

## Managing critical incidents and making a difference



BY ROBIN KROLL, PSY.D., ABPP

Officer O'Neil and his partner were on patrol when they received report of a homeless individual causing a disturbance in front of a local business. Arriving at the scene, the officers approached the man. Assessing the situation, they determined that the individual was suffering from a mental illness. They searched his clothing and found only scraps of garbage and other meaningless items in his pockets. The man became hostile and a struggle ensued. The officers quickly gained control of the situation, cuffing the suspect and placing him in the back of the squad car before heading toward the station. Seconds later, Officer O'Neil noticed his partner's face had turned pale, with his eyes wide open and jaw dropped. Officer O'Neil turned to the back seat and, in disbelief, watched the man pull a gun from inside the back of his pants, clasp the weapon in his restrained hands, and position himself to take aim.

All Officer O'Neil saw was the flash of the muzzle. He and his partner jumped out of the squad car, which continued to roll until it hit a street pole. They returned fire. Officer O'Neil shot and killed the offender.

Disoriented by the commotion and ringing in his ears, and feeling dazed, Officer O'Neil sat on the curb as backup arrived. Something didn't feel right. His lower back throbbed. The pain worsened.

He was shot.

The ambulance took Officer O'Neil to the hospital. By the grace of God, the bullet had miraculously only grazed him. Although he was bruised, he was released the next day.

Up until this point, Officer O'Neil had a charmed 23-year law enforcement career. He had never taken a life. Officer O'Neil was a man of faith, and killing went against his belief system. He couldn't get over the fact that he had almost lost his life and that his children were very nearly fatherless. Officer O'Neil felt vulnerable for the first time....

Critical incidents can have a significant impact on officers. A critical incident is characterized as any event causing emotional distress according to the National Police Suicide Foundation.

Some of the most impactful critical incidents include the following:

- Events involving children
- Officer-involved shootings
- Suicide of a colleague
- Line-of-duty deaths
- Serious line-of-duty injuries
- Natural or man-made disasters and multiple casualty situations

- Accidental killings
- Prolonged incidents
- Receipt of personal threats, with concerns of retaliation
- Excessive (and often negative) media attention

### What officers and police agencies should know about critical incidents?

Officers should know that it is normal to have emotional, psychological and behavioral reactions following an incident. Fellow police officers and agencies need to support those involved in a critical incident by removing any stigma associated with seeing a qualified professional. It should be emphasized that attendance at a debriefing or counseling session does not constitute disciplinary action. Rather, these measures are intended to assist officers through the experience, not punish them. In fact, research suggests that officers actually find it helpful to

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attend a debriefing or speak with a qualified clinician.

Officers should know that a wide range of reactions to an abnormal situation is normal. Physical, emotional, and behavioral reactions can include:

- Flashbacks of the event
- Sadness
- Fear
- Anger
- Low tolerance, agitation, negative emotional response (both to the public and their department)
- Becoming overly judgmental
- Guilt
- Insomnia
- Changes in appetite
- Sluggishness and inability to focus
- Increased absenteeism
- Loss of productivity
- Decay in personal care
- Feelings of hopelessness and helplessness

Officers should know to pay attention to proper sleep functioning. It is best not to self-isolate, but rather use positive support systems. Alcohol use should not be increased. When supporting a fellow officer involved in a critical incident, it is better to go out for coffee or a meal than to the local cop bar.

Officers should know not to engage in activities that involve over-stimulation, such as large crowds, concerts, festivals, or even large family outings. Keeping surroundings calm will help reduce a heightened state of arousal. Remaining near healthy support systems and familiar, comfortable places is better than

running off on vacation when officers don't feel like themselves. Healthy diet and exercise, as well as taking care of their bodies, will alleviate elevated stress for officers.

Officers should pay attention to delayed reactions from an incident - it happens. Special attention should be paid to anniversary reactions: officers sometimes don't even consciously recognize why they are struggling emotionally. If you know a fellow officer is struggling with an anniversary of a critical incident, lend them support and be mindful of their vulnerability to react. Don't call fellow officer names like "shooter" or "killer" - this can have a negative effect and cause unnecessary guilt or shame.

It's important to know that adequately addressing a critical incident can avoid more severe and chronic problems, such as Post-Traumatic Stress Disorder (PTSD).

#### How can agencies help officers involved in a critical incident?

It is beneficial for agencies to have a protocol in place for officers involved in critical incidents. Preparations such as having a designated person or unit to come to the immediate aid of the officer will mitigate confusion during a crisis. Departments should maintain the proper, updated reading materials and handouts to provide the officer. This should include appropriate referrals and resources and other support systems such as employee assistance programs, peer support contacts, police chaplains, etc. Officers will find these useful when they return home and begin processing the event. Make certain the officers' personal information is updated, and that the agency has the appropriate family contacts on hand. Officers should be given time off of work following an incident - generally one week minimum is advisable.

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### How can officers help themselves?

It is important to remember that we all have a gratitude list. Create a list of all in your life that you are grateful for. Make it the first thing you look at when you wake up and last thing you read before you close your eyes at night. Be patient; healing from an emotional experience can take time. It may take up to a month for your symptoms to subside. Do not set goals that are too overwhelming. Keep them short and manageable so you can experience success.

Keep in mind, the more you speak about your feelings, the faster you will heal. You spend your career coming to the aid of others, and you deserve to let others assist you.

And remember this quote from Fred Rogers of Mr. Rogers' Neighborhood:

"Anything that's human is mentionable, and anything that is mentionable can be more manageable. When we can talk about our feelings, they become less overwhelming, less upsetting, and less scary. The people we trust with that important talk can help us know that we are not alone."

Be Safe... 

*Dr. Robin Kroll is a Clinical Psychologist in independent practice with offices that serve Chicago as well as suburbs in Cook and Lake Counties. Dr. Kroll is the Director of Interventions and specializes in Police and Public Safety. Her concentration includes working with police officers in individual, group and family therapy for issues related to addiction, mood disorders, work related matters, and Post Traumatic Stress Disorder. Dr. Kroll speaks at police and public safety conferences and implements stress management workshops for law enforcement agencies.*

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