Understanding Cop Culture

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Driving Priorities for this Presentation

- Mental health providers/organizations may lack the cultural competence to meet law enforcement personnel "where they are"
- Law enforcement profession is in crisis
- Law enforcement agencies are working to better support their personnel
- Increasing numbers of law enforcement personnel are/will be seeking mental health services
- Community Law Enforcement relations are in turmoil



A professional Community in Crisis



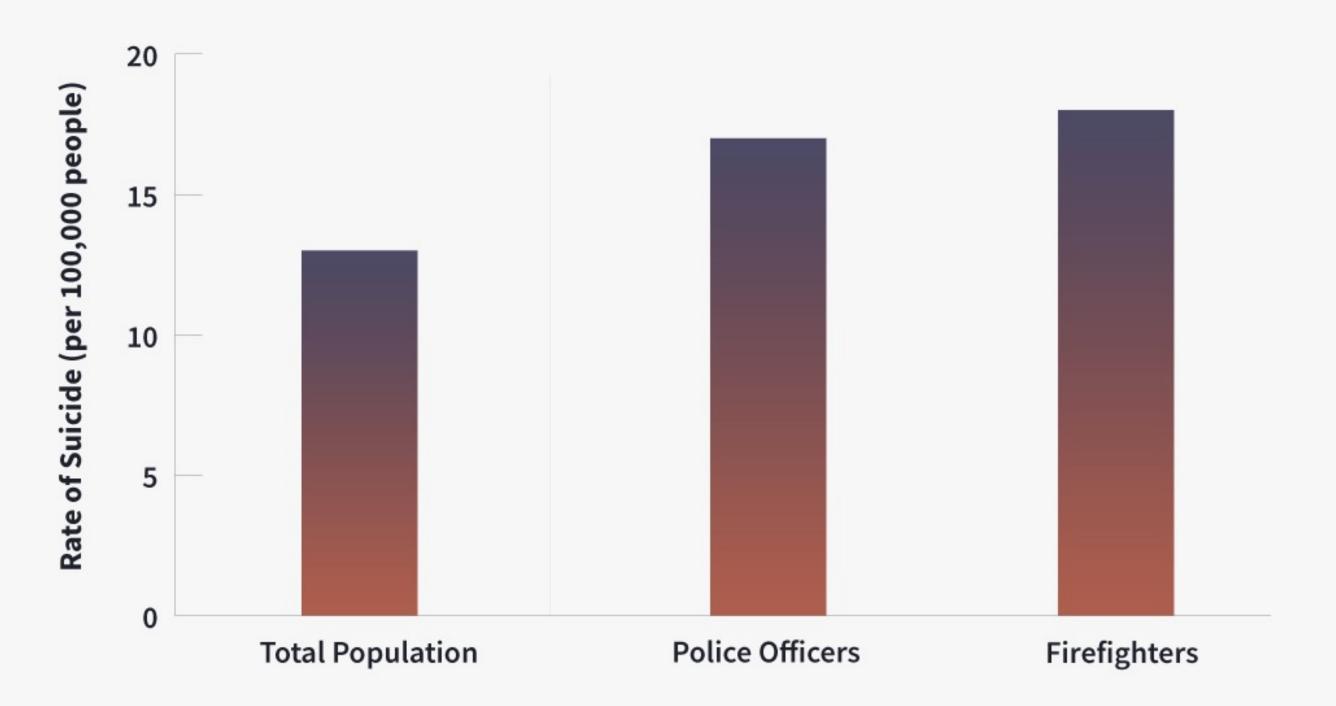
Law Enforcement *Line*of Duty Deaths vs. Deaths by Suicide

Year	Line of Duty Deaths Source FBI	Deaths by Suicide Source Bluehelp.org
2016	118	149
2017	93	174
2018	106	179
2019	134	237
2020	126*	171
202 I thru 3/2 I	33*	33

LEO/FR Suicide Rates = 18 per 100,000

General Population Suicide Rates = 13 per 100,000

Suicide Rates Among Firefighters and Police Officers



Source: Heyman, Miriam; Dill, Jeff; Douglas, Robert. "The Ruderman White Paper on Mental Health and Suicide of First Responders," Ruderman Family Foundation, April 2018. Accessed March 26, 2019. www.rudermanfoundation.org/white_papers/police-officers-are-more-likely-to-die-by-suicide-than-in-line-of-duty/

Created by: Counseling@Northwestern, the Online Master of Arts in Counseling Program from The Family Institute at Northwestern University.



We need you (desperately) And we fear you!

"Come love me, go away!"

