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**Preparing Police Officers for Retirement:
Financial and Emotional Wellness**

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ABSTRACT

Retirement is often a stressful transition from the security of an everyday routine to the peril of the unknown. Those facing retirement think they are prepared because of a fund they set up in the beginning or elated because of the amount of time they will have on their hands. Unfortunately, for some, that is not the case. Especially for those, such as police officers, that have careers that are exasperating.

Police officers spend the majority of their career handling the negative aspects of today's society. By the end, they have spent a preponderance of time witnessing and controlling the aftermath of destruction, abuse, betrayal, and even death. They are expected to deal with these disparities yet remain emotionally detached. Police agencies have procedures in play for the mental well-being of officers when it comes to initial hiring and on the job incidents or trauma, but nothing is aligned for those faced to deal with the years following retirement and the emotional distress that may follow.

Likewise, even though pensions are set from the start, officers are not equipped to handle financial planning after retirement. The average salary earned after retirement is only a fraction of what they are accustomed to which makes just the basic necessities a struggle for some. As they age, health care costs, along with cost of living expenses will only continue to rise, yet their income will remain the same. Officers need guidance for preparation of this stage and departments should offer financial planning to help them adjust. Agencies should prepare police officers to understand common emotional consequences and plan financially from the beginning for the end.

TABLE OF CONTENTS

	Page
Abstract	
Introduction	1
Position	2
Counter Arguments	9
Recommendation	12
References	14

INTRODUCTION

A career in law enforcement is unique and differs from most other careers. According to the US Census Bureau, the average age of retirement for most people is 63 years of age. What is unique to a career in law enforcement, as it applies to retirement, is that police officers are eligible for retirement mid-career between the ages of 40 to 45 years old. Although this seems like an ideal situation to have such a young retirement age, sometimes it can be detrimental if officers do not plan for their future in advance.

According to Tiffany (2003), “younger retirement means more years of retirement but fewer years to prepare” (p. 3). Agencies should provide this planning for officer as soon as they are initially employed. Not only should they plan for their financial future, but also for their emotional survival after retirement. Most agencies have policies and guidelines in place for officers dealing with these issues while serving, but nothing is in place for them after they are retired. Nothing prepares them for the pitfalls they will face during this time.

Officers need implementations in place to avoid complications. They need agencies to help them adjust their lifestyle so they can deal with the financial differences and emotional consequences of the job. They do not need just a onetime overview of someone showing them what they are putting into their pension and then a yearly summary by mail. They do not need a onetime initial hiring psychological evaluation to tell them if they are stable. They need periodic meetings that help them understand financially what retirement will be available for them. They need a mental wellness evaluation, not only when they have experienced a traumatic situation at work, but also

at regular intervals throughout their career to make sure they have maintained that emotional well-being. There are too many cases of officers struggling for financial stability and emotional wellness after they retire. Officers end up working many off-duty jobs because of overwhelming debt, which in turn leads to the stress that pushes them to an unhealthy emotional state. Police agencies should establish procedures to help officers plan for financial stability and deal with emotional stress from the beginning of their career until the end to ensure a successful transition into retirement.

POSITION

Police agencies should incorporate financial and wellness plans into the education and training of their officers from the beginning of their career until the end of their career. This type of education or training could prevent costly decisions that could affect officer's life after retirement and help make the transition into retirement less stressful. The officer would also be able to cope with the trauma experienced throughout their career and be emotionally able to deal with the stress of transitioning into retirement.

Gilmartin (2002) explains that when police officers experience depression, one of the coping mechanisms is to go shopping. The term Gilmartin has given this is "retail therapy." He goes on to explain that "retail therapy" leads to the person feeling more energetic making them feel better. There is a difference between the way men and women behave when engaging in this type of behavior. Women typically purchase conservative or small ticket items that do not affect their families' finances greatly. The males on the other hand like to purchase "big ticket" items such as cars, boats, or recreational vehicle. These large purchases drastically affect the family finances. This

type of behavior is typically repeated throughout an officer's career. Gilmartin (2002) calls this cycle of retail therapy as stress related consumerism. This cycle takes away from the officer's sense of financial security and is frequently why police officers have to remain working in law enforcement long after they are eligible to retire. They never make an adjustment to figuring out a savings. Tiffany (2003) claims that a mere 38% of Americans do the most basic retirement planning (p. 4). In fact, almost 50% have put back less than \$10,000 for retirement (MacKenzie, 2017). This is even more reason to direct the focus to changing daily financial behaviors than just setting up plans. Officers should be exposed to the risks of these "big ticket" items and taught to keep debt low and manage their money from the start.

