WHAT WE’VE LEARNED
By Major Ronald Robinson

Through my 25 years in law enforcement, I have learned a lot about the St. Louis area. Among those lessons: stress and trauma are at epidemic levels in our community. The sadness, hopelessness and anxieties of so many often are the underlying cause of many of the behaviors we work to address as police. I didn’t learn about this issue in the classroom or in the newspaper. I learned about it on the job, through working with victims of crimes and their families.

As law enforcement officers and first responders, it is critical we have a solid grounding in the basics of stress and trauma. First, we must understand just how common stress and trauma are in the lives of those we serve and those we serve with each day. Best estimates are that more than 50% of adults in the United States have endured at least one traumatic event. For those of us serving communities riddled with crime and poverty, we know the rates are much higher.

More than a year ago, I partnered with the Demetrious Johnson Charitable Foundation to do something about the way traumatic events, specifically homicide, were affecting citizens in our area in an effort to help reduce violence in our community. Day in, day out, I was seeing the loved ones of homicide victims struggling to find healing from their trauma in the midst of too few resources and too much hurt.

On the first night, we brought together victims’ families and law enforcement. More than 300 people showed up. All were struggling to heal and desperate to find a way to work more cooperatively with law enforcement to help their community recover.

My experiences in continuing to work with that group and the team of mental health professionals who have joined us, makes it clear just how prevalent trauma is in the community we serve.

I also have come to understand how common toxic stress and trauma are within our own ranks. As first responders, we are dealing with desperate situations and communities in crisis all too often. Especially over the past year, the unrest in Ferguson and beyond has highlighted the extremely tense situations we are faced with each day. While it is crucial we understand how common trauma is in the people we work to help each day, we are doing ourselves a disservice if we do not understand the toxic stress and trauma within our own forces.

A study published in 2012 in the International Journal of Emergency Mental Health highlighted the ways in which working long hours, overnight shifts and dealing with traumatic situations each day impact the health of law en-
forcement officers. The findings showed an increased risk of hypertension, stroke and diabetes in officers. These conditions not only impact the quality of life for officers, but also can limit our effectiveness in our job.

Understanding toxic stress and trauma as a root of these conditions is key to our own well-being, as well as to building trusted relationships within the communities we serve.

The events that took place in Ferguson and throughout our region have opened a door for us to start talking about the trauma our community has endured for so long, as well as the difficult decisions and dangerous situations law enforcement and first responders face each and every day. We must all work to help each other during these difficult times, and we must change our mindset so we can understand the impact and prevalence of trauma in our community.

Within our region, many individuals and organizations, including Alive and Well STL, an initiative of the St. Louis Regional Health Commission, have been leading a movement to help our community better respond to the pervasive stress and trauma we endure. I hope you will join me in helping make St. Louis Alive and Well. For more information, visit www.aliveandwellstl.com.

Major Ronnie Robinson joined the St. Louis Metropolitan Police Department in 1990. When promoted to Sergeant, he served in the Intelligence Division. As a Lieutenant in 2005, he served in the Third District, Juvenile Division, and Crime Suppression Unit. In 2009, Robinson was promoted to Captain, serving as the Commander of the 2nd District and the Special Operations Unit. In 2013, he was promoted to Major and is the Commander of the North Patrol Division.
By Sarah Buehner, LCSW

In the world of law enforcement, stress is an inevitable part of the job. From responding to dangerous calls, car accidents and burglaries, to working long hours and conducting traffic stops, law enforcement officers are constantly faced with challenging situations that contribute to high levels of stress. In addition, LEOs still have to go home and balance the normal stresses of daily life!

When I talk with officers about stress, I often receive a response like, “It’s part of the job” or “I can handle it.” I often agree. Stress is part of the job, and thankfully, LEOs are trained to handle stressful situations. At the same time, it’s important to realize that prolonged exposure to stress has a tremendous impact on physical and mental health. It can have a domino effect on work and home life. Effective stress management skills are essential to health and well-being.

