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Post Traumatic Incident:  
What is the Law Enforcement Agency's Responsibility to the Officer Involved?

A Policy Research Project  
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## TABLE OF CONTENTS

Section	Page
Abstract	
Introduction	1
Historical, Legal, and Theoretical Context	2
Review of Literature or Practice	5
Discussion of Relevant Issues	8
Conclusion	12
Bibliography	14

## **ABSTRACT**

Law enforcement officers, because of a more violent society, are exposed to more critical incidents now than ever before. These critical incidents are usually sudden and unexpected, put an officer in fear of his life, or significantly alter his life physically and/or emotionally. Historically, officers have been conditioned to think that expressing feelings in an effort to relieve the stress from a critical incident was a sign of weakness and not being in control of one's emotions.

The purpose of this research is to educate police administrators on the benefits of stress debriefings and justify the need for the implementation of a policy which will assist officers dealing with the aftermath of a critical incident. Stress debriefings can be held in a variety of ways but are essential in recovering from a traumatic incident. Larger police departments have monetary funds available to hire a staff psychologist. Smaller police departments may employ a psychologist on a contractual basis. All departments can implement a peer-counseling group or a chaplain program.

The conclusion of this research indicates that all police departments should have a policy and procedure for dealing with a critical incident and the aftermath. Those departments which have an established policy are better able to help their officers recover. Everyone involved in the critical incident should be involved in a debriefing, thus eliminating the possibility of the officer's concern of being viewed as weak or unstable emotionally.

## **INTRODUCTION**

The purpose of this research paper is to evaluate the justification of a law enforcement agency implementing a policy in order to help officers dealing with the effects of a traumatic incident. In today's society of increasing violence, law enforcement officers are increasingly in jeopardy of being involved in a traumatic or critical incident. A traumatic or critical incident would include, but not be limited to, a police officer involved in a shooting, (whether or not a death occurs), an in-custody death, an on duty motor vehicle accident which causes serious bodily injury or death to anyone involved, or the death of a fellow officer. Normally, traumatic incidents are both sudden and unexpected (Maggio and Terenzi 11). Approximately eighty seven percent of all emergency services personnel will, at least once in their career, experience a traumatic incident (Pierson 32). The officers involved are expected to maintain their composure and distance themselves from emotional reactions (Pogrebin and Poole 397). Often, officers do not deal with the pent up feelings brought on by a traumatic incident. Generally, the officer is reluctant to admit to the stress because they fear losing respect from other officers, being labeled as emotionally weak, and the possibility of losing a promotion (Shearer 96). Many of these officers are affected mentally and physically, which in turn, directly affects their job performance and family life.

The intended audience is the line officer as well as the law enforcement administrator. The line officer must be able to recognize what a traumatic incident is, what effects the incident

can cause in the officer, and how he can effectively deal with the aftermath of the traumatic incident. The administrator also must be able to recognize a traumatic incident, as well as recognizing signs the officer is affected by the traumatic incident. The law enforcement agency should provide training, education, counseling, support, and time to the officer who is dealing with post traumatic incident stress. One of the most important factors in treating an officer would be to establish a trusting relationship and assurance of confidentiality between the officer and the person helping the officer (Shearer 96). In order to support these claims, sources of research will include books, journals, articles, and post traumatic incident policies from other law enforcement agencies. Law enforcement agencies should understand how the officer involved in a traumatic incident is affected, both mentally and physically. Therefore, the agency must have a plan or policy to effectively assist the officer dealing with the aftermath of a traumatic or critical incident.

## **HISTORICAL, LEGAL OR THEORETICAL CONTEXT**

Critical incident stress dates back to the Civil War where soldiers experienced symptoms that are today associated with Post Traumatic Stress Disorder. Soldiers were told they had an "irritable heart". Likewise, World War I and World War II soldiers who experienced the stress of critical incidents were said to be "shell shocked" and suffering from "traumatic war neurosis", "combat fatigue", "combat exhaustion", "battle stress", and "gross stress reaction". Interest in

critical incident stress surfaced again during the Korean conflict and Vietnam War (McCafferty, Domingo and McCafferty 22). Historically, critical incidents have been defined in a variety of ways. Critical incidents cover a wide array of topics and situations. Typically, they are traumatic events experienced by an individual who perceives the effects of the incident to be a threat to his survival or ability to function. Traumatic events typically have common characteristics. They are likely to be sudden and unexpected. The event may include an element of loss such as a partner, physical ability, or position in rank. The event may affect an officer's values, confidence or ideals (Wells, Getman, Blau 70). Critical incidents disrupt the individual's sense of control. They can generate distress in a normal, healthy person while leaving behind lingering aftereffects which may be physical, emotional or psychological (Gentz 35).

