

Mini Review of Law Enforcement Suicide in Today's World

Mini Review

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Author Details

*Stephanie Schweitzer Dixon MS**

CEO & Owner, SSD Consulting, Massachusetts State Representative for the National Police Suicide Foundation, USA

*Corresponding author

Stephanie Schweitzer Dixon MS, CEO & Owner, SSD Consulting, Massachusetts State Representative for the National Police Suicide Foundation, USA

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Introduction

Suicide prevention is a collaborative effort of citizens, professionals, and service providers to reduce the incidence of suicide in the communities they serve [1]. A significant component of suicide prevention efforts includes accurate data collection and evaluation measures utilized to assess the effectiveness of those prevention strategies. In the field of law enforcement suicide prevention, the lack of accurate data is one factor hindering adequate suicide prevention efforts within this demographic. Other hindrances include the culture within the policing profession and the stigma which prevents law enforcement officers from seeking help for mental health-related challenges, personal problems, job-related difficulties, and most recently, demands placed upon law enforcement by society. Job-related difficulties include both on and off the street stressors that consist of the extreme situations of societal pressures and horrific traumatic scenes police officers experience that result in posttraumatic stress disorder (PTSD) rates higher than the general population and nearly any other occupation, at rates between 7% and 19% [1]. Posttraumatic stress is defined by the diagnostic criteria outlined in the Diagnostic and Statistical Manual for Diagnosing Mental Disorders, Fifth Edition (DSM-5) as a disorder occurring after one experiences many of the following symptoms, yet not limited to those symptoms, for thirty days or more after exposure to actual or threatened death, serious injury, or sexual violence: recurrent distressing memories, nightmares, dissociative reactions (flashbacks), intense or prolonged psychological reactions to reminders of the traumatic event(s), while avoiding stimuli associated with the trauma, exhibiting negative alterations in cognitions and mood and arousals and reactivity (irritable behavior, angry outbursts, hypervigilance) associated with the trauma beginning or worsening after the traumatic event(s) [2].

PTSD is known to increase the risk for suicidal ideation, and among police work exposures, the risk of having a high level of posttraumatic

stress disorder (PTSD) symptoms resulting in an increased risk of suicidal ideation also increases ten-fold when combined with alcohol use [3]. Given the extreme, traumatic, and numerous situations police officers experience, when a law enforcement officer experiences a traumatic event resulting in PTSD, national organizations have developed classification guidelines for what is now considered “injury at work” given the “occupational hazard” mental health issues pose on the job.

Discussion

One of the most traumatic situations an officer could experience is a suicide death scene, even more so that of the suicide death of a fellow officer or someone they personally knew, which occurs for almost three-fourths (73.4%) of officers [4]. Suicide prevention is a collaborative effort of citizens, professionals, and services providers to provide support services to those individuals in their communities who have been impacted by and have lost someone to suicide [1]. These efforts are vital to ensuring officers do not develop increased mental health difficulties, posttraumatic stress disorder, and suicidal ideation by implementing officer health and wellness programming as part of the organizational suicide prevention programming endorsed by leadership.

In addition to suicide prevention, many additional factors are vital to ensuring an effective law enforcement suicide prevention program. Bond [5] reinforces the importance of reviewing the effects an officer who is suffering from depression, posttraumatic stress disorder (PTSD), or another mental health diagnosis that leads to the officer taking their own life, which needs to be studied so proactive intervention and treatment strategies can be developed to try and prevent this tragedy from occurring. Bond [5] further recommends timely and accurate reporting on law enforcement suicides, adding two additional categories: 1) on-duty suicide and 2) off-duty suicide. However, there is no standard centralized reporting agency that



records law enforcement officer deaths by suicide, and as a result, multiple organizations that attempt to collect this data are reporting different numbers. Regardless, the data shows the high rates of suicide among law enforcement officers compared to the general population, with one study finding 264 police officer suicide deaths over three years representing a 69% higher rate for police than all workers in the study population employed during their lifetime [6]. Research study rates also show twice the rate of officers who die in the line of duty, another three times the rate, and one even eight times the rate [1]. Regardless of the study or the organization reporting the data on officer suicide deaths, until 2020, when the COVID-19 worldwide health pandemic affected first responders working on the frontlines while this potentially life-threatening virus took the lives of more officers than any other cause of death, suicide had traditionally been the leading cause of death among law enforcement officers. According to Officer Down Memorial Page (2020-2021), law enforcement officer deaths due to COVID-19 in 2020 and 2021 were the only cause of death greater than suicide. As of the date of publication of this article, COVID-19 still remains the only cause of death greater than suicide for law enforcement officers as the effects of the coronavirus pandemic continue into 2022. However, the effects of this virus on first responders' mental health have presented leadership with managing its effects and including it in their officer health and wellness and suicide prevention programming [1].

The implementation of suicide prevention programming starts with a top-down approach with leadership officials among each law enforcement agency, including those at the academy, teaching officers and recruits training curricula consisting of suicide prevention and crisis intervention training, de-escalation training, psychological first aid, mental wellness and debriefing opportunities, resiliency training, stress management programs, and peer support programs [1,7]. Alvarez, Price-Sharp, and Schweitzer Dixon [1] also describe new research-based training law enforcement departments are finding promising components of their suicide prevention curricula, including training, treatment options, stigma reduction measures, peer support programs, and suicide prevention programming.

The U.S. Congress passed the Law Enforcement Suicide Data Collection Act on June 16, 2020 to help agencies better understand and prevent suicides among current and former law enforcement officers at the federal, state, tribal, and local levels [8]. This legislation and the development of the FBI overseeing the data is a significant move to improve the data collection of law enforcement officer deaths by suicide to help improve the confusion that exists in the law enforcement suicide prevention profession. However, the submission of officer suicide deaths is voluntary for agencies to provide, leaving the potential for continued gaps in this vital data and not wholly solving this problem. Additional national efforts to provide support to the country's law enforcement officers is currently going through the U.S. legislative process when the Public Safety Officer Support Act of 2022 was introduced into Congress on February 10, 2022, recognizing the work a public safety officer does places them at 25.6 times higher risk for developing post-traumatic stress disorder when compared to individuals without such experience [9]. The bill

provides death benefits to officers suffering from post-traumatic stress disorder or acute stress disorder following a stressful situation on duty, and provides death, disability, and education benefits to public safety officers and the survivors of public safety officers who are killed while in the line of duty [9]. The bill outlines the higher rates of officer suicide deaths and the federal government's need to recognize public safety officer suicides as deaths in the line of duty [9].

Conclusion

Suicide continues to plague the nation's law enforcement officers as they work through the multitude of demands placed upon them in today's society, from responding to numerous traumatic scenes to being placed at risk of contracting the potentially life-threatening COVID-19 coronavirus to being the target of social and civil unrest. These on-the-job stressors and the additional on and off-the-job stressors create risk factors for suicide briefly described in this paper and the research it derives from that are the basis for law enforcement agencies developing their suicide prevention programs. Leadership's responsibility is to develop a top-down approach to officer wellness and suicide prevention that invests in their officers' mental health adept to the increasing adversity of the policing profession and lifestyle.

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