Many police officers want financial security and many police agencies offer police officers many different ways to create financial security. Usually police officers tie their financial security to their pension fund. Yet there are many ways for officers to improve or increase their financial well-being. This is accomplished through the different financial plans offered by a police agency that are separate from the pension fund. Officers are not usually aware of these programs, or they do not have an understanding of these programs. They lack the education to make informed decisions to improve their chance of financial security and entering into retirement with a lessened sense of stress. Some even opt out of setting up any extra supplemental contribution, such as deferred compensation plans because they feel their pension will be plenty to meet basic needs after retirement. In actuality, only 30%-50% of employees participate in supplemental plans (Willett, 2005). Agencies should look at making these optional supplemental plans mandatory. They definitely need to continuously educate officers

on the need of these plans and help them plan a better future because officers cannot be totally dependent on their retirement benefits.

Another reason retirement is so difficult for an officer is retirement is at an early age and because retirement is lasting longer. People are living longer and the retirement lifestyle is more active than ever before (Willett, 2005). Most people base retirement on lasting about fifteen to twenty years on average, but police officers can be retired for about double that amount of time. So, imagine the concept of saving for a longer retirement in a shorter amount of time. This is why it is so important for officers to understand the limitations of funds from pensions and other savings. It is difficult to estimate retirement due to cost of living fluctuation and life expectancy, but there is no reason agencies cannot prepare their officers for it by providing them more professional advice over the years. Agencies need to realize that a one-time planning session cannot account for the hardships the officer faces between hiring and retiring.

Police officers go through two major transitions, the first being when they enter the law enforcement career and again when they leave the law enforcement career. (Paton, Violanti, Burke, & Gehrke, 2009). The social and psychological events in an officer's early years in their career can have lasting effects that may not become evident for several decades. These social and psychological events can follow the officer into retirement. These events can affect their adjustment into retirement. They also bring into retirement traumatic critical incidents they have accumulated through decades long careers. Police officers have the same fears of retirement as other workers about to enter retirement. Paton, Violanti, Burke, and Gehrke (2009) cite studies (Fretz, Kluge, Ossana, & Jones, 1989) that claim pre-retirement stressors were low sense of self-

efficiency, poor planning, financial insecurities, and bad health. A study by Paton, Violanti, Burke, and Gehrke (2009) cite Jakubowski (1985) found that there was no significant decline of mental health after retirement but there was an increase in psychological distress and depression.

Agencies should offer emotional wellness training for police officers through their career and beyond retirement. As a police officer goes through his or her career, they experience or are exposed to numerous critical or traumatic events. Exposure to such events makes police officers more at an increased risk for post traumatic stress disorder, depression, and even suicide (Price, 2017).

Trauma can cause damage to an officer's emotional well being and left untreated, these events can bring about post-traumatic stress disorder (PTSD), depression or even suicide. All of this emotional baggage can be carried from the job into retirement. Violanti (1999) found that officers may continue to suffer the residual effects in retirement.

The most detrimental emotional effect of policing is depression. Depression is the root of many other emotional states, such as suicidal thoughts, identity loss, and PTSD, that police officers go through. One problem linked with depression is most officer refuse to admit they have a problem. Some just leave their job hoping things will get better and some will just carry the burden around for a lifetime. The biggest issue is not telling anyone and getting help (Hendry & Kulman, 2015). For some officers, a single traumatic event is the breaking point, while, for others, it is built up over a period of time (Miller, 1999). Sometimes officers only see the physical symptoms of depression and stress factors like insomnia, changes in hormone levels and even high

blood pressure (Sammon, 2004). They will seek medical attention to solve those physical issues but the underlying culprit still remains-the emotional issue. They could have been identified at an earlier stage by the right professional had their agency had more programs in place that they could have utilized. This is why it is so important to equip officers with the right psychological tools to make sure they can try and cope with the traumatic situations they encounter or even better, they can recognize when it is time to seek help. Providing ongoing counseling and education helps officers to lessen or eliminate those emotional issues.