Us Versus Them Polarization Cops as Entertainment



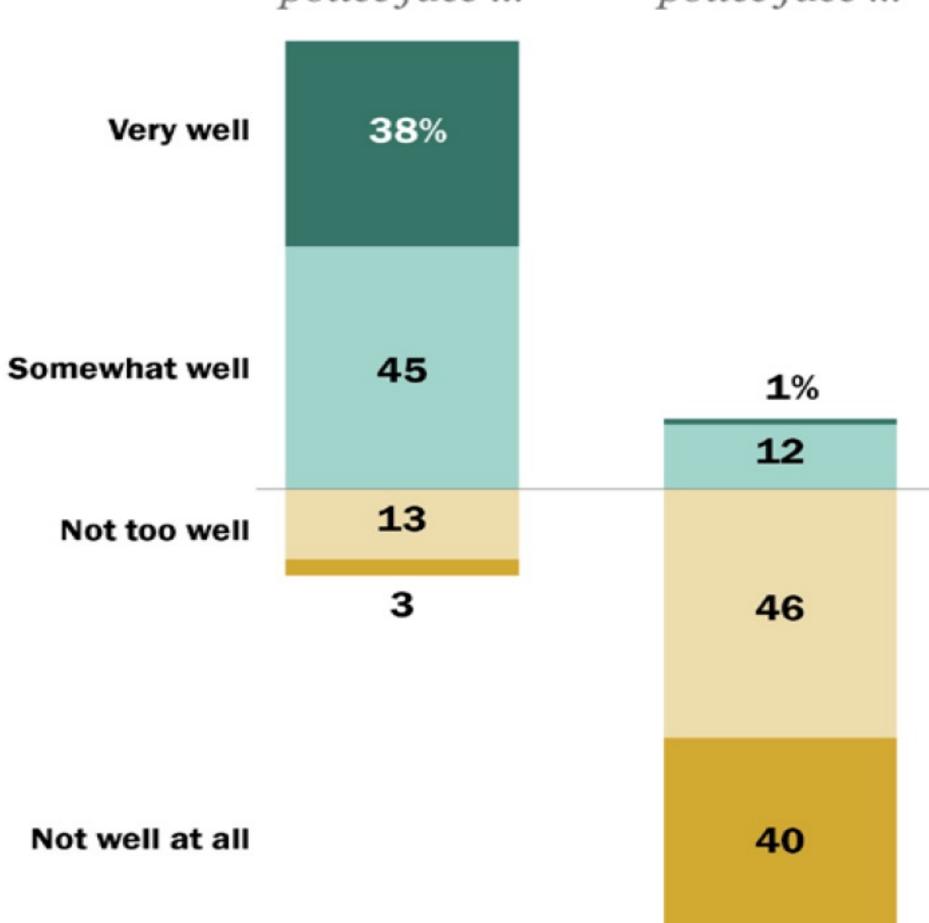
Do Americans understand the challenges police face on the job?

Public says yes

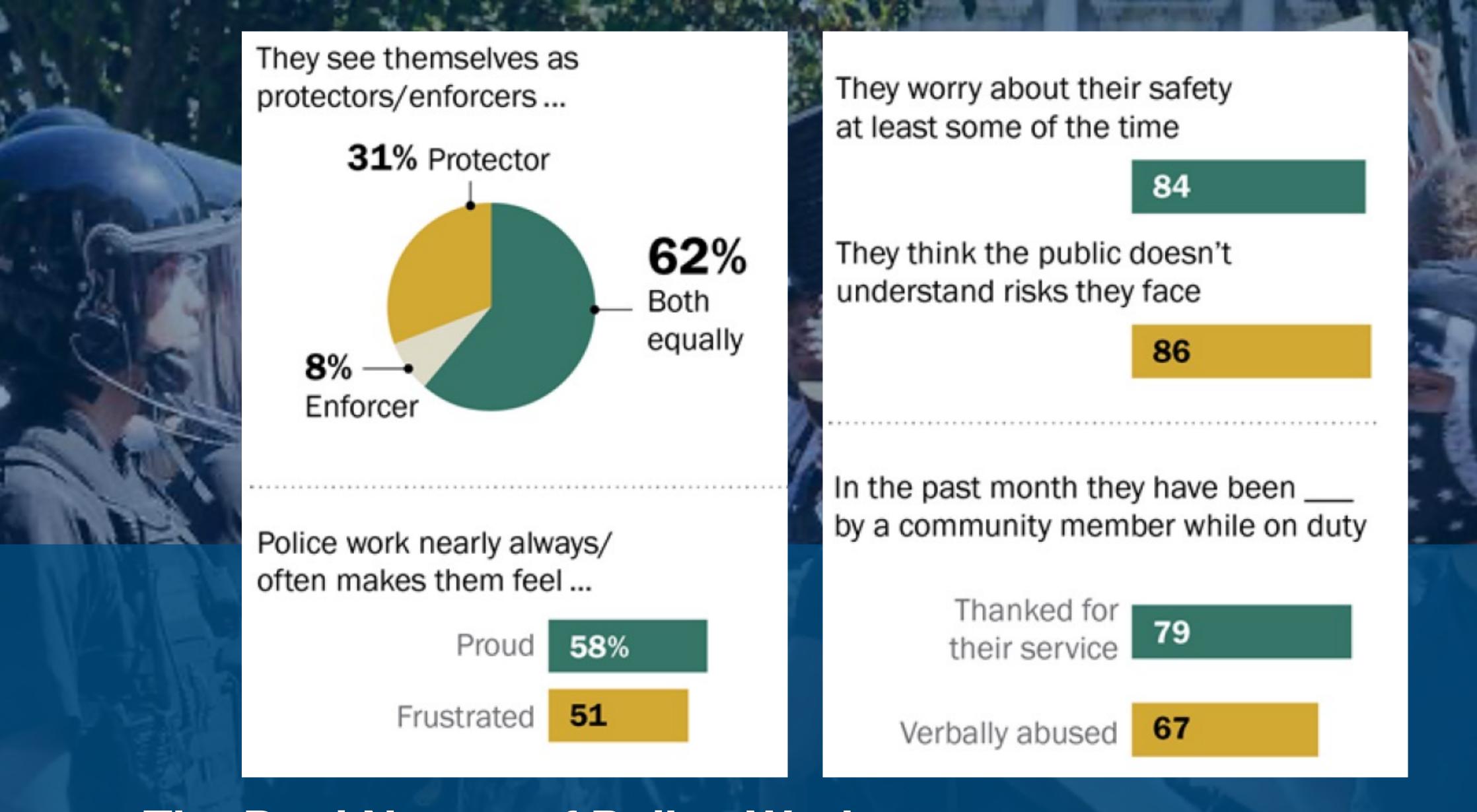
% of public saying they understand the risks and challenges that police face ...

Police say no

% of officers saying the public understands the risks and challenges that police face ...