What Is Stress?
I have also frequently heard, “Well, I don’t feel stressed.” Ironically, the people who say this often are experiencing symptoms related to chronic stress, which are mentioned later in this article. Stress is much more than a feeling. Stress is the body’s reaction to harmful situations, whether the situation is real or perceived. It triggers a chemical response in the brain, resulting in a domino effect of chemical and physiological changes in our bodies to prepare us to respond, called the “fight or flight” response.

This response is very adaptive in life-threatening situations, but in non-life-threatening situations, these reactions can be both ineffective and detrimental to a person’s health. Unfortunately, our brain can’t tell the difference between a life-threatening stressful situation (think: slamming your brakes and barely avoiding a car accident; arriving on-scene with an armed suspect) and a non-life-threatening situation (think: sitting in rush hour, having a lot of work to do). The intensity of stress may be different, but in our brains and our bodies, the same chain of reactions occurs.

The Stress Response: What Actually Happens
All the information our brain receives about our environment comes through our five senses: sight, hearing, touch, taste and smell. This information passes through a part of the brain called the amygdala, the emotional processor of the brain. When the amygdala perceives a situation as stressful…

1. It sends a message to a part of the brain called the hypothalamus, which acts as the command center for the rest of the body.
2. The hypothalamus sends messages to the rest of the body to prepare to handle the potential threat.
3. The hypothalamus communicates with the autonomic nervous system (ANS), which controls the body’s involuntary functions, such as breathing, heart rate and blood pressure.
4. The ANS triggers the adrenal glands to release adrenaline into the bloodstream, which causes a number of physiological changes in the body.
   - The heart begins to beat faster, allowing more oxygen to get to the brain, increasing awareness and focus, as well as sharpening senses such as sight and hearing.
   - Adrenaline also triggers a release of sugar (glucose) from fat stores into the rest of the body, supplying the extra energy needed to handle a threatening situation.
   - Adrenaline can also cause feelings of shakiness, and the body will automatically tense up in preparation to fight or flee.
5. The ANS triggers the release of other hormones and chemicals in the body to tell the body to “prepare for battle.”

What is so amazing is that this entire cascade of events occurs even before the other parts of the brain are able to process what has happened.

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The Domino Effect

Chronic stress is associated with many common illnesses, such as heart disease, stroke, chronic pain, diabetes and obesity, just to name a few. Over time, increased stress levels strain the heart and blood vessels. The constant release of glucose into the body can affect a person’s blood sugar level, can have effects on eating patterns, weight and the ability to regulate blood sugar levels. The body’s muscles can become tired and sore from the rush of stress hormones and constant tenseness, and can lead to chronic pain and fatigue. Chronic stress also contributes to many other symptoms, such as insomnia, headaches, depression, anxiety, poor anger regulation, poor memory, sexual dysfunction, ringing in the ears, stomach or intestinal problems, teeth grinding, difficulty relaxing, and substance use/abuse. (Check out this link at WebMD.) Chronic stress also suppresses the immune system, meaning chronically stressed individuals are more susceptible to getting sick.

All of these symptoms can impact your happiness, relationships, social life and job performance. And, as time goes on, I’m sure researchers will identify additional ways chronic stress impacts our bodies and our lives.

YOU CAN Manage Stress

Thankfully, the “fight or flight” response comes in handy in police work, enabling you to respond to dangerous situations quickly and efficiently and make it home at the end of your shift. But our bodies are not meant to be constantly in “fight or flight” mode, meaning it’s very important to cultivate a lifestyle that helps manage some of the aftereffects of your high stress career. There are countless books, articles and websites dedicated to stress management you can explore to learn more about effective stress management. You can also consider talking to a counselor or life coach, or explore alternative healing centers. In the meantime, here are a few quick tips to get you started.