Typically, law enforcement has defined officer involved shootings and fatality accidents as the only "real" critical incidents. This idea seems to be changing in the law enforcement community and more incidents such as investigating a baby's death, a gruesome crime scene, or any situation where the officer feels his life is in danger, are gaining the attention they deserve as critical incidents. What becomes a critical incident to one officer, may not be a critical incident to another officer (Gentz 36). However, because the law enforcement community has been slow to accept the fact that many other instances can be identified as critical incidents, they have been equally slow to accept the fact that the stress derived from a critical incident situation is

potentially debilitating and can seriously affect the police officer's job performance and personal life (Pierson 32). Police officers are taught that they must be strong and in control of every situation they respond to. Therefore, police officers feel that any display of emotion may be interpreted by fellow officers, supervisors, and administrators as a sign of weakness or inability to cope with the situations they are asked to respond to. Typically, officers continue to hide their emotions even after the incident. Historically, officers have been told that talking about their pain, guilt, or fear is considered taboo. Thus, if an officer has to resort to talking or counseling, he is seen as not able to handle his emotions, or not being in control of his emotional responses (Pogrebin and Poole 398). As a result, officers have generally failed to vent their feelings and relieve stress because they do not want to be viewed as an inadequate officer. In the past, officers suffered from post traumatic incident stress and did not realize what it was. They may deteriorate in their job performance to the point where disciplinary action may have to be taken, such as suspension or dismissal. In extreme cases, some officers resort to suicide.

Historically, police administrators have viewed the police officer who needs help, whether professional or not, as a departmental problem. The administrator sees the officer as inefficient which, they believe, makes administration look bad. The administration also perceives bureaucratic problems, paperwork, and litigation against the department as a result of the officer (Blau 164). When the officer who works for this administration is involved in a critical incident, particularly one in which deadly force has been involved, the administration quickly turns the

incident over to a grand jury for review. Not only does this administration send a message to the officer that he no longer has the support of the department for which he works and has dedicated his life, he also feels he is guilty until proven innocent. This administration will usually not show support for the officer until after the grand jury has cleared him. The effects of this non-support leave the officer feeling alone and confused about the loyalty of his department. Often the officer will begin looking for another place of employment.

## **REVIEW OF LITERATURE OR PRACTICE**

Based on a paper by Gentz in 1994, a study was conducted in an anonymous police department. The study dealt with the response of officers to critical incidents. The first study was conducted in 1983 and the second study was conducted in 1993. Questionnaires were sent to each officer in the department asking how they reacted to critical incidents. Both surveys asked officers to list possible reactions which occurred during or immediately after the critical incident. Both yielded similar results with the answers ranging from slow motion, a sense of detachment, to tunnel vision. The most frequently reported physical reaction, on both surveys, four to six hours after the incident, was an adrenaline surge, crying, and tremors. Disbelief, anger, and fear were the top three emotional reactions on both surveys. Flashbacks were the most commonly reported delayed reactions, followed by insomnia, depression, feelings of anxiety, and fear of a similar incident. Both studies also showed officers expressed a need to talk about the

incident to fellow officers, family, friend, counselor, or clergy. Both studies also concluded that if put in the same situation again, the majority of officers would prefer to leave the scene as soon as possible. This study conducted ten years apart shows that what constitutes a critical incident varies from person to person, but the reactions to critical incidents are predictable (Gentz 36-37).

