## Presenter: Sydney Penley

The question that is being asked in this paper is whether police departments should require their offices to go to counseling. Police departments today do offer officers counseling but it's not so much enforced, it's merely an option, something that is there if they see fit to use. Many officers don't want to admit something is wrong, no one wants to admit if something is wrong, let alone an officer of the law. Officers are supposed to be tough and supposed to be fearless, someone who is willing to rush into danger head-on. Sadly, no one looks past all of this and looks at how this could affect an officer. Police officers are people too, not machines like many make them out to be. The purpose of this paper is to dive deep into the struggles an officer faces and the horrors an officer faces while on the job, it is to provide an understanding of why counseling is important within police departments.

The following research used a paper and pencil survey to assess programming for mental health and wellness in 7742 law enforcement agencies throughout the United States. A total of 465 respondents provided data to two open-ended questions to share several types of programs and services that would be beneficial for agencies to support officers who experience job challenges or stress. The qualitative data was analyzed via constantcomparison method by two independent coders who engaged in several techniques to aid in trustworthiness. The resulting themes included officer wellness initiatives, counseling, and the role of the overall agency culture to provide access to support and for reducing the stigma for police seeking services for mental health. Implications include the need for program and policy changes within law enforcement agencies.

# Mental Health in Police Departments, **Counseling: Yes, or No?**

### Table 2.

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### Table 5.

**Perceptions of Use of Mental Health Services** 

Prevalence of Mental Illness Diagnoses and Positive Screening Results for Mental Illness Symptoms Among 434 Police Officers

Variable	Lifetime diagnosis $(n = 54)^{\underline{a}}$		Positive screening resu
	Not current (n =	Current (n =	114) <u>b</u>
	28)	26)	
Anxiety	10 (36)	26 (100)	39 (34)
Depression	11 (39)	11 (42)	50 (44)
PTSD	19 (68)	0	69 (61)
Suicide ideation or self-harm	0	0	21 (18)
Sought mental health services in past 12	9 (32)	9 (35)	19 (17)
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Abbreviation: PTSD, posttraumatic stress disorder.

<sup>a</sup>Depression, anxiety, or PTSD. <sup>b</sup>Positive screening result for depression, anxiety, PTSD, and/or suicidal ideation or self-harm symptoms in past 2 weeks.

Perception	Examples
Lack of knowledge that an officer is experiencing a mental health issue	"The stress level, we get so accustomed to having to norm for us"; "Numb to it"; "You may not realize he needing that stuff because a lot of stuff, you go bac you're at a worse spot, you're at a better spot. You like that"; "Yeah, I'm fine. I'll deal with it. It's just back"
Concerns about confidentiality within the department	"It doesn't mean that it's confidential and nobody he department, and if you do, you're an idiot"; "This p school. Words get out here and there"; "You didn't saw you and so-and-so told so-and-so"
Belief that psychologists cannot relate to their occupational duties	"My reaction is 'So what? Who are you?"; "I don't somebody that has no clue what I'm trying to say" here I don't want to talk to them"; "I don't want to get it. They don't know. They don't understand. The the eye and say 'I get it and understand.' I look at to don't.' 'No you don't, go back to class, go back to so you came from"
Stigma that officers seeking mental health services are not fit to do their jobs	"I think it's more so that nobody feels they need to about it, well, people that go there, they got someth they can't handle"; "There's also the reprisal if you

sult in past 2 wk (n =

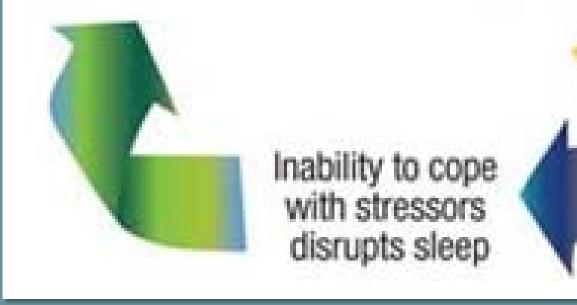
the stress that that's the how close you are to ack and forth between kinda get used to being ist a bad time and I'll come

here trusts this place is like a high i't tell anybody. Somebody

on't need to talk to "; "Unless it's someone to talk to them. They don't 'hey'll look you square in them and I go, 'No you school, go back to where

to go. When you think thing wrong or an issue ou go see a shrink, you're

Disrupted sleep increases fatigue Fatigue diminishes ability to cope with stressors in a healthy way



Fatigue can: •Impair an officer's mental and physical ability.

- •Create a cycle of fatigue.
- •Limit job performance.
- •Damage an officer's health.

Table 2 : Among officers with a current mental health diagnosis, 9 (35%) sought services in the past 12 months. Among those who screened positive for mental health symptoms, 19 (17%) reported using services in the past 12 months.

References Crowe, A., Averett, P., Bonner, H. et al. "Let them know it's okay to get help": Addressing the Mental Health Needs of Police Officers. Adm Policy Ment Health 49, 613–622 (2022). https://doi.org/10.1007/s10488-022-01187-1 National Institute of Justice, "Officer Work Hours,

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