- **Eat A Well-balanced Diet.** Making sure your body is nourished properly helps it repair itself after experiencing a lot of stress. Consider consulting with your doctor, a dietician or learning more about nutrition.
- **Get Regular Exercise.** Exercise helps release those stress hormones and naturally increase the chemicals in your brain that contribute to happiness. Getting in a good workout can also help with sleep, and research shows that exercise can help lower levels of depression and anxiety.
- **Sleep!!** When you sleep, your body and brain can repair themselves from all the damage done from chronic stress. Sleep deprivation decreases your ability to manage stress. Consider talking to your doctor or a therapist if you have trouble sleeping, or add some exercise into your routine.
- **Moderate Alcohol and Caffeine.** Alcohol and caffeine will exacerbate stress, and both can increase symptoms of anxiety and depression over time. Both affect your quality of sleep and nutrition, which as you now know, affect your ability to manage stress effectively.
- **Have Some Fun.** Having some fun will help you relax and turn off that fight or flight response for a bit, and help your mood!
- **Meditate.** There is a lot of research supporting the effectiveness of meditation in regulating the effects of stress. There are many ways to meditate, and St. Louis has many excellent meditation and yoga centers.
- **Practice Mindfulness.** Mindfulness is being present in the current moment. We are often thinking about the past, worrying about the future, or we are “thinking” instead of just “being.” Spend some time becoming aware of your present moment, relax, take a

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deep breath, and enjoy. Being mindful of our present moment can teach our brains how to relax instead of always being in go-mode. When we relax, we literally turn off the fight or flight response in the ANS, thus halting the effects of chronic stress.

- **Get Support:** Make sure you have a number of positive supports in your life, whether it’s friends, family, a therapist, a religious group, social group, and so on. Often, talking about a stressful situation can help you process what happened and let it go. Or, just spending time with others can help you relax.

Sarah Buehner holds a Masters in Social Work and is a Licensed Clinical Social Worker. She is the wife of a police officer, who is also a former military police officer. Mrs. Buehner provides school-based counseling services to teens at Lutheran Family & Children’s Services of Missouri. Sarah is also a member of the Street Talk Advisory Committee.

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**BEHIND THE BADGE: HARD JOB, HARDER CONSEQUENCES**

By Amy Wobbe, LPC

Generally, everyone wants to be “alive and well” right? What does this mean? Being alive is an obvious priority in the line of duty. But what does being “well” mean? Doing the job in the shoes of an officer is hard. Do you take the time to recognize how hard it is, the toll it takes on your health, relationships and well-being?

My husband is a full-time state trooper and part-time EMT. I never realized how hard it was for my husband to “turn it off.” I also didn’t give credence to how much self-care was a necessary process for him.

*All in a day’s work:*

One morning started off with a couple of tickets. No big deal. Mid-day brought him to a call to assist a mom in distress. This call resulted in him performing CPR on an infant with a trachea tube, all done on the side of the highway. After ending the day having spent hours in the hospital, he came home. With the uncertainty of whether or not the infant would make it, he walked in the door to me stating, “Help with dinner, feed the dogs, take the trash out, and don’t forget to pay that bill.” What does this do to him?

This example is real. How do you do your job and take care of yourself? This ongoing toxic stress adds up and impacts your health, relationships and well-being.

Reflecting on that example, I can tell you that coming home from that particular day’s work led to the perfect storm for relationship struggles. Communication! He wasn’t mad at me; he was mentally exhausted. I wasn’t insensitive; I didn’t know!

Tip #1 is Awareness. Find the cue or word that communicates to others, “I need a break.” Even if you aren’t talking about the details, find a way to communicate your stress. With a better understanding of what my husband’s day entailed, I’m better equipped to respond to him.

Awareness also means being aware of your triggers. What does this mean? The encounters you have in a day might seem simplistic or they might remind you of something else that is a struggle. Simply noticing the various impacts in your life can make a difference. For my husband, that CPR event was not only taxing because it involved an...
infant, but in his words, “When I looked at him, all I could see was our 6-month-old son.” For him, coming home was actually harder, because he felt an immediate rush of adrenaline again when he walked in.

Beyond the mental exhaustion, what the job does to you physically is taxing. In his words, “Even the daily stuff is hard, even a simple traffic stop. You go from a complete stop to 80 mph to catch a car to pull someone over and stop again. Then you question when you get out of your car, ‘what’s going to happen?’ Your body is constantly doing an up and down adrenaline push. That in itself is exhausting.”

We call this toxic stress. And it’s very damaging. Recognize it and care for it in the moment before it gets larger; before it takes a stronger toll on you and your health.