Another study conducted within the Los Angeles County Sheriff's Department in 1984 revealed that deputies involved in shootings received more support from supervisors closest to them in rank, and less support from supervisors as the supervisory level increased (Stratton, Parker and Snibbe 128). Bettinger's research also follows officers who have been involved in shooting situations. According to his findings, sixty three percent of officers involved in shootings suffer some form of post shooting trauma. Twenty percent will be divorced within one year. Seventy percent leave law enforcement within five years of the incident. In addition, if an officer who has been involved in a shooting is not afforded counseling and he is involved in a similar situation, seventy percent will be killed or wounded in the second incident (Bettinger 91). Involuntary changes take place in the human body when placed under extreme stress such as a use of force situation. Some changes are profound and unavoidable. These include increased heart rate, rapid breathing, activation of adrenal glands, and dilation of the pupils (Brave and Farnam 29). Among "professional" occupations, police rank highest in heart disease, and almost twice as high in suicides (Violanti 211).

Many departments are beginning to implement policies and procedures in order to help

the officer involved in a traumatic incident. It is the policy of the Benbrook Texas Police Department to make members aware of the effects of post traumatic stress disorders, and of methods used to cope with stress (Benbrook Police Department 1). Some departments have begun implementing programs such as debriefings, peer support programs, on staff psychologists, and chaplains to give officers a variety of ways to relieve stress associated with critical incidents. Debriefings are carefully structured and occur after the traumatic incident. There are two types of debriefings, didactic and psychological (Barnett-Queen and Bergman 192). Didactic debriefings include large numbers of people with the emphasis on educating personnel on effective coping techniques and critical incident consequences. Psychological debriefings involve smaller groups and focus on preventing long term consequences from traumatic incidents (Barnett-Queen and Bergmann 192). Peer support is often used by police agencies. Peer supporters are not counselors, but they must be properly trained before counseling. Peers chosen for the support team must have a high degree of confidentiality, good listening, rapport building, and support skills (Barnett-Queen and Bergman 192). A peer support group of officers who have been in a critical incident usually prove to be very effective (Solomon 44). Many departments have police psychologists at their disposal; some have gone a step further and made them sworn members of the police department. The police psychologist has the ability to carry a gun and badge. In this capacity, the professional distance between them and other sworn members is reduced, thus opening up better lines of communication with the

street officers ( Janik 24). Chaplains are used in much the same way as psychologists. Many times they are called to critical incident scenes to assist not only the officer but the public as well.

The research findings indicate a strong need for release of stress by the officer involved in a critical incident. If the stress is not released in some form, physical and psychological side effects are likely. More departments today are implementing programs geared to help the officer release this stress and cope with a critical incident. Therefore, the "John Wayne" stereotype police officer is fading and officers are encouraged to talk about their feelings. These programs are producing healthier officers, both mentally and physically.

## **DISCUSSION OF RELEVANT ISSUES**

The first relevant issue is that police administrators must realize what a critical incident is and how to recognize the signs of critical incident stress in their officers. The second issue is whether police departments should have policies before a critical incident occurs. The third issue is that police departments should also consider the employment of a full-time professional police psychologist, as opposed to contracting out with the psychologist on a case by case demand. Some police departments with little or no money may find a peer counseling group effective.

Police officers are constantly confronted with stresses that are outside the range of the average human experience (McCafferty, Domingo and McCafferty 22). Police organizations

must realize the stress their officers experience, especially after a traumatic incident. An organization must be proactive in educational programs and have a plan for dealing with a critical incident. The amount of training that takes place prior to a critical incident will largely determine the emotional, physical, and behavioral impact of the incident not only for the officer but for the organization as well (Maggio and Terenzi 11). Police administrators need to understand that following a critical incident, officers may withdraw from important people, activities, and job related tasks. They may have flash-backs, suffer depression, experience sleep disorders, as well as feel guilt, anxiety, or hyperalertness. Without appropriate action, severe and long term consequences may result (Bergmann and Queen 102). Some police officers may not be as productive at work, may begin to abuse sick leave, or develop memory problems. Officers may begin to develop signs of critical incident stress while at the scene of the stressful event, while other officers may not show signs for several hours after the event. Most officers are loyal and dedicated to the department for which they work and the community in which they serve. Therefore, the department that employs the officer is also responsible for his recovery of a critical incident (Bettinger 93). In order for this to happen, the department must first understand what a critical incident is and then provide the officer with the appropriate services necessary for his recovery. It is far better to know and understand the possible ramifications of highly stressful incidents in order to manage the incident aftermath accordingly, rather than be required to explain the manifestations to a jury where the officer's future is on the

line (Brave and Farnam 30).

