Public safety officer emotional health: addressing the silent killer

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Public Safety Officer Emotional Health:

Addressing the Silent Killer

Richard C. Lumb, Ronald L. Breazeale, Paula J. Lumb, and Gary Metz

This article focuses on the accumulation of stress and adversity that public safety officer’s experience when carrying out their respective duties. We focus on providing strategies to help officers reduce the impact of danger, adversity, trauma, stress and confronting abnormal situations that may have a deleterious effect on the officer’s health and well-being.
We are concerned with the plight of public safety officers as their career serves not only duty but is also a path to a secure retirement. This type of career, however, can diminish their well-being and has the potential of resulting in a lifestyle of physical and mental health illness. Traveling this career path also involves family issues, and financial struggles, where personal disarray often emerges from years of encountering stress-related events. The potential of acquiring a deviant societal outlook that considers people as corrupt; a world filled with criminals and where no one is to be trusted other than those who have traveled the same path, exists within this occupational group. A career spent immersed in society’s problems, investigating violence, providing care and custody to people who victimize other humans, responding to dangerous and intense situations and being an observer of the worst in society, corrodes the officer’s sense of right from wrong, safety, and well-being.

The journey takes its toll, one day at a time. As the years pass the once robust and healthy officer is burdened with numerous negative physical and mental health issues that erode his or her life and those of family, friends, and peers far quicker than other careers.

We outfit our public safety personnel with all manner of protective gear to keep the body safe from harm. This includes weapons, vests, cruiser safety cages, and other specialized equipment designed for that specific purpose. But we abjectly fail to provide for their negative emotional, social, and psychological health manifestations that accumulate from years of encountering adversity and stress, the outcome of dealing with human trauma. As much as firefighters of three decades ago liked the designation of “smoke eaters,” many later died from lung and respiratory disease. Police in today’s society are required to handcuff arrested individuals due to earlier injury or death from a spontaneous act of violence by the arrestee toward the officer. Some officers would not handcuff the arrestee if the mandate did not exist. While discretion is of value, some issues are directed by policy to ensure safety.

When we examine an officer’s emotional health, the expectation is to be tough, show no emotion, buck up, and move forward. Decades of evidence suggest this approach is wrong and often results in ill health, emotional trauma, marriage and family destruction, and other negative outcomes that debilitate and create lasting damage. Posttraumatic stress disorder (PTSD) is associated with military confrontation in battle; it is no less traumatic over the long-haul for public safety personnel.

The Path to Dysfunction

Responding to citizen calls for assistance, managing inmates in a [correctional] facility, or responding to a fire where danger shadows every action eventually leads to the accumulation of negative stress and its related residue. Danger is a constant companion and awareness of that possibility, along with the potential of fatal or non-fatal injury, resides in the officers’ subconscious throughout their careers. Over time, stress culminates in negative emotions, anger, impatience, unsettling feelings, and changes in personality and behavior that are subtle but nonetheless occur. Long, Chamberlain, and Vincent (1992) discussed the effects of traumatic stressors and the accompanying physical symptoms in policing that often includes PTSD. Job-related duties for these professionals often lead to confrontation with others, which, as most of us know, is highly stressful. Other maladies impact the officer and include depression, use of substances (both alcohol and drugs), heightened high-risk lifestyle, and often increasing erosions of attitude, relationship problems, and a variety of aberrant and deviant behavior. Research has also alluded to the effects of the work environment of police and the lack of social support for stress-related symptoms (Hart, Wearing, & Headley, 1995). Additionally, public safety officers experience higher mortality rates for cancer and heart disease than the general public, with stress thought to be a major contributor. These issues certainly extend into family life with higher than average divorce rates or family conflict and other forms of dysfunction that include hypertension, high blood pressure, heart disease, and others (Bartollas & Hahn, 1999; Peak, 1993; Mitchell & Bray, 1990).

Intimate relationships often suffer. Officers frequently do not fulfill the normal role of parent with their children. The extent of this internal trauma is reflected by the statistic that the average U.S. suicide rate is 12 per 100,000 among public safety personnel. A study by the Fraternal Order of Police showed police suicide at 22 per 100,000 officer members, a truly frightening fact (Gilmartin, 2002).

