and doing things the way they have always been done. Present-oriented people focus on the here and now and may be relatively unconcerned with the future, dealing with it when it comes. They may show up late for appointments. Future-oriented people may become so caught up in the "what-ifs" of the future that focusing on the present moment may be difficult.

FAMILY AND KINSHIP STRUCTURE, COMPOSITION AND AUTHORITY

How the family is constructed determines one's values, the decision-making patterns within the household.

SPIRITUALITY AND RELIGION

What one believes affects one's responses to health, illness, crisis, dying, death and other life events. A person's source of meaning and purpose fosters a sense of well-being as well as solace and comfort during times of crisis.

Being culturally sensitive or competent does NOT mean knowing everything about every culture. It is instead respect for differences, eagerness to learn, and a willingness to accept that there are many ways of viewing the world.

The particular behaviors themselves are not as significant as the relationship of those behaviors to the personal values held by the victim and family.

By incorporating sensitivity to cultural beliefs and practices into a person's care, we demonstrate respect and reduce stress due to feelings of isolation and alienation. Spirituality is an important part of culture.

One's spirituality can be religious, non-religious, or both. Spirituality involves finding meaning and purpose in one's life and experiences. It encompasses a person's philosophy of life and world view.

Spirituality is expressed through concepts and ideas about God/the Deity/Higher Power, one's sacred beliefs, and one's religious rituals or practices. There is a significant difference between spirituality and religion.

SPIRITUALITY

Spirituality refers to our inner belief system. It is a delicate "spirit-to-spirit" relationship to oneself, others, and the God of one's understands. *Everyone is a **SPIRITUAL** being.*

RELIGION

Religion refers to the externals of our belief system: church, prayers, traditions, rites, rituals, etc. *Not everyone is **RELIGIOUS**.*

Sensitivity to spiritual issues and the inclusion of spiritual care is an essential and necessary component in the care for the person and the family.

SPIRITUAL WELL-BEING

"An individual who expresses affirmation of life in a relationship with a higher power (as defined by the person), self, community, and environment that nurtures and celebrates wholeness."

Spiritual needs can be identified in a variety of ways:

Environment: visual clues and symbols Bible, Torah, Koran, Book of Mormon, prayer beads, rosary, medals, pictures, foods, cross, Star of David, crescent moon, Buddha, etc.

Behavior: Prayer, meditation, grace before meals, playing music, singing, etc.

Verbalization: Talking about God, prayer, faith community or one's spiritual leader, "It's all in God's hands", "Why?", "A lot of people are praying..." etc.

Interpersonal relationships: Family, significant other, friends, extended family, tribe, church, work, etc

Triggers which can lead to a spiritual focus or crisis in a person's life can include:

PHYSICAL FACTORS

Physical factors such as disease, an accident, or traumatic events, a lack of sleep or food, etc.

EMOTIONAL EXPERIENCES OR TRANSITIONS

Making a commitment such as a significant relationship, marriage, or becoming a member of a faith community, a change in lifestyle, moving, stress, or the loss of a job, marriage, friendship or death.

NEAR DEATH EXPERIENCES

Whether it be one's own or that of a loved one

SPIRITUAL PRACTICES

Such as meditation, prayer, ritual, or church attendance.

SPIRITUAL DISTRESS

"The state at which an individual or group experiences or is at risk of experiencing a disturbance in the belief or value system that provides strength, hope, and meaning to life."

Signs of Spiritual Distress include:

- Crying
- Expressions of guilt
- Disruption of trust
- Feeling alienated from God/Higher Power
- Moderate to severe anxiety
- Anger toward staff, family, God
- Refusal to participate in self helps program

APPROPRIATE INTERVENTIONS FOR SPIRITUAL DISTRESS

Convey a caring and accepting attitude:

Facilitate the process of finding meaning and purpose in life. Attempt to understand the Person or family's way of experiencing and expressing their culture and/or spirituality.

Provide support, encouragement, and respect:

Support faith needs and safely provide time for ritual and devotional practices. Be knowledgeable about different spiritual and religious traditions. Be prepared to cooperate with the family's spiritual leader.

Provide presence:

Be fully present and open to issues as they arise.

Listen actively:

Establish trust and unconditional acceptance.