Police officers in retirement may also suffer from lost identity because they no longer are part of the department. Many officers define themselves by their profession and once they no longer wear the badge, or put on the uniform they have difficulty adjusting to being a civilian. They still have the police instincts by being suspicious of people, sitting with their back against the wall in restaurants, and vigilant about safety. They usually share a stronger bond with co-workers due to the fact that they have been through situation that the typical co-workers do not face day to day. This only makes it harder to leave the profession. They also deal with the loss of who they become. They were once an authoritative and power figure and are now an everyday citizen. They were once sought out to render aid and serve the community and now they are on the other side of the badge. Caudill and Peak (2009) also claim that officers often find themselves facing the fact that policing was their life and is all they know, which leads them to having difficulty finding a second career or even hobbies. This identity loss for police officers can be "much more psychologically debilitating than for other members of society" (Caudill & Peak, 2009, p. 4). This realization can lead to depression and a

decline in overall mental health. Officers need to be aware that these emotions could occur and they need to be trained or educated on how to deal with them when the time comes. Once in retirement, officers may suffer depression because they lose their identity. It is common knowledge of police agencies that officers fear seeking help for mental or emotional issues because officers view seeking help as lowering how they are viewed within the department and lowering their chance at promotion

Another emotional problem stemmed from depression officers may deal with is PTSD (Post Traumatic Stress Disorder). Traumatic stress among police is commonly associated with depression but is partly separated from PTSD. Studies have shown that long term exposure to combat situations, like police can face on a daily basis, can make symptoms of PTSD worse (Paton, Violanti, Burke, & Gehrke, 2009). It is common for officers to face negative situations the majority of their career (Caudil & Peak 2009). This emotional baggage can accumulate and carry over into retirement years which can create symptoms of PTSD. Diagnosing and resolving PTSD at an early stage could help officers not only during their career, but also after they retire. So, it would be feasible that agencies should have a plan in place to teach officers coping skills and how to respond to stress of traumatic situations they encounter daily.

Suicide is often seen as “an ultimate coping response to an intolerable condition” (Paton, Violanti, Burke, & Gehrke, 2009, p.105). Suicide goes hand in hand with depression, identity loss, and PTSD. The suicide rate for officers is three times the national average (Baker & Baker, 1996). Not only were the suicide rates higher, but most occurred just before retirement (Caudill & Peak, 2009, p. 5). This shows the stress officers face when it comes to retiring. Officers have spent all of their career

solving problems for others, but when it is time to solve their own problems they often times have great difficulty (Hackett & Violanti, 2003). This is definitely true when it comes to retiring. They only wake up and face what is going on in their world. Studies conducted from 2008 to 2012 by the Badge of Life, showed that 141 officers committed suicide in 2008, 143 in 2009, 126 in 2012 and 108 in 2016. This gives an average rate of 12 per 100,000 in 2016, compared to 13 per 100,000 for the general public and 20 per 100,000 for the U.S. Army. Agencies work so hard on pre-hiring psychological screening, but fail to realize or acknowledge that in the beginning is when they are most stable. After initial hiring, agencies do little to monitor an officer's emotional wellness over the span of their career. A lot of agencies and fellow officers view these as isolated instances and avoid confronting the real issue at hand. All this does is "ignore the emotional changes caused by police work and [denies] emotional vulnerability" (Gilmartin, 2002, p. 13). When an officer chooses to take their own life, it not only hurts their family, but affects the entire law enforcement community (Violanti, 1999). It is unacceptable to watch our men and women in blue self-destruct from emotional issues that could be treated and possibly cured. They are the ones serving and protecting the public, but someone has to be looking out for them. By agencies instituting training and education requirements, they take the burden off of the officer and lessen or eliminate the stigma sometimes associated with officers seeking help for emotional or psychological issues. They also give the officer the skills to recognize if and when those issues arise and what actions they should take to minimize those issues.

COUNTER ARGUMENTS

As with any controversial issue, there is always another side. Preparing an officer for retirement can be seen by some agencies as an expensive and timely endeavor. Departments would be looking at taking care of officers for at least twenty years and for a lot, even more. Agencies could claim that a yearly psychological exam would be too costly and not affordable. Police agencies are faced with an ever tightening budget and funding employee health care that continues to rise. The health care provided to public employees is far different than that of those provided coverage in the private sector. Public employees pay about 15% of the health care cost compared to about 25% for the private sector employee (Barro, 2011). Health care benefits have steadily risen over time with no end in sight. The bottom line is health care is expensive and only increases after retirement due to aging physical ailments and long term emotional stress.