The Dual Nature of Police Work: For Officers, Emotions and Experiences are Often in Conflict

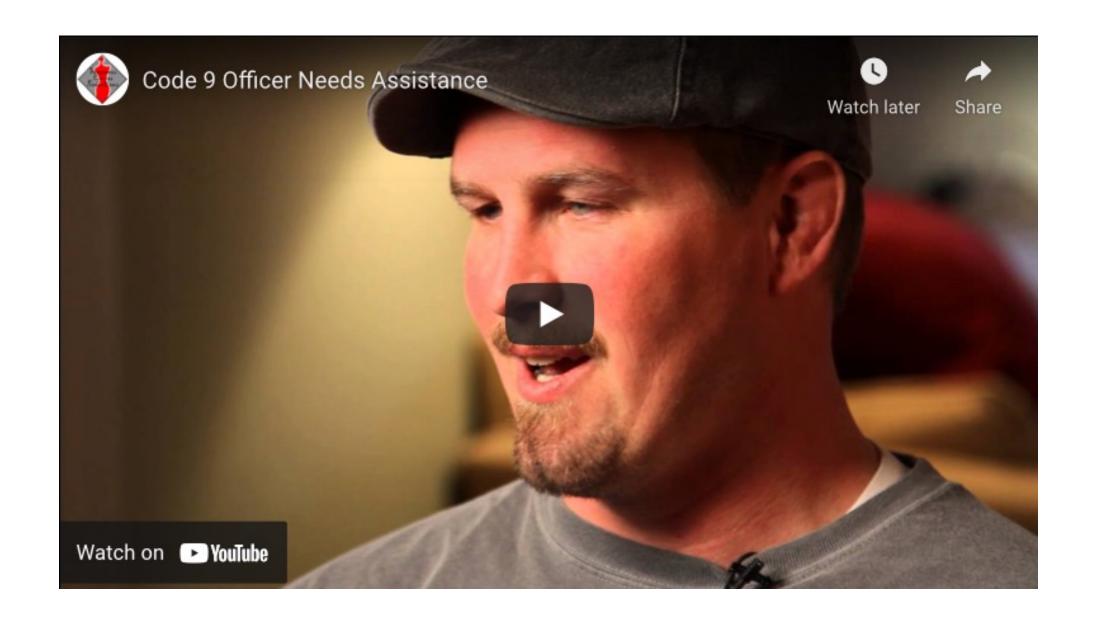
Cop Stress - Cop Culture

Operational Stress



Organizational Stress

Traumatic Stress



CODE 9: OFFICER NEEDS ASSISTANCE

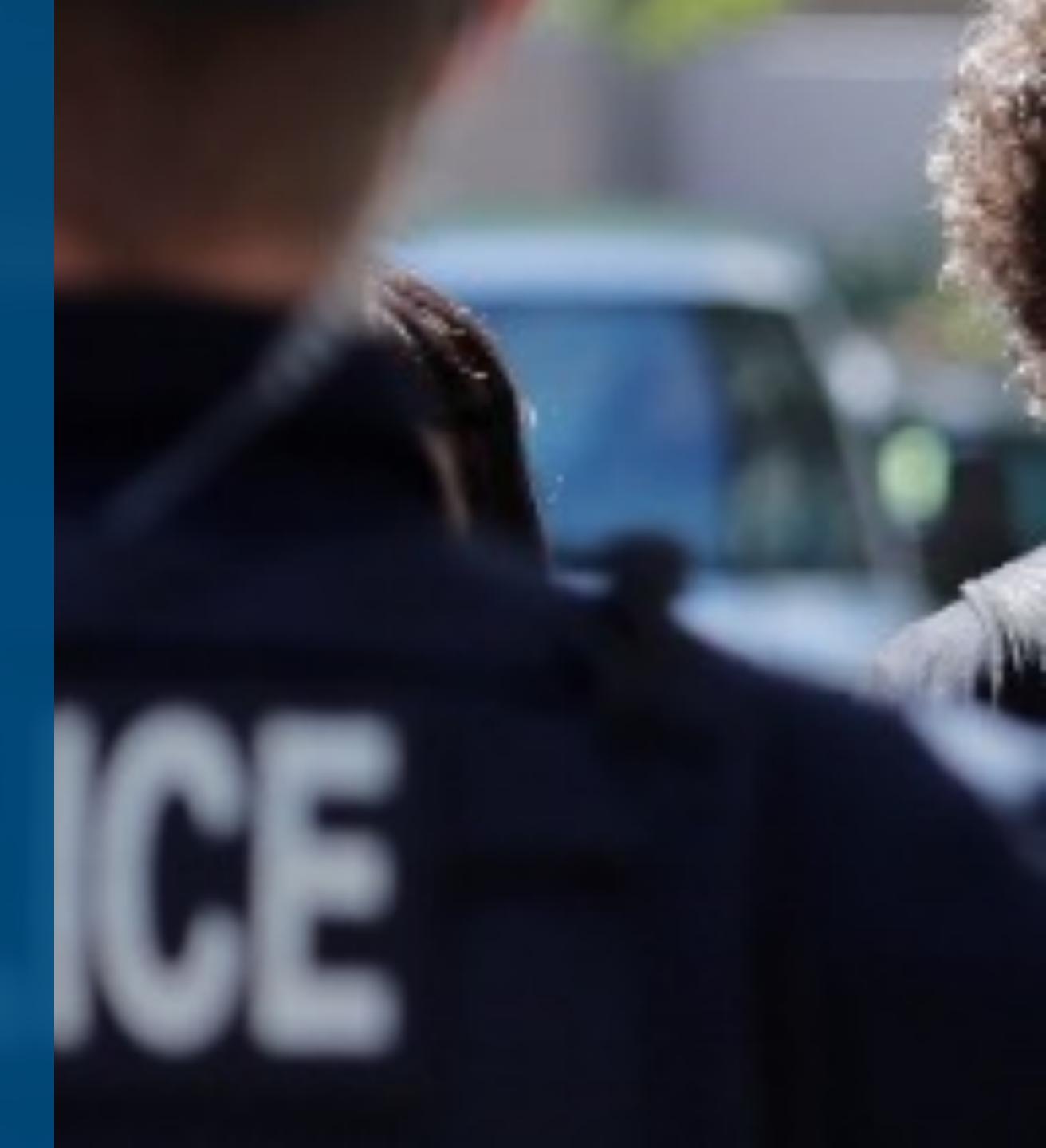
Cop Operational Stress

Policing- possibly the most dangerous career in modern society



Operational Stress

- Isolation- cops frequently work alone
- Unpredictable danger- guard must always be up
- Cops run into the fight, back-up other FRs
- Work ethic/attitude is about safety and survival in the context of risks other people don't take
- Engaging with "people at their worst"
- Unpredictable/rotating shift work- 24/7 operations
- Low pay- over time and "secondary" are essential
- Understaffed
- High workload
- Multi-tasking
- Community expectation: see and prevent, not just respond
- Protector Enforcer Duality, often contradictory "hats"
- Rapid decision making by heuristics



