

Post-Traumatic Stress Disorder

“It’s not simply depression, anxiety, anger, guilt, or hypervigilance. It is all those things simultaneously, and it’s all the time.”

The average life expectancy of a police officer in the U.S. is 66 years, and an estimated 7-19-percent of those officers suffer at least a measure of post-traumatic stress disorder (PTSD) according to research. For the 800,000 American officers, these are stunning and alarming statistics. They paint a grim picture of depression, burnout, hypervigilance and other anxiety-related mental health issues much more prevalent than that experienced by the general population. About 75-percent of marriages where one of the spouses is a police officer end in divorce, while nationally, the divorce rate is 40-50 percent. These anxiety-centric mental health conditions result in physical problems such as chronic back, neck, and knee injuries, diabetes, heart disease, hypertension and high cholesterol. Most officers suffer PTSD in private. About 10-percent have had thoughts of suicide, with 73-percent of those same officers not telling anyone else about those thoughts. Such statistics make it clear that police officers are experiencing a public health crisis of monumental proportions.² And this crisis deserves the same or greater attention we devote to developing other therapeutic interventions for other public health crises we face as a nation. The emotional health and well-being of officers is also crucially important to the communities in which they serve.

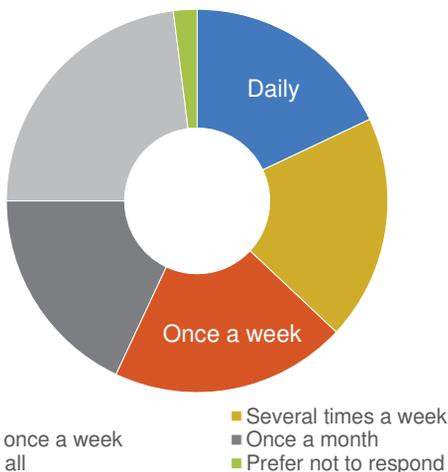
The events of 2020 combined with existing mental health issues have exacerbated adverse outcomes for officers. In a recent survey, 63-percent responded that their work productivity was impacted by recent events on a daily or weekly basis. Moreover, 55-percent said they had considered leaving their profession on a daily or weekly basis. Most respondents reported feeling trapped or helpless at least once a week and were not likely to recommend law enforcement as a career to others. About 38-percent reported their department provides inadequate mental health services. By teaching officers to recognize the impact their previous traumatic experiences may have on present reactions and decision-making, restorative and normalizing behaviors can resurface. One way to do this is through education that can help officers understand and cope with trauma.

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Understanding PTSD

Historically called combat stress, shell shock, battle fatigue and other emotional maladies, post-traumatic stress disorder (PTSD) remains one of the most debilitating and least understood emotional conditions experienced by individuals who experience trauma. In the U.S. armed forces, research into PTSD has elevated awareness of the risk to combat veterans. But even for the military, PTSD is still only superficially understood with the symptoms being as varied as they are challenging for both those who suffer and those around them. This issue is even less well appreciated among the ranks of police officers. While PTSD in soldiers may often result from of a single or brief episode, PTSD in police officers tends to manifest over multiple, traumas and extended periods of time—a condition known as cumulative PTSD.

Have You Felt Trapped or Hopeless about Your Job in the Past 3 Months?¹



POLICE₂PEACE

The emotionally and physically exhausting experience of POST-TRAUMATIC STRESS DISORDER (PTSD)

Following are eight emojis illustrating the emotions that are ALWAYS and ENDLESSLY experienced by PTSD sufferers –



Most people have no idea that PTSD sufferers ALWAYS feel like this.

Why don't others know?

1. PTSD sufferers have unconsciously conditioned themselves to mask their emotions with a face that looks like 😊. If they have truly mastered the masking skill – and, yes, in time they will – the mask may begin to look like 😊 or 😊. But it is still a mask.
2. In time, PTSD sufferers become 🗣️ in a group. They often let others do the talking. Yes, they try talking. They recognize the need to talk. But they instantly regret talking whenever they speak. It's far safer to be 🗣️. So, again, no one knows what they are feeling or experiencing.
3. The difference between a PTSD sufferer and someone suffering from bouts of (a) depression, (b) anxiety, (c) anger, (d) guilt or (e) hypervigilance is that those with PTSD experience ALL FIVE simultaneously. Moreover, the suffering is NOT IN BOUTS. PTSD sufferers experience all five SIMULTANEOUSLY and ENDLESSLY.
4. PTSD is like a water spigot turned on. The spigot is always turned on high. It never turns off. And almost no one knows that the spigot is on, because the PTSD sufferer has often learned to hide his or her symptoms.

Anyone is susceptible to PTSD.
Don't be afraid or ashamed to talk about it.