In every police department, there are constraints as well as opportunities regarding post traumatic incidents. Line officers who deal directly with suspects and victims have a different perspective on police work than the command staff who manage the organization, far from street work (Pogrebin and Poole 399). Although both line officers and command staff may agree that a debriefing of some sort is an acceptable form of dealing with a critical incident, not all intervenors are helpful. The press is bound to be involved and an investigation team will interview and evaluate the officer's performance (Blau 172). Departments should take the opportunity to implement critical incident policies now to avoid the confusion of doing so immediately after a critical incident. If administrators assume everyone handles critical incidents in their own way and choose a strategy of inaction, many officers may not ever get over the incident, thus fueling hostility and resentment toward administration. If, however, administrators respond quickly and effectively, the prospects for successful and positive resolution are enhanced (Maggio and Terenzi 12). Departments should not wait until a critical incident arises to implement a policy for dealing with it. When policies are part of the normal post traumatic incident protocol, personnel better accept posttrauma services (Bergmann and Queen 104). Debriefings are used by many agencies as a way to tactically critique an incident, to talk about it, to frame it, and put it in perspective (Weinblatt 69). The best time for a debriefing seems to be between the second and fourth day following the critical incident. This gap in time allows both parties in the debriefing to

gather information and also allows the initial shock of the incident to subside (Van Fleet 106). It is equally important that at least two individuals make up the debriefing team (Bermann and Queen 104). These individuals must be supportive, non-judgmental, and establish a trusting relationship for the debriefing to be effective.

Larger police agencies with more money than the smaller police agencies are finding it easier to hire a full time police psychologist. These agencies recognize the advantages of having a professional psychological staff on board. These psychologists are readily available for debriefings with line officers as well as emergency response team members (Weinblatt 68). However, employing their services can be quite expensive.

Smaller police departments with less money are using more psychologists on a part-time, contractual basis (Weinblatt 68). The cost of having a trained, professional psychologist on a part-time basis is less expensive than having one on staff, however, the part-time psychologist may not be as accessible as the staff psychologist.

Many agencies cannot afford to hire a psychologist, therefore peer counseling can be a cost effective way of helping officers deal with critical incidents. Peer counselors should be trained before counseling, but the cost is minimal compared to a professional psychologist (Mashburn 7). Peer counselors also tend to be fellow officers which facilitates communication. The peer counselor officers are more readily approached and trusted (Weinblatt 70).

## **CONCLUSION / RECOMMENDATIONS**

The purpose of this research paper is to justify the implementation of a policy in order to help officers who are dealing with the effects of a traumatic incident. More police officers are exposed to critical incidents in today's society of increasing violence. Even though critical incidents are sudden and unexpected, they can be anticipated and their negative impact reduced through pre-incident training and planning for post-incident response (Maggio and Terenzi 15). The problem is that many officers have a need to release the stress they feel after a traumatic incident. Many officers do not have the resources in their departments to release this stress, or they have been conditioned to think they are weak and not in control of their emotions for feeling the stress. Officers need to have adequate counseling services available to them, as well as adequate training in what to expect from the stress brought on by a critical incident (Mashburn 8).

Every police agency should strive to minimize critical incident stress. In order to do this, police administrators must accept the fact that critical incident stress exists, and that the majority of their officers will experience at least some of its effects at some point in their career. Critical incident stress training should then be mandated by the administrators. Supervisors should be educated on how to recognize events that may lead to critical incident stress, as well as watching for behavioral and personality changes in line officers after a traumatic event. Finally, the administrator should mandate formal debriefings after a major event. The debriefings can be

conducted by either a professional psychologist, or a trained peer counseling group (Pierson 33). When these recommendations are followed, the police department will produce not only better educated officers, they will be more effective because they have a plan to help them deal with critical incident stress. In addition, all officers would be equal in that anyone involved in a traumatic incident must go through a formal debriefing. This eliminates the appearance of being weak or out of control emotionally. Officers should not feel that they must deal with critical incident stress alone. Instead, officers must believe they have the support of their families, peers, and department ( Mashburn 8).

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