Many employees do not understand what health care really costs their employers. Most workers expect their agencies to cover a large cost of health benefits after retirement, but the truth is there has been a downfall “from nearly half in 1993 to 29% in 2001” (Tiffany, 2003, p. 6). As these cost increase, the police agencies have to find ways to continue to pay for those benefits with a limited budget. Agencies have to give consideration to pass these increase cost to the employee.

Another consideration is that there is a higher percentage of retirees in the public sector than in the private sector. These benefits offered to retirees are not prefunded. Police agencies are more likely to have to pass the cost on to their employees and bring the health benefits more to resemble that in the private sector. However, if they weigh

this against the cost of losing one of their own to suicide, paying out lawsuits due to poor choices made by officers, and the initial investment they put into each officer, it has to be a better solution. Maybe yearly psychological reviews will decrease these issues by helping officers be less stressed in situations, which, in turn, will encourage them to make better decisions. Agencies invest so much at the beginning of officer's careers with training, salaries, and equipment, it is only feasible to continue that investment so they can continue to have well-trained and emotionally solid employees. This would put more retiring officers at ease with the stress of transitioning into retirement because they would have had the proper psychological guidance over the years to cope with such a drastic change in their lives. According to The Badge of Life's article "Psychological Survival For Police Officers, Retirement-The Final Trauma" (2017), agencies invest in their officers while on the job, but "there must be an investment in the welfare of retirees as well as active duty officers" (p. 3). Former Denver Police Chief, Aristede W. Zavares had the right idea when he spoke in a Congressional hearing stating that "I don't, quite frankly, think that departments can afford not to have psychological services for their officers" (Finn, 1996, p. 3).

Even with agencies offering mental health services to police officers, it is beyond their control to ensure that the officer actually uses these services. Police officers are one of the few professions where they are exposed to traumatic events on a daily basis. When comparing them to other professions they are more closely related to those in the military. Police officers may have mental health care programs in place but there are barriers that keep them from using these services. Barriers created by the officer or they can be barriers beyond their control. One barrier is that officers never seek

treatment. This could be a choice by the officer or the officer may simply not know or recognize the symptoms of these emotional issues. Other barriers that arise are delaying treatment, failing to adhere to treatment regimens, or receive inadequate care. (Haugen, McCrillis, Smid, Nijdam, 2017). Some of the self-induced barriers is the officers believing there is a stigma assigned to those seeking treatment. Even though this belief is faulty, officers can believe there is a negative view of those seeking mental health treatment and thus causing them to not seek treatment or to adhere to the treatment. Two stigmas identified are a public stigma where officers are aware there is a stereotype that uses of mental health services and then there is the self-stigma where officers do not want these stereotype identity applied to them so they avoid being labeled and thus avoid using mental health services. The stigma is that those who use mental health services are perceived as weak and the officers agree with that label and then experience negative emotions or shame at being weak. A way to overcome the stigma or labeling officers perceive by using mental health services is to ingrain the use of these services in the department's culture. This could be made acceptable by those in the department, or make it seem normal that officers seek out mental health service. The use of peer support groups, police chaplains, or even a buddy system could be a way to make it easier for officers to be receptive to the use of mental health service. An officer does not solely have to rely on the agency. It is recommended by psychologists to use family and friends for support, keeping ties with the department and colleagues or finding a hobby to enjoy (Kinnaird, 2015). Benevolent associations, unions, clubs, etc. can work together to ensure retirees get the proper health care they deserve.

RECOMMENDATION

Agencies should prepare retiring police officers for financial and emotional stability by implementing planning from the beginning of their career and throughout. They should essentially prepare them from the beginning for the end. Police officers are faced with the daily rigor of solving problems and providing safety for citizens, even when it affects their own well-being.

Financially, agencies need to prepare their officers for the aftermath of retiring. Health care costs need to be emphasized to young officers periodically so they can see what lies ahead at the end of their career. Maybe they should have mandatory deferments or savings on top of their pensions so they can have a better retirement. They should be trained or counseled on having “rainy day” funds or personal savings accounts so they do not end up adding extra stress to their lives. Upon hiring, agencies run credit checks on future employees. This should be run yearly so they can see what their officer’s finances look like. This will definitely help agencies determine if there are extra stresses going on in their employee’s life. If they find officers are in over their head, they could get them financial counseling and maybe back on track for a more secure future.