Cumulative PTSD can be even more debilitating than PTSD resulting from a single trauma. This is because cumulative PTSD is more likely to go unnoticed and untreated. When a crisis occurs, such as an officer-involved shooting, immediate attention is paid. But when the build-up occurs throughout an officer's career, little attention is paid. This means that an officer with cumulative PTSD may be much less likely to receive proper treatment than a combat soldier. And unlike physical injuries, psychological traumas may occur daily yet often be ignored. If left untreated, officers may become a risk to themselves and others. If recognized and properly treated, officers and those around them can heal the devastating impact of PTSD from a single incident or cumulative PTSD. The keys are education, early recognition, and seeking help sooner rather than later.

A Program That Works: RCSD

As a means of better educating its officers about the symptoms associated with PTSD, the Richland County Sheriff's Dept. (RCSD) in South Carolina has published a one-pager describing PTSD, and the sheet is being disseminated far beyond the near-1,000-employee agency it was originally designed for nearly two years ago. But that's only one element for RCSD. For years, Richland County Sheriff Leon Lott was troubled by the obvious risk of mental and emotional fatigue experienced by his deputies as a result of ordinary life-stresses combined with the often-harsh realities of patrol work and a lack of awareness the public has about the challenges of that work. In 2016, Sheriff Lott established a pre-PTSD conditioning program for his deputies which has since become a national model. And now with the department's one-pager – developed by Special Deputy W. Thomas Smith Jr. (former U.S. Marine Infantry) – the department has raised even greater national awareness using simple emojis to illustrate the complex emotions experienced by those suffering from PTSD (or post-traumatic stress INJURY as Lott has directed RCSD to refer to it):

[Information Sheet PDF Download Here](#)

PTSD Awareness 1 Emoji at a Time

As the one-pager explains, PTSD (PTSI) sufferers have unconsciously conditioned themselves to mask their emotions with a face that looks like 😊. If they have truly mastered the masking skill – and, yes, in time they will – the mask may begin to look like 😊 or 😊. But it is still a mask.

In time, PTSD sufferers become 🗣️ in a group. They often let others do the talking. Yes, they try talking. They recognize the need to talk. But they instantly regret talking whenever they speak. It's far safer to be 🗣️. So, again, no one knows what they are feeling or experiencing.

The difference between a PTSD sufferer and someone suffering from bouts of (a) *depression*, (b) *anxiety*, (c) *anger*, (d) *guilt*, or (e) *hypervigilance* is that those with PTSD experience ALL FIVE simultaneously. Moreover, the suffering is NOT IN BOUTS. PTSD sufferers experience all five SIMULTANEOUSLY and ENDLESSLY.

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Contact



W. Thomas Smith, Jr.
Special Deputy - RCSD
tsmith@rcsd.net



Lisa Broderick
Executive Director
Police2Peace
lbroderick@police2peace.org

References

- 1 Dr. Michelle Lilly and Sergeant Shawn Curry, Mental Health Training and Intervention: A Critical Component of Police Reform, Training and Research Institute for Public Safety, Sep 17, 2020
- 2 Susan Radcliffe, Daniel Pollack, Casey Scott "Law Enforcement Officers and Trauma: The Next Public Health Crisis?" The Crime Report Center on Media Crime and Justice at John Jay College, Feb 22, 2021

The emotionally and physically exhausting experience of **POST-TRAUMATIC STRESS DISORDER (PTSD)**

Following are eight *emojis* illustrating the emotions that are **ALWAYS** and **ENDLESSLY** experienced by PTSD sufferers –



Most people have no idea that PTSD sufferers ALWAYS feel like this.

Why don't others know?

1. PTSD sufferers have unconsciously conditioned themselves to mask their emotions with a face that looks like 😐. If they have truly mastered the masking skill – and, yes, in time they will – the mask may begin to look like 😏 or 😊. But it is still a mask.
2. In time, PTSD sufferers become 😐 in a group. They often let others do the talking. Yes, they try talking. They recognize the need to talk. But they instantly regret talking whenever they speak. It's far safer to be 😐. So, again, no one knows what they are feeling or experiencing.
3. The difference between a PTSD sufferer and someone suffering from bouts of (a) *depression*, (b) *anxiety*, (c) *anger*, (d) *guilt*, or (e) *hyper-vigilance* is that those with PTSD experience **ALL FIVE** simultaneously.

Moreover, the suffering is **NOT IN BOUTS**. PTSD sufferers experience all five **SIMULTANEOUSLY** and **ENDLESSLY**.
4. PTSD is like a water spigot turned on. The spigot is always turned on *high*. It *never* turns off. And almost no one knows that the spigot is on, because the PTSD sufferer has often learned to hide his or her symptoms.

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