The individual officer’s job impacts family, friends, colleagues, and others who are in some capacity related to or work closely with the officer. The officer’s attention is often diverted and family and non-police [or non-corrections] friends move to a secondary place in a world that is viewed with increasing suspicion. Negativity leads to anger that often manifests when encountering tense situations or when the officer confronts a challenge to his or her authority. Anger is frequently directed at the department’s administration, creating a polarity that creates a division among people who are supposed to be doing the same job and on the same team. Even among colleagues, some officers are drawn to particular individuals, creating a subculture within a subculture, generating suspicion and barriers where interpersonal communications are minimal.

Administrators in public safety organizations often do not place the same level of concern on officer psychological issues as they do on physical safety needs. Behavioral problems are often addressed only when the shoe drops and someone has complained or the officer
is in crisis. Sadly, prevention is not yet the preferred response within public safety organizations.

Subcultural influences within the work organization are created by the internal ecological environment that develops over time and represents many levels or layers of the organization (Allen & Allen, 1985). Danger encountered in the job is a factor in police officer attitude as is his or her acceptance or rejection by the police subculture, an important marker to the officer’s job-related health and wellbeing (Stratton, 1981). While common mission, values, and vision statements exist and are the guiding organizational principles, we find a variety of sub-systems at work that identify specific groups or functions, each with their own cultural norms. Culture and subculture is influenced by many variables, some of which inhibit change while others are motivators of transformation. Programs that promote positive change and address needs and issues within an organization are important to the mental and emotional health of the organization.

The type of dysfunction is only limited by one’s imagination as it manifests itself in numerous ways. Perhaps the most disheartening of all indicators is the officer’s unwillingness to seek help through counseling or therapy, preferring instead to live with the trauma and sliding down the slippery slope of poor physical and mental health. This can be changed through participation in resilience, coaching, and peer intervention training.

Resilience training promotes strategies for self improvement and is focused on the employee, not the services he or she provides to an external population. Resilience training and accompanying coaching and peer intervention are critical components for public safety personnel as we address the employee and his or her needs for psychological, physiological, and emotional health.

Case Example

John could not sleep. He had been awake for over 30 hours working a double shift. A small uprising in one of the jail cell blocks resulted in additional hours of report writing. When the guys were finally cut loose they went to a local bar and had a couple of beers to unwind and discuss why they even bothered working in such a stressful environment.

John arrived home tired and hungry to find his wife had been up waiting for him. Since she had not heard anything from him, she had called his supervisor to see if he was alright. That led to a fight over her “minding her business” and the statement: “leave me alone! I’ve had enough crap for one day.” She took their son and left to visit with her sister, saying she “needed to be with someone sane for a while.”

Frustrated and angry over the earlier events and the argument with his wife, the one person who should understand, he opened yet another beer and brooded over how his life had gone from bad to worse, questioning his role as a corrections officer. The job he once cherished and felt that he could make positive change in the lives of people, was now in the pits and all justice gone. As time went by, he became more cynical and withdrawn, preferring the company of the guys with whom he worked. He was not sleeping well, did not eat balanced meals, smoked more, and drank far too much alcohol. He was overweight, and lately he was short of breath upon exertion. His marriage was in jeopardy. He began looking at the world as a lost cause where even the department brass were corrupt and did not care about anything except their welfare. If it were not for others like him, the whole country would be overrun by criminals. He now questioned his life given all the turmoil. If no one gives a damn, why should he?

The Subculture Path

Working in organizations is not guided just by policy and procedure because there generally exists an informal set of assumptions used by groups of people to guide their behavior, thinking, and perspectives of how to act in the role they fulfill. Culture is a powerful motivator to behavior in that employees do not want to violate rules or bring disfavor from those they work and associate with on a daily basis.

As with police and others, the “code of silence” is an informal control agent in which officers do not tell on peers, and if they do they are subject to all manner of chastisement and punishment by their coworkers, including in some cases being ostracized. The problem with the code of silence is its pervasiveness extending from minor to major performance, professional, or ethical problems. This culture is strengthened through employee unions that also impose rules and expectations and can serve to further restrict employee attitude. Correctional, police, and fire personnel have a larger duty to the community and the trust that places them in the positions they hold.