Emotionally, agencies need to implement ways for officers to get help with psychological struggles. Not only do officers face the trauma of their job, but they face the conflicts of everyday life, such as marriage, family, and finances. All of these stresses can accumulate to depression which can lead to PTSD, suicide, and a loss of self-identity. Most officers will not seek help for these emotional problems because they can see them as a sign of weakness, especially in their line of work. So, they just keep

going without getting any help and over time that spirals out of control. If agencies required officers to meet privately for sessions, maybe officers would be more prone to share how they are feeling. Maybe these professional counselors would pick up on officer's troubles and they could start dealing with the issue before it got out of hand. This way when officers reach retirement, they would have a grasp on dealing with the emotions of the trauma they encountered in their career. Even after retirement, agencies should allow officers to continue counseling.

The concept of the problems officers face being personal has to end. What agencies need to realize is that an emotionally and financially sound officer is going to create a better atmosphere for their department and make safer decisions out on the streets. After retirement, they may even be able to serve as mentors and help young recruits establish a secure future. All of this benefits not only the officers and agencies, but the communities as well.

REFERENCES

- Barro, J. (2011). Cadillac coverage: The high cost of public employee health benefits. Center for State and Local Leadership.
- Baker, T and Baker, J. (1996). Preventing police suicide. *FBI Law Enforcement Bulletin*, pp.24-27
- Caudill, C. & Peak, K. (2009, October). Retiring from the "Thin Blue Line": A Need for Formal Preretirement Training. *FBI Law Enforcement Bulletin*, 10, 1-7.
- Finn, P. (1996). Developing a law enforcement stress program for officers and their families. *National Institute of Justice*, 3-4.
- Gilmartin, K. M. (2002). *Emotional survival for law enforcement*. Tucson, AZ: E-S Press.
- Hackett, D.P., & Violanti, P.J. (2003). *Police suicide tactics for prevention*. Springfield, IL: Charles C. Thomas.
- Hendry, E. R., & Kulman, B. (2015, November). *How to help law enforcement's 'walking wounded'*. Retrieved from america.aljazeera.com.
- Haugen, P., McCrillis, A., Smid, G., Nijdam, M., (2017, August). Mental health stigma and barriers to mental health care for first responders: A systematic review and meta-analysis. *Journal of Psychiatric Research*, 218-228.
- Kinnaird, B., (2015, July). *Life after law enforcement*. Retrieved from psychologytoday.com.
- MacKenzie, K. (2017, May). A Case for incorporating financial wellness into your retirement planning practice. *Journal of Financial Service Professionals*, 49-52.
- Miller, L. (1999). Tough Guys: Psychotherapeutic strategies with law enforcement and

- emergency services personnel. In Territo, L. & Sewell, J. (Eds.). *Stress management in law enforcement* (pp. 317-332). Durham, NC: Carolina Academic Press.
- Patton, D., Violanti, J. M., Burke, K., & Gehrke, A. (2009). *Traumatic stress in police officers: A career-length assessment from recruitment to retirement*. Springfield, IL: Charles C. Thomas.
- Price, M. (2017). Psychiatric Disability in Law Enforcement Officers. *Behavioral Sciences and the Law*, 35: 113-123.
- Psychological survival for police officers: Police retirement-The final trauma. Retrieved July 26, 2017, from www.badgeoflife.com/police-retirement-final-trauma/
- Sammon, Q. (2004). *Stress management: The dangers of and solutions for work related stress among police officers*. Huntsville, TX: The Bill Blackwood Law Enforcement management Institute of Texas.
- Tiffany, G. (2003, June). Public Employee Retirement Planning. *Employee Benefits Journal*, 3-11.
- Violanti, J. M. (1999). The mystery within: Understanding police suicide. In Territo, L. & Sewell, J. (Eds.). *Stress management in law enforcement* (pp.119-126). Durham, NC: Carolina Academic Press.
- Willett, M. (2005, November) Increasing Participation in Your Defined Contribution Pension Plan. *Benefits and Compensation Digest*, 18-21.