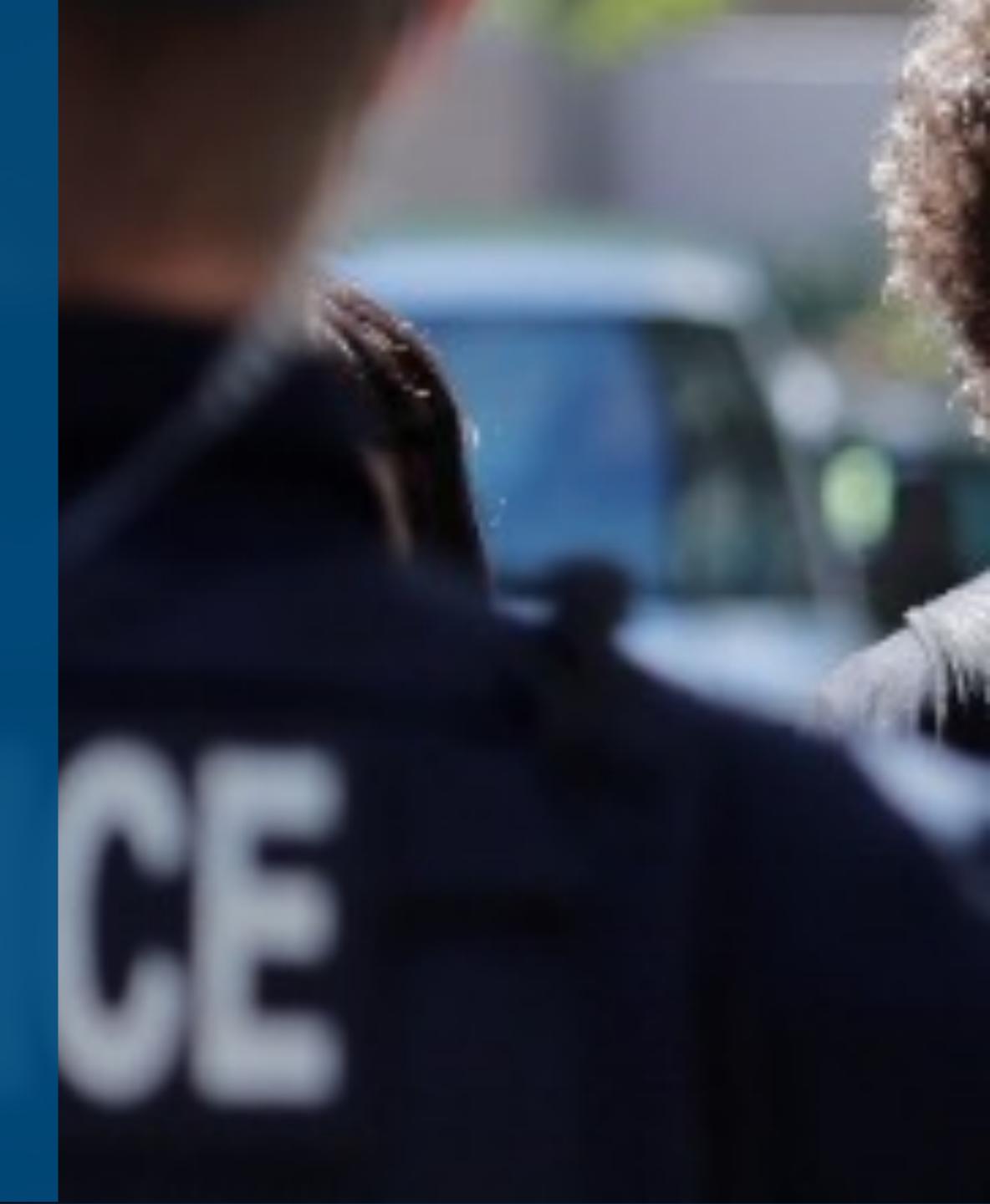
Cop Organizational Stress

Cultural context: rigid ideals vs. lived experience



Organizational Stress

- Politicization of agency- command staff report to politicians
- Workplace culture- insular group attitudes and behaviors
- Prove your adequacy
- Invulnerability- pretend to be OK when you're not
- Co-worker work ethic and interactions
- "Gallows" humor
- Bonding through "harassing"- giving each other crap
- Administrative and supervisory practices
- Favoritism vs. meritocracy
- Evaluation practices
- Recognition practices
- Internal affairs/OIS investigations
- Public image- officer's and agency's
- Media boundaries





Cop Stress: The Consequences

- Systemic Distrust and Cynicism- towards others and organization
- Delayed Officer Response- situational reluctance, officers feel "handcuffed"
- Chronic Vigilance- habituated heightened alertness- can lead to over reactions and rigidity
- Sustained Hypervigilance- "Jacked Up", near panic state in which sensory inputs are narrowed and decision making processes break down (lower brain dominates)
- A "New Normal"- an officer's stress baseline resets at increasingly higher levels



Traumatic Stress and PTSD

Trauma incurred may be more than the identified critical incident

- Primary trauma- LODT, LODD, OIS/PSTLE (Adler-Tapia, 2012)
- Secondary trauma or vicarious trauma- witnessing and responding to trauma of others
 - * Systematic desensitization or habituation does not occur
 - * Increased risk for compassion fatigue
- Betrayal Trauma- stigma and shame experienced for needing help, loss of inclusion in "police family"
- Institutional trauma- Politicization of agency/command staff; shaming abandonment
- Trauma after the trauma- criminal charges, peer/command staff 2nd guessing, forensic/IA investigations, media/public demonization
- Traumatic context- Cop culture expectations, e.g. emotional suppression, surrounding traumatic event can delay PTSD symptom onset