Culture is a process and defines stages that employees progress through much like experience. As the employee is identified by both a public and private philosophy, it results in acquiring appropriate behavior to carry out the duties of the job. Meeting expectations of both groups requires adherence to formal and informal rules that may create an opposing view of expectation and performance.

Organizations are often amorphous and ill defined, thereby making it harder to identify with them from a personal level. In corrections for example, the culture rejects permissiveness or outward acts of kindness toward inmates and creates the belief that if prisoners are happy, the correctional officer is not doing his or her job, which should include assuring inmate compliance and adherence to rules. Often correctional officer attitudes force inmates into a one-size-fits-all category,
which they obviously are not. Control of inmates is one of the core roles of prisons, and officers are the means of enforcing that rule and philosophy. Carrying out this role is critical not only to administration but to those with whom the officer works, with officer safety being yet another important core issue to consider.

Public safety personnel provide a variety of emergency service roles. While the circumstances vary, the impact on the individual is essentially the same. A variety of psychological, physiological, and behavioral manifestations of stress arise, increasing individual overreaction and error. When the person experiencing these symptoms is a public safety officer (police, fire, corrections, other), individual mental, physical, and behavioral health is of major concern given their role and responsibilities to the larger society.

From the agency or employer’s perspective, it is generally uncomfortable and thought to be demeaning to directly address these health issues with a dysfunctional employee. However, at the risk of a crisis occurring, can we continue to ignore the signs and symptoms of an individual employee under distress? Is waiting until he or she self-destructs and all manner of care and consideration evaporate preferred as issues of liability emerge and the employee is put on disciplinary notice?

Behavior indicators, both conscious and subconscious processes, usually emerge as actions, statements, and other visible manifestations of stress that are often observed by others. For some individuals, healthy activities are sought while others turn to alcohol, drugs, or other sources of relief that are harmful. Tossing back a few beers after work, if habitual, may diminish perspective and attention to other matters leading to dysfunction. It is easy to divert to engagement in activities that lead to other problems. Peers, supervisors, and organizations have a duty and obligation to intercept and help.

This must be the case if the officers’ physical and psychological well-being is of primary concern to the employing organization. Programs are available to substantially reduce the effects of dealing with society’s negativity, brutality, and violence, and its cumulative effect on the human condition.

A Review of John’s Case Study

John’s story is repeated across this country a hundred times daily as police, corrections, fire, EMS, and other safety officers encounter situations that elicit anger and despair over a system that seems in disarray and at times to be the enemy of working officers. Their ability to cope with adversity, stressful situations, and catastrophe is co-dependent upon overcoming personal problems and emerging without lasting negative effects (e.g., stress, physical and mental health issues, alcohol and substance abuse, divorce, increase in liability and torts, etc.). As the officer’s world view narrows and he or she becomes more cynical and distanced from normality, desperateness enters their thinking and filters what is seen and heard, bending reality into a view that may become, and often is, jaded.

Time for Change

It is necessary for administrators to shift focus, accept responsibility, and initiate programs that address the potential for long-term personal damage. The decision would be demanded by the public if we were able to capture data outlining the true extent of trauma and devastation; however, this information is not centrally maintained. We are unable to examine the extent of casualty in the hundreds of departments across the country due to a lack of information. Individual officers rarely discuss, review, or attend to these issues, preferring instead to push them aside and engage in avoidance.