What does this look like? When you have awareness of yourself, do something to help yourself. When you feel that rush of emotion, the physical rush of blood, feeling hot, feeling anxious, out of control, angry, increased heart rate, racing thoughts, tense muscles, etc., STOP! In that moment, care for yourself. Help bring yourself down.

One thing that used to annoy me: My husband would come home, go straight to the couch and watch a game on television. Baseball, football, whatever the season, it didn’t matter. From my perspective, I was judgmental and thought, “Get up. You don’t get to come home and chill, there are responsibilities and kids, and things to do.”

Awareness: He knew he needed those 20 to 30 minutes to “tune out.” He knew he needed something neutral, something to help him “come down.” He needed something distracting to “recharge.” I never gave credit to how important these 20 to 30 minutes were. He wasn’t being lazy or ignoring me. He needed to debrief from his day, and that is how he did it.

What do you do? Read a paper, get your favorite beverage, listen to music, etc. It’s the small things that need to be practiced. Talk with others. Most officers find comfort in sharing with other officers who understand the stress of the job.

Another strategy: Detach from the job. Who is in your circle of friends? Are any of them not military, cop, fire, etc.? Sounds weird, right? We do gravitate towards those that are alike, those that can relate and understand us. However, it’s helpful to have friends or people to talk to that are not from that world. In the words of my husband, “It’s nice to have people who get it. On the other hand, when we get together, all we talk about is work.” For him, that is not detaching.

Another tip: Find hobbies. Not just any hobby, but one that does not involve adrenaline rushes. Think about what you like to do. We have a very dear friend who is a local cop; one of his hobbies is “riding his hog.” This can be very relaxing, but also can be something that creates adrenaline rushes. This doesn’t seem helpful because in the end, isn’t the point to get your body away from pumping up those adrenaline levels? Look at the scope of what you do for fun and ask yourself, “How relaxing is it?” There is a difference between fun and relaxing.

For more ideas and support for coping, check out aliveandwellsfli.com.

The daily stress and trauma police take on is very different from most other jobs. This daily toxic stress and exposure can impact your social, emotional and physical well-being. Not paying attention to this can literally kill you. The goal is to be alive and well. Officers know how to stay alive on the job; we also need to be attentive to doing this off the job.

Amy Wobbe, Licensed Professional Counselor, has studied and treated trauma for over ten years, providing ongoing trainings on traumatic stress, trauma awareness and the impact of trauma. She provides outpatient services at BJC Behavioral Health, and for the past two years, has led the initiative to make the organization a trauma-informed agency. She also provides consultation and education on trauma and toxic stress to other BJC entities, including its School Outreach Nursing program, Barnes Hospital and Children’s Hospital.
It’s been a heckuva year. Who could have imagined some of the things law enforcement has been through? Civil unrest, unending media scrutiny, overtime hours, time away from family and friends, and more. It’s enough to bring a good man down…

…but it hasn’t. We have seen law enforcement rise to the occasion and continue to serve and protect to the best of our ability. We have kept our cool under pressure, and we have been under pressure to do more. Although it seems the vocal naysayers always seem to have the microphone, we have all heard from the many people in our communities who are behind us 100%...

…and yet, there are days. We’re human. Sometimes we have days when it gets to be a bit much, maybe even way too much. Law enforcement needs to realize we need to spend more time taking care of ourselves. We should listen to the officer who says he/she has “had enough.” Telling an officer to “toughen up and deal with it” is not what is best for our men and women in law enforcement.

Police departments need to develop strategies for dealing with the many aspects of their officers’ lives. We are great when it comes to equipping our men and women with stuff. Tactical gear is very important in the success of our work. We also need to equip our officers with tactics for dealing with issues away from the job. They need to be mentally in the game. Law enforcement needs to have the resources to deal with “those days”. We need to be there for them when they need us.

Several years ago, the Olathe Kansas Police Department initiated a program called BeSTOW (Beyond Survival Toward Olathe Wellness). The mission of this program is to provide the tools to promote holistic wellness to all employees in support of a balanced life, both personally and professionally. Holistic wellness focuses on physical, mental, emotional and spiritual wellness so that employees will be better prepared to more effectively process the health issues, stress and emotional trauma prevalent within law enforcement.