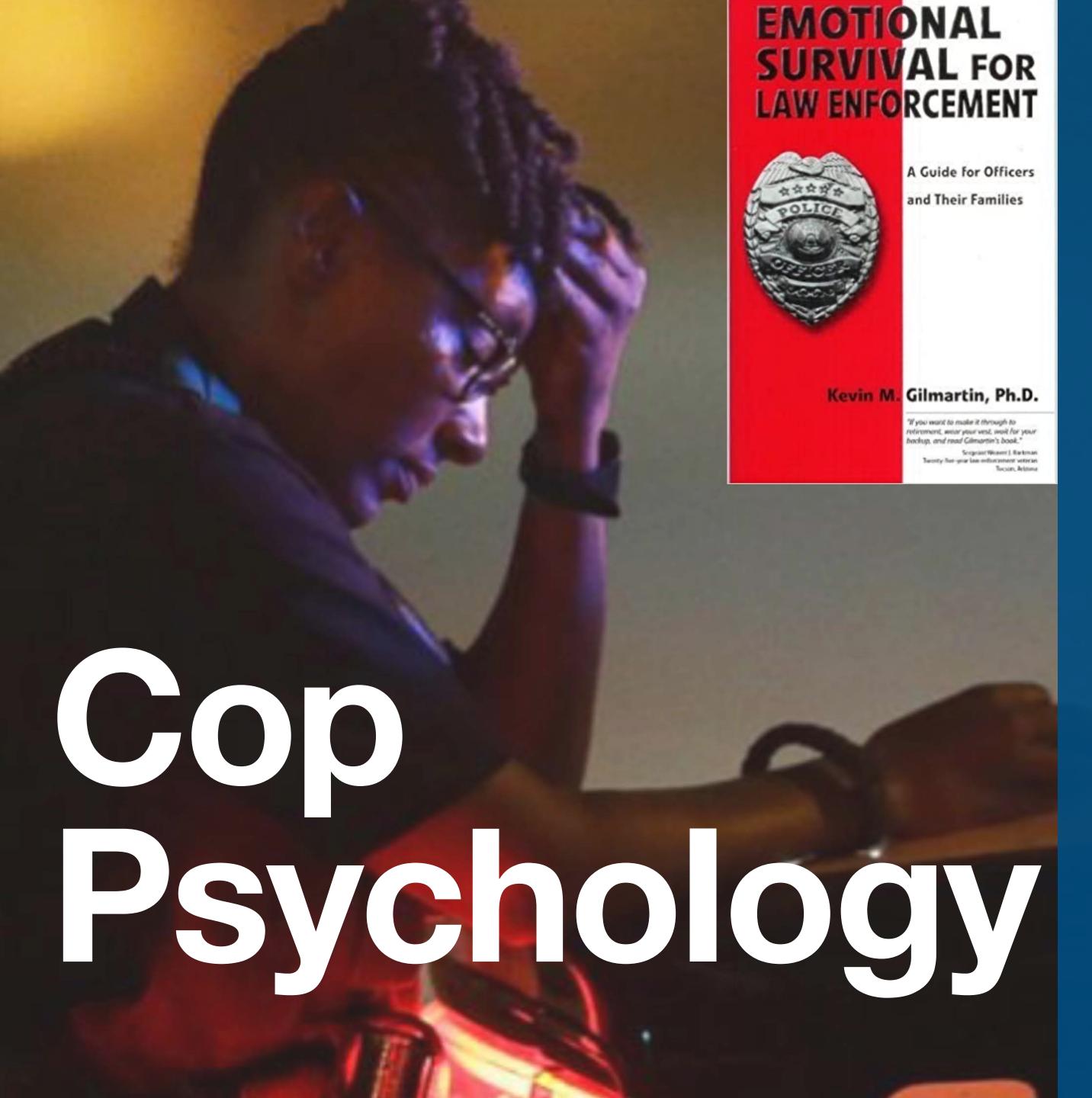
Moral Injury

• Moral Injury- damage to a person resulting from a normal response to an extreme contradiction or violation of deeply held moral expectations- the betrayal of what's right- loss of identity and core self:

"Now that I have done/seen/allowed this, how do I belong/trust/go on?" "Who am I now?" "With whom do I belong?"

- Moral injury is NOT a disorder but rather a
 psychic wound that raises risks for MH disorders
 and increases the risk for suicide- a psychic
 "sepsis"
- Healing from moral injury is a process of rebuilding one's self and one's place amongst others, rooted in forgiveness- of self and society.





• Kevin Gilmartin, Ph.D., Emotional Survival for Law Enforcement

Hypervigilance Biological Roller Coaster ® Magic Chair ®

Coping with chronic exposure to trauma necessitates continuous "superhuman emotional strength"

Compartmentalization- blocking emotions and memories out

Containment- emotional suppression

Stoicism- cultural expectation- suffering while appearing "fine"

Depersonalization- experiencing event but feeling like it's happening to someone else Derealization- experiencing event but feeling like the event isn't real Dissociation- bodily disconnection to detach

Chronic use of these coping strategies can result in delayed onset of PTSD

from reality (of experience)