Strengthening Individual Resilience

The capacity of a person to learn skills that assist in resisting and overcoming debilitating events and accumulated stress is a powerful means of remaining balanced in work, family, personal, and social life. Developing and strengthening resilience permits a person to bounce back from a potentially overwhelming event that has caused great discomfort or peril to one’s well-being or safety. Experiencing a traumatic event causes a person to pause and feel the numbing impact on breathing, thinking, feeling, and acting, and often elicits a response resulting in dysfunction and disbelief of what has just happened. Not all events are of sudden major trauma, some gradually accumulate until sufficient tension increases and results in unbearable stress and severe disability in mood and ability to function normally in the daily roles of life, whether personal or professional. When encountering these conditions, routine daily events become difficult to accomplish and the mind and body seek comfort through withdrawal, isolation, or diversion. Escape mechanisms include the use of alcohol, drugs, overeating, and taking unusual risks, with the resultant feelings of anxiety, depression, and eventual burnout occurring. Over time, attempts at relieving stressful conditions begin to erode normal family and work life, resulting in diminished performance and wounded relationships that suffer under the strain. The effects of stress lead to cardiovascular disease, heart and blood pressure problems, and a host of other symptoms damaging to the individual.

The focus of this article is not on stress or the causes of stress, but rather it is focused on providing strategies to help public safety officers reduce the impact of traumatic and abnormal situations that may lead to burnout by creating a resiliency tool kit of strategies to overcome the challenges of their positions. The question we will now address is: what can we do to prevent and/or support those individuals who have been exposed to or accumulated traumatic life-altering events?
A 2004 study by WFD Consulting disclosed that highly resilient employees experience fewer physical and mental side effects of stress. They further stated that 18 percent of employees with high resilience did not feel physically or mentally drained at the end of the day, compared with 41 percent of low resilience employees who did, either always or most of the time. This suggests that increasing resilience can increase productivity and health while reducing cost to employers due to lost work time or related sickness. The American Institute of Stress estimated that it costs employers $300 billion annually for stress-related illness (www.stress.org/americas.htm).

From both personal and organizational perspectives it is necessary to obtain skills and knowledge that will lessen the onslaught of problems and quicken their reduction or safe and supported resolution. Building resilience, being able to cope and take steps necessary to combat the effects of stress, is a learned behavior. The ability to cope with stress and catastrophe and to acquire cumulative “protective factors” used in reducing “risk factors” that threaten or endanger a person, organization, or community’s well-being and security are critical skills.

Police officers learn to drive defensively, protect their physical well-being, and survive armed conflict, but when we mention mental health and appropriate behavior, the topic is instantly dismissed. Correctional officers learn when a situation does not feel right and take preventive steps. Searching for and using appropriate weapons when under bodily threat prevents injury and death, and managing prisoner behavior instantly leads to fewer out of control events. Firefighters estimate the severity and extent of a fire, the presence of accelerants or deadly chemicals, and the building’s structural integrity, all of which helps to inform safe decision making. At the other end of the continuum, imbalanced and destructive behaviors lead to disability, dismissal, discipline, liability, and occasionally death.

Resilience training provides a path to sustainable change and is co-equitably as important as other officer safety programs. Resilience training increases an individual’s social competence, problem-solving, self-sufficiency, and independence, and instills a sense of purpose and belief in a bright future (Benard, 1991).

Components of Resilience

Resilience is the power to adapt well to adversity and to cope with stress, grief, concern, worry, tragedy, and other crisis and overcome the trauma, after which the person is able to return, in a planned way, to renewed balance in life and community functioning. It assists in returning one to a sense of normalcy and feelings of well-being. Resilience promotes regaining control of your life as it relates to family, friends, work, community, and other commitments. Resilience helps individuals and others to regain their sense of balance, productivity, and well-being as they address issues and needs relating to life challenges. Finally, resilience training provides skills to help manage crisis, reduce everyday stressful situations, and help people to be more effective in meeting job and personal demands that are associated with everyday living.

Components of Resilience Training for Public Safety

Resilience training for public safety officials addresses the needs of organizations and individuals who frequently encounter traumatic and potentially life-changing events. Training specifically addresses teaching public safety officers to appropriately address personal and community traumatic events in ways that lessens debilitating outcomes.

Resilience training examines the process of coping with and managing hardship and traumatic encounters that occur in the delivery of emergency services. These situations include high danger, potential injury, unsafe situations, death, hazardous encounters, long-term exposure to violence and destruction, and the lack of adequate and responsive health care. Resilience training provides techniques to handle acute tragedy and to bounce back from difficult encounters.