Makes sense, doesn’t it? If we are going to take care of ourselves, we need to cover all the bases. This program, and others like it, help officers focus on how they live their life, and what can they do to better themselves and their families, and how to make it all work together. If I go to the gym every day, and can lift a mountain, but drink a six-pack every night to deal with stress, am I really helping myself and those that I love? Am I doing things to properly prepare myself and my family when I retire? Do I have a viable support system when my life is a little off the tracks?

The Olathe program offers officers and families many different opportunities to strengthen their overall wellness. Seminars on emotional health, financial planning, fitness and nutrition, and spiritual growth are just a few examples. They schedule Movie Nights and Retirement Planning Seminars. They established a fitness program to benefit everyone. The program is voluntary and offered at times that are convenient to shift work.

Law enforcement has always been a family. We have always had the backs of our own. With the added issues our profession has taken on recently, it is imperative we do everything we can to ensure the overall well-being of our brothers and sisters in blue.

Thanks to Deputy Chief Shawn Reynolds with the Olathe KS Police, for providing information on the BeSTOW program. If you want to contact Shawn for more information, call 913-971-6355 or email SReynolds@OlatheKS.org.

Dan Fitzgerald is the Chief of Police for the City of Brentwood, and currently chairs the Street Talk Advisory Committee.
CURRENT ISSUES: TRAUMA-INFORMED RESPONSE

By Emily Ludwig, LMSW

Many advances have been made in specialized law enforcement-based response programs over the years, but the concept of applying a “trauma-informed” response has only recently been addressed and implemented.

Due to the disproportionate number of people with mental illnesses in the criminal justice system, frontline officers – often without necessary supports, resources or specialized training – frequently respond to calls for service involving these individuals. During these encounters, officers must de-escalate potentially volatile situations, gauge safety risks and navigate community supports.

In an effort to improve outcomes and prevent future encounters, jurisdictions across the country have developed responses that prioritize treatment over incarceration. The Crisis Intervention Team (CIT) initiative, emerging in the 1980s after an officer used lethal force against a person with mental illness, has become one of the most common criminal justice and mental health collaborations implemented throughout many US communities. The CIT model involves training and appointing officers to apply a more tailored first response to people with mental illnesses, and has proven highly successful.

As a result, there has been increased interest in the development of strategies that law enforcement can use not only when responding to incidents involving people with mental illnesses, but also to those who have experienced trauma. The importance of law enforcement developing knowledge of the signs and symptoms of trauma to effectively stabilize these encounters has been identified as a best practice that can improve outcomes, prevent future encounters and improve access to treatment.

The U.S. Department of Justice indicates that more than half of all prison and jail inmates have a mental health problem. Within this population, about 25% of offenders have been found to have endured some form of assault, physical abuse and/or sexual abuse prior to incarceration. In regards to the general population, statistics indicate that over half of the U.S. population has experienced some form of trauma.

Before exploring what constitutes a trauma-informed response, it’s important to have an understanding of what defines trauma. Although there is no universal definition of trauma due to differences in culture and acceptable coping strategies within that culture, the National Association of State Mental Health Program Directors defines trauma as:

“The experience of violence and victimization; including sexual abuse, physical abuse, severe neglect, loss, domestic violence and/or the witnessing of violence, terrorism, or disasters.”

Recognizing signs and symptoms of trauma can be challenging. Understandably, it can be a lot easier for officers to recognize signs of trauma exhibited by victims as opposed to offenders. However, when an officer is able to pick up on these signs exhibited by both victims and offenders, investigations may be more smoothly facilitated; recidivism rates may decrease; community trust of law enforcement can be enhanced; and victims or offenders may be more likely to seek appropriate treatment and support.

When interacting with victims, witnesses and offenders, officers might notice the following symptoms of past or current trauma:

- exaggerated startle response
- memory gaps and/or a misperception of time, especially as it relates to the traumatic event
- trembling
- guardedness or defensiveness
- anger
- lack of trust

By Emily Ludwig, LMSW

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These symptoms can trigger behaviors that law enforcement might interpret as not cooperating, appearing adversarial, behaving suspiciously or acting out aggressively. Often, these individuals may come off as being hostile, particularly when they perceive they’re being threatened or lack control within their environments.