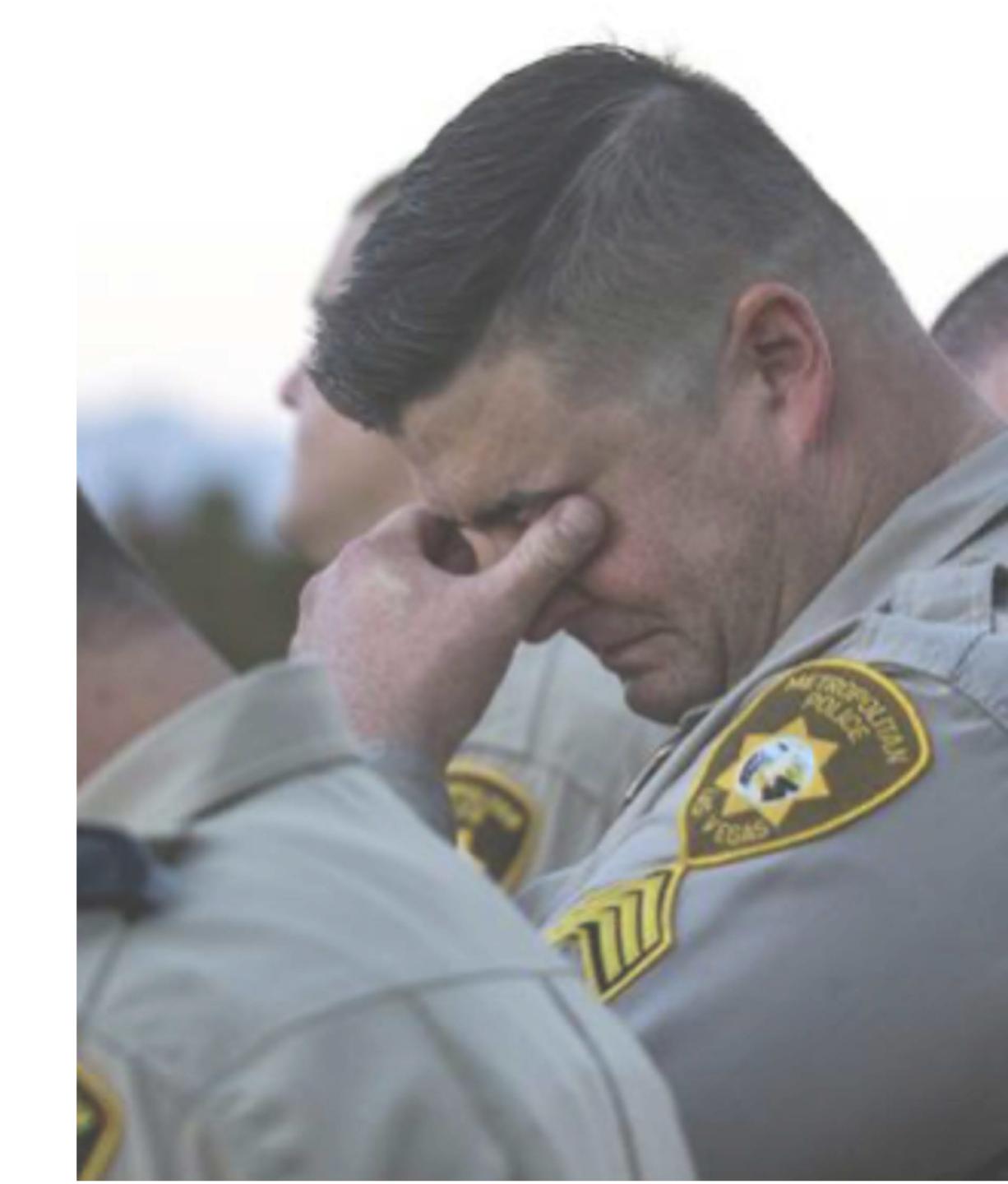
The Cop Journey



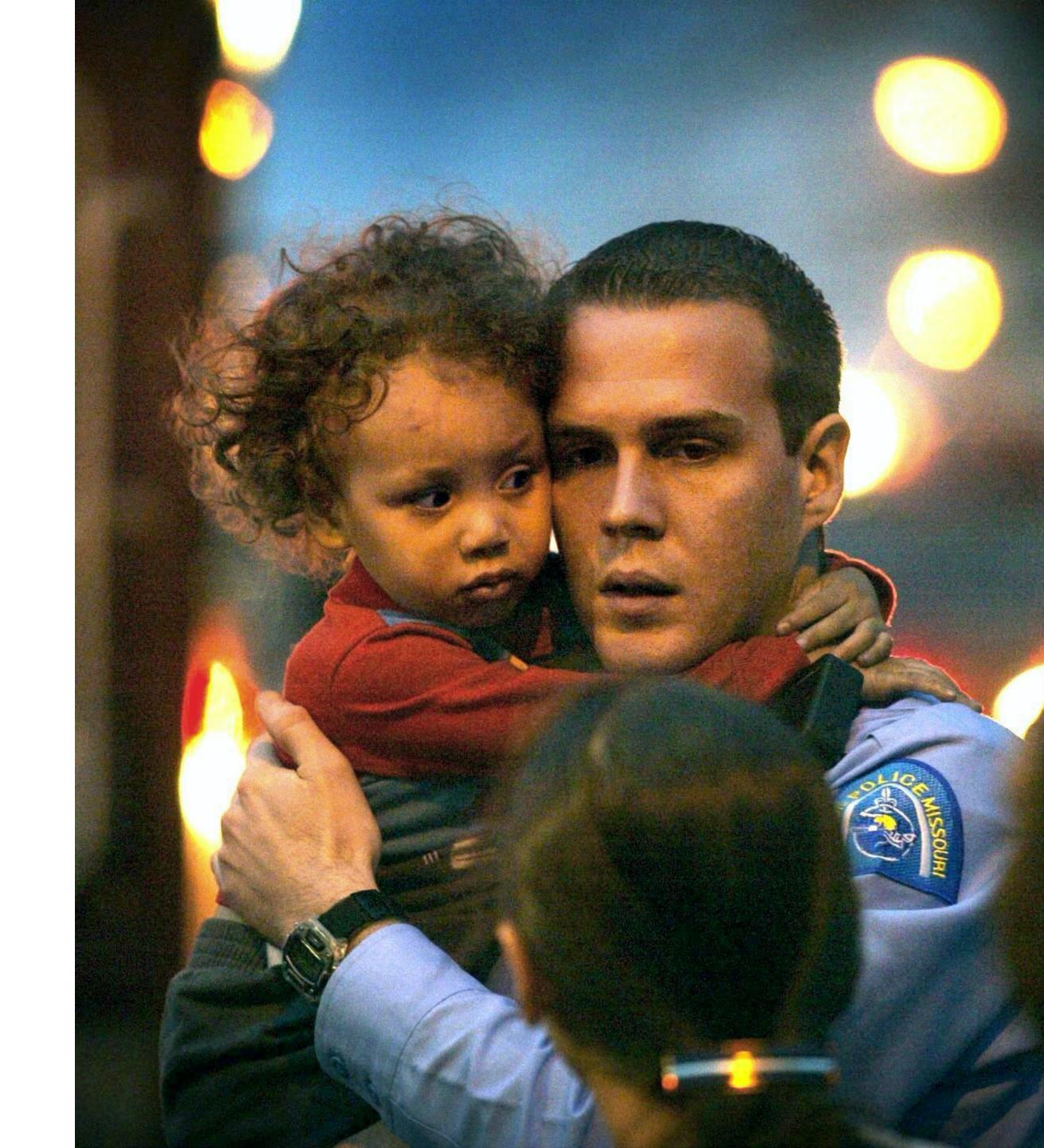
A Journey...
from idealism to cynicism,
from enthusiastic optimism to pessimism,
from easy going to angry rigidity.