Refer to spiritual care provider/chaplain for further intervention:

Document:

Know the other members of the Crisis team and what they can provide.

RESPECTING DIVERSE BELIEFS AND PRACTICES

- Preserve beliefs and practices that have a beneficial effect.
- Adapt or adjust those thoughts that are neutral or indifferent.
- Re-pattern those thoughts that have a potentially harmful effect.

Awareness of cultural differences in Chaplaincy is that moment when we realize - if we do realize! - That something much deeper than the surface issue is affecting the relationship between the Chaplain and officer or victim.

Developing our cultural awareness means developing our ability to see when and how good communication is breaking down or could break down.

Many people are unaware of how widely and how surprisingly cultures may differ, thinking that 'if your heart's in the right place, everything will work out.' But sometimes there's more to it than that.

Our emotional reactions to a cultural encounter may range from mild to intense, but it's important to realize that we almost always experience some emotion when we are confronted with values and customs different from our own.

These can range from distrust ("Why don't they look me in the eye?") to awe ("How can they be so stoic?") to anger ("Why do they do that to their kids?") to admiration ("They're so polite!") to scorn ("How can they eat that stuff?")

Rather than acting on these emotions before we understand the other person's perspective, we can recognize them, yet keep them to ourselves (not act on them) until we have more perspective. And we should always remember the other person has emotions about us, too!

Knowledge of cultural differences refers to specific 'facts' we may know about a given cultural group, such as "mainstream Caucasians tend to be future-oriented" or "many Hispanics place the highest priority on family relationships."

Knowledge is different from Awareness in that someone may 'know' a piece of information about a culture but not be aware of when and how that information *comes* into play in real life.

In other words, knowledge is what you may bring with you to an encounter, while awareness emerges during the encounter. Relying too much on knowledge alone can be risky, since one can never know all there is to know about another culture, let alone every culture, and the knowledge you have will never apply to every member of a culture.

People of lower socioeconomic status often have coping strategies and reasoning patterns that are designed to help them function in environments and situations that are radically different than the environments and situations most Chaplain Professionals encounter; hence they may seem irrational to the provider when in fact they are highly functional - in another context.

People of lower economic stature face formidable barriers in following expected procedures for accessing such things as crisis care, emergency care, including: •

Lack of knowledge of how the 'system' is organized, of what is and is not an 'emergency', and lack of personal familiarity with various types of emergency care professionals and thus: Lack of 24 hour access to help such as 9-1-1

You can learn and develop good cross-cultural skills. The skill set that a culturally adept provider has includes:

- Good communication skills
- Ability to recognize cross-cultural encounters (heightened Awareness)
- Proper management of the Emotions involved,
- Ability to find creative compromises to reach a solution satisfactory to all

Some skills that would be useful for the provider in this case are:

- Make sure that person's feel comfortable and acceptable by all personnel.
- A scornful glance or harsh word could be the last straw that pushes them out the door.

Prepare for situations such as emergencies, having a simple rest area for children with books or videos, having a procedure that person's can plan from the counseling session to arranging for transportation home (if offered) or arrange for taxi vouchers to be provided, etc.

These kinds of services not only help the person but also help reduce the stress of the emergency workers as well. Take the opportunity to kindly educate them on how to handle this situation next time.

Explain to her how to call 9-1-1 (if access to a phone). Help her/him how to decide what is and is not an emergency should they become a victim again. Listen to him/her and offer them encouragement and acceptance.

MULTICULTURAL CRISIS CARE TIPS

Don't treat others as YOU would want to be treated: Try to learn how THEY want to be treated. What is viewed as polite, caring, quality care in one culture may be considered rude, uncaring, or even evidence of poor standards of care in another.

Address all adults from other cultures by their surnames unless specifically asked to use a first name: Most other cultures are more formal than American culture and many people who were born and brought up in another cultural environment consider it a lack of respect to address others (or be addressed) by their first names.

Mind your tone of voice: When speaking to a person who seems to have a limited knowledge of English, don't shout!

Remember the person is hard of understanding, not hearing. Speak slowly and softly. Try to avoid words and expressions that are dependent upon one's knowledge and familiarity with American life and culture. You can help improve a person's comprehension of what you are saying by repeating it several times in different ways and using gestures, pictures and other non-verbal forms of communication.