Additional symptoms can include:
- disengaging or tuning out
- appearing numb or showing no signs of outward distress

These symptoms can lead police to misinterpret that there is little or no trauma because the person doesn’t appear upset or isn’t acting out. These symptoms could potentially complicate an officer’s ability to relate to the individual or to gain his/her trust.

If an officer senses such signs and symptoms of trauma, responding in a trauma-informed manner can mitigate many of the challenges.

**What Is A Trauma-Informed Response?**

So what exactly does it mean to practice a “trauma-informed” response?

Just as trauma has no universal definition, there is no cut-and-dry definition of what constitutes a trauma-informed approach. However, Roger Fallot, one of the pioneers of trauma-informed organizational change, identifies some of its core elements: safety, trust, collaboration, choice and empowerment.

Examples of how law enforcement professionals might implement these components include:
- Ensure the individual’s physical safety and security.
- Allow the individual to vent and express his/her feelings.
- Validate those feelings.
- Listen attentively and maintain a non-judgmental attitude and demeanor.
- Foster prediction and preparation by explaining what happens next in the processing of the case, as well as the individual’s role in that process.
- Consider the likelihood that the person may also have past trauma, and how this can impact, cross over, and trigger a current trauma response.
- Become familiar with community and mental health services, e.g., your municipality’s SART (Sexual Assault Response Team), crisis and domestic violence hotlines, emergency shelters, community-based mental health centers, and mobile outreach mental health services.

**Vicarious Trauma**

While it’s important for law enforcement to incorporate trauma-informed interventions during these encounters, the mental toll that these duties can have on officers is significant.

In addition to enduring the consistent risks involved in police work, applying an empathetic, compassionate and sensitive response can be both challenging and emotionally/mentally depleting. A concept referred to as “vicarious traumatization” recognizes the impact that stress, pressure and being overwhelmed can have on first-responders and other professionals.

Vicarious traumatization can result from an individual’s engagement with survivors of trauma, and the signs and symptoms can be very similar to those described within the context of this article. Listening to graphic accounts and heart-wrenching experiences, as well as bearing witness to some of humanity’s intentional cruelty, can understandably rouse powerful emotions. Officers may become aware of their own vulnerabilities and potential for trauma within their professional and personal lives.

Implementing consistent self-care, identifying and utilizing effective coping skills, maintaining social support and asking for or giving oneself respite is crucial to sustain success in these roles. Recognizing the signs and symptoms of trauma within oneself and fellow officers is paramount to maintaining one’s own mental health, which ultimately determines one’s ability to effectively fulfill these roles.
Resources for Individuals

- **BHR (Behavioral Health Response)**
  
  **Crisis Line** - 314-469-6644 and 800-811-4760
  Clinicians respond to mental health crisis calls 24/7, providing thorough assessment, assistance and referrals. Mobile outreach clinicians can be requested 24/7 to provide these services on-site.

- **SART (Sexual Assault Response Team)**
  
  **Crisis Hotline** - 314-531-RAPE (7273)
  Volunteers provide support, information and resources to rape victims in local hospital emergency departments 24/7.

- **Safe Connections**
  
  **Domestic Violence & Sexual Assault Hotline**
  314-531-2003

Resources to Support Law Enforcement

- **COPLINE**
  
  1-800-267-5463
  National Law Enforcement Officers Hotline staffed by retired officers who bring knowledge and understanding of the many psychosocial stressors that officers experience on and off the job. Active officers and their families can call 24/7 for support. The line is strictly confidential.

- **Greater St. Louis CISM (Critical Incident Stress Management) Association**
  
  [www.stlcism.org](http://www.stlcism.org): Volunteer organization of first responders that supports first responders who are impacted by occupational stress related to traumatic, crisis or critical incidents. Includes police officers, fire and EMT.

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Emily Ludwig works at Places for People as a community support worker and facilitates trauma support groups. She has been assisting homeless individuals with severe behavioral health conditions in the city of St. Louis for the past seven years. Emily also works nights and weekends at Behavioral Health Response as a Crisis Intervention Clinician and Mobile Outreach Specialist.