The Cop Journey

- I. Cops spend more time in the culture of the "family" of officers than in the culture of their family- relational styles are split between two very different worlds
 - Functional social-emotional overlap is minimal
 - Decreased intimate connections and support systems
 - Overvaluation of self-reliance and isolation
 - "All or nothing" cognitive style
 - Shame and stigma associated with needing help/help seeking
- 2. Metrics for success??? When every scenario involves somebody's failure...
 - Survival/harm mitigation- for self and others
 - Trust and Respect among peers- the "family"
 - Job fulfillment- making a difference(?)
 - Awards/recognitions- conflicted?!
 - Job performance evaluations



- I. Presenting issues will probably not be work related (unless work generated referral)
 - a. Marital/family/relationship issues
 - b. Anger management
 - c. Depression and anxiety
 - d. Physical health concerns/substance misuse
 - e. PTSD/Moral Injury
- 2. Individual developmental histories (ACES) at least as frequent as overall population
- 3. Work stress- cop culture- intertwined with and exacerbating presenting issues

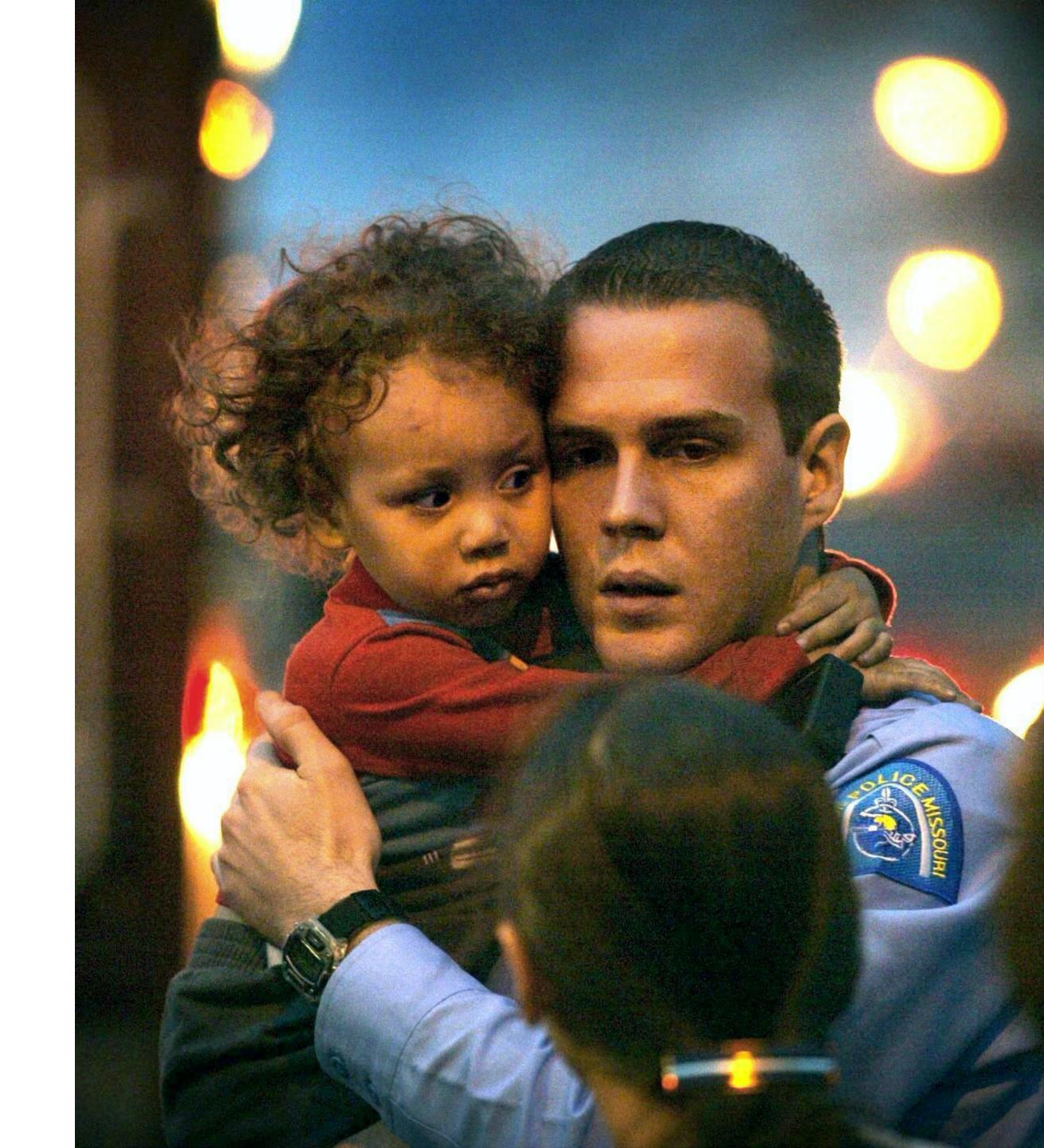


- I. Immediate priority: stabilization and symptom reduction
 - Because they need to get back to work immediately!!
 - Immediate relief increases likelihood of buy-in for future sessions
- 2. Trust and Safety Building- "Do I belong here?" Commonality of "mindset"
- 3. Dominant coping strategies involving escape and avoidance
 - Social isolation- hard to feel normal among non-cops
 - Discarded interests/outlets, "I usta _____" (Gilmartin 2018)
 - Alcohol and substance abuse