Every culture has its own rules for touching and distance: When either you or the other person breaks any of these rules, the other will feel uncomfortable. For example: Americans often feel uncomfortable when someone stands less than three feet away from them, while most people from the Middle East need to stand almost nose to nose with the person to whom they are speaking.

Traditional Koreans believe that the soul rests in the head and may become uncomfortable, even fearful if a police officer or chaplain pats their child on the head or ruffles his or her hair.

Don't ask a limited English-speaking person or family member: "Do you understand?" If the person nods his or her head or answers "yes" to your question, it only means that the person has heard you, not that he/she has understood your question and agrees with your plan. Try to ask questions beginning with the words "when, where, why, how". Then listen carefully to the answer for clues to the person's degree of understanding or real agreement. You can also check understanding by an agreement by asking the person to repeat to you, step by step, exactly what you have said.

Making a telephone call is just about the most difficult thing to do in a foreign language: Make a concerted effort to lower the stressfulness of making a phone call. When speaking to anyone who has a foreign accent over the telephone, speak especially simply, slowly and clearly. Don't show impatience, and give that person all your attention.

English-speaking cultures, as reflected in our language, tend to be precise and ruled by the dates and the clock: Many other cultures think globally and pay less attention to a particular hour or day than to events or seasons. If a person seems to have difficulty relating to a particular time, day or hour, help this to first connect to another event, such as season, meal time, sunshine, moonlight, etc.

THREE THINGS TO REMEMBER TO PROVIDE SENSITIVE CARE

DIFFERENT IS DIFFERENT; IT'S NOT RIGHT OR WRONG.

Applied to you:

- Each of us is unique because of our own cultures and experiences.
- We are all more comfortable with what is familiar to us.
- We have individual comfort levels for dealing with what we don't know.

- It's okay if you aren't comfortable with something; it just means you have something new to learn about.
- Victims, families – and chaplains – can be your best teachers in the areas of cultural diversity and spirituality.

Applied to Victims and Families:

- Being human, we all have a tendency to think that what we do/think/know is "better", but that's only because it's the lens we happen to look through.
- Victims and families feel the same way about what they do/think/say
- Nobody's better or worse, we're all just wonderfully, beautifully and fascinatingly different.

I'M NOT AFRAID TO ASK (EVEN IF I'M UNCOMFORTABLE)

Applied to you:

- None of us can know absolutely everything about everyone.
- We have a tendency to feel like we look stupid if we have to ask, but the truth is that asking only makes us look interested and caring
- People generally *really* appreciate being asked about themselves.
- Find your resources for cultural and spiritual traditions and use them. **Most often, your best resource is the professional chaplain.**

Applied to patients and families:

- What's true for us is true for victims and families
- They don't want to look stupid and they don't want to "bother" anyone.
- But, because they often get information that:
 - They don't want to hear
 - Have never heard before, and
 - Scares the heck out of them

They don't always actually hear it, so they don't understand it, and may need to hear it again.

A critical part of our job as caregivers is to make sure that they know they need not be afraid to ask.

IT'S NOT ABOUT ME!

Applied to you:

- Sometimes we operate out of our own zones, and our own “to-do” lists, and forget that everything we do here is for the victim, officer or family.
- Remembering that “it’s not about me” means remember that our contact with the Victim, officer or family is about what the needs not *our* schedules, timelines, and agendas.

Applied to Victims and families:

THE NEED TO BLAME SOMEONE WHEN THE NEWS IS BAD:

- If not the Chaplain, the officer or God, or themselves chaplains are often one of the few exceptions
- We are your allies and your resources, because we are trained to be “lightening rods”
- We are comfortable with being uncomfortable
- We know how to redirect people’s feelings, to help their healing and to assist them in identifying and utilizing their spiritual and religious resources

CONCLUSION

One of the most important things a good chaplain can do is be educated in the different cultures, not only for the sake of the chaplain and the work he/she does but for the sake of the police officer, department and community.

In order for the chaplain to be good public relations chaplains, the more knowledge he/she can obtain the better job they can do and the more effective they become in dealing with people in general.

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