"High Risk" Presenting Themes

- I. Eroding identity- am I making a difference?
 - Diminished sense of purpose and fulfillment
 - Increasing isolation
 - Reduced pride in professional and personal roles
- 2. Failure and Shame- what's wrong with me?!
 - Self-perception as weak and inadequate for being effected by stress/trauma in work
 - Self-blame for effects of trauma experiences
- 3. Cultural Disenfranchisement- from police family
 - OIS/use of force investigations
 - Professional/personal invalidation- I/my service doesn't matter
 - Loss of trust across relationships



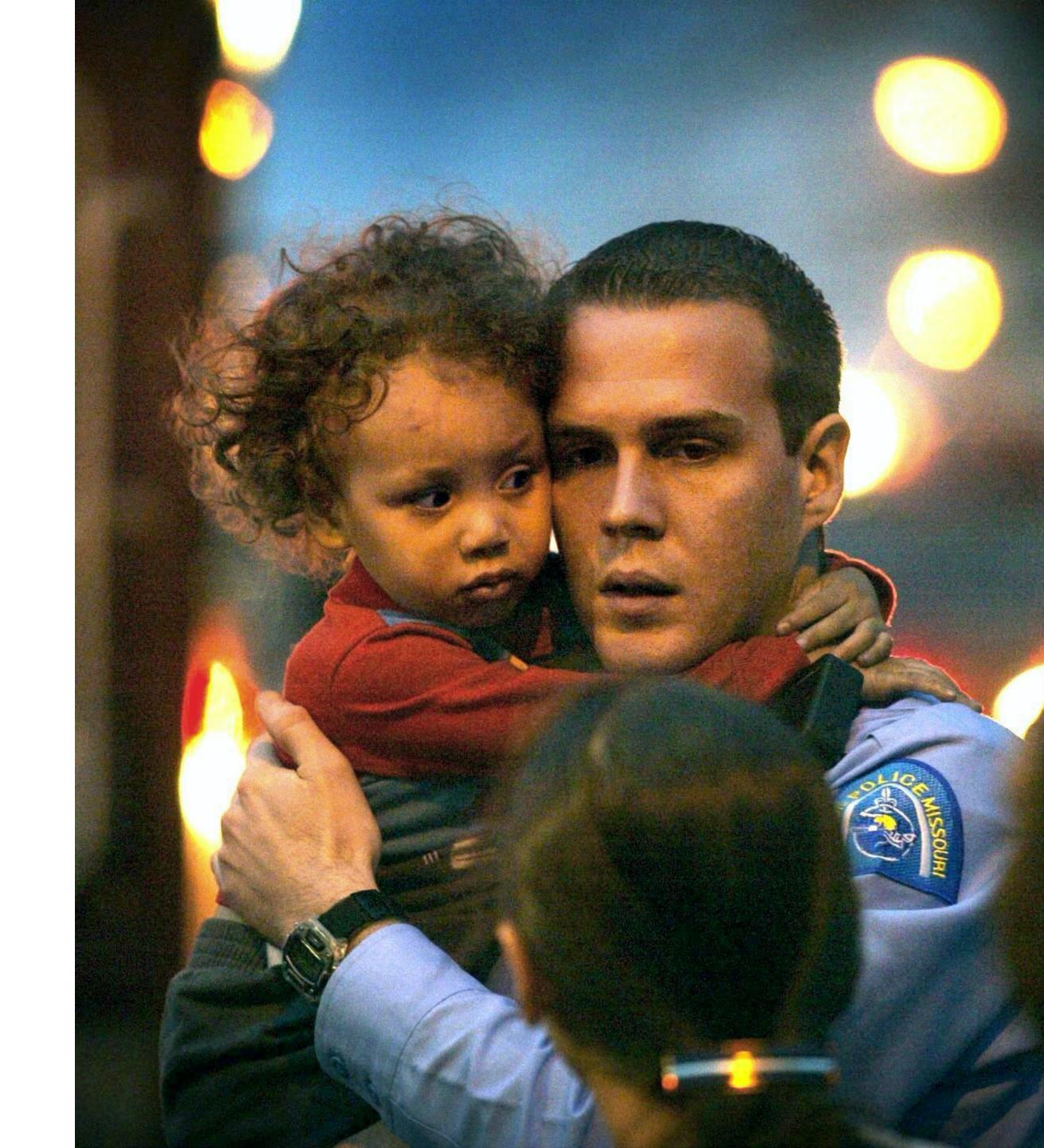
Envisioning the Treatment Process

- History taking takes back seat to immediate need for relief
- Relational and self-regulation skills development- cops are all about training
- Trauma informed, body focused interventions, EMDR, ART, Somatic Sensory
- "Communalize" stress and trauma experiences through sharing of stories in empathic, open communities, e.g. nurturing partners, peer support networks



Complicated referrals- who initiated the referral?

- I. Post traumatic forensic involvement
 - Criminal investigations and/or civil litigation
 - Officer involved shooting
 - Workers compensation
- 2. Command staff initiated referral and expectations
 - Fitness for duty assessment?
 - Who are we working for? (challenged boundaries)
- 3. Vulnerability of therapists notes to subpoena



The Deeper Dive pg. 1

RIDE ALONGS: minimum 2-3

LEA Trainings, e.g. Crisis Intervention Team (CIT), Force Science

Institute

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