Resilience skills and attitudes are key factors in wellness and health maintenance programs. As with flexibility and problem solving, resilience skills help an individual and the organization cope with adversity while continuing to provide critical services. These skills can be taught and this program can assist organizations and employees to manage stress, promote wellness, accept change, and help build team spirit and increased job satisfaction. There are multiple benefits to the individual and the organization associated with this training, which will be outlined further.

Resilience training provides tools that help individuals and organizations overcome unusual and traumatic situations that, when encountered, are difficult to reconcile and resolve. Police, fire, EMS, and other emergency services have an obligation to assist employees in dealing with stress and thus improve their overall mental and physical health. For example, Stephens and Long (2000) alluded to the benefits of talking and writing about stress-inducing incidents, with talking being the stronger of the two. When trouble strikes, it is difficult to distract thinking from the overwhelming problems and simultaneously make appropriate decisions and execute actions that ease the burden and bring resolution. Providing and refocusing effective coping and problem-solving skills and attitudes is the primary outcome of resilience training.

Furthermore, resilience training helps public safety personnel to acquire special skills and knowledge useful in addressing personal needs and to establish a foundation for acquiring skills as a peer coach. Public safety is a unique and critical service for communities. Addressing
and reducing the effects of exposure to danger and traumatic events is a common goal of the individual employee and the organization. Assisting public safety personnel in acquiring special skills and knowledge that are useful in addressing personal needs, and to establish a foundation for acquiring skills as a peer coach, are major goals of this training.

The Road to Public Safety Resilience Training

Our public safety personnel are charged with providing specialized public services that include responsibilities of safety, rescue, custody of inmates, prevention, and other stop-gap measures that require skill, knowledge, training, attitudes, and a depth of dedication not found in everyday life. In carrying out these duties, they accumulate experiences that, while fulfilling, also exposes them to trauma and visions of a world that can deliver devastation and harm and take away feelings of safety and well-being. Like an accumulation of dust on a window sill, the residue of trauma referenced here is not beneficial to the individual’s physical or mental health. Some events are so traumatic that the impact on thinking and behavior, from that moment onward, changes the person, and often in a negative way. We may fail to see or understand why someone acts as they do, using justifying statements like: “That is just ole Bill; he is a bit different these days!” Unacceptable!

With resilience training, organizations, peers, families, friends, and the individual have an option which provides a level of help that is both proactive and outcome positive. Learning to be more resilient and acquire the knowledge and skills that help maintain a healthy lifestyle is positive in itself. Resilience training provides important tools that assist an individual to find balance in life and work well in relation to others.

Resilience Training Strengthens Coping Skills

Resilience is an integral component of planning and can be used to oppose and reduce “risk factors” that threaten or endanger a person, an organization or a community’s well-being and security. The ability to withstand enormous pressure, to react with confidence, and to continue to carry out one’s duties effectively while others are incapacitated, emerges from a person’s resilience. Resilience training addresses the individual’s hardiness, power of endurance, resoluteness, and self-assurance. Research in the field of resilience training can be found in the psychological literature supporting successful outcomes of improved safety and health.

The Application of Resilience Training

Resilience training has five major applications that include the following components:

- Immediate application when handling a call for service that is fraught with heightened emotions. When others are not in control of their emotions, the officer must be calm, observant, aware of the environment, and able to respond in a manner that prevents further escalation.
- Delayed application following an event that was traumatic or disturbed the officer, triggering an emotional response. Strategies to lessen an emotional reaction are needed to maintain control over one’s behavior/emotions.
- Applied to family, friend, and colleagues who experience trauma or stress.
- Applied by a supervisor to his or her subordinates who display behavior or performance that is not within the organization’s mission or policy.
- Strategies used by the organization to maintain harmony and reduce dysfunction.

Individuals have many skills and competencies to draw on when addressing issues or confronting problem situations. Resilience training helps the individual seek the appropriate response from his or her own competencies and apply them appropriately in confronting the challenge they face. We all have innate resilience capacity and when we face increased pressure, disaster, or other potentially debilitating challenges, we have the ability to self-correct, change to meet the challenge, and implement the right course of action (Lifton, 1993; Werner & Smith, 1992).

Public safety organizations carry primary responsibility for maintaining security and well-being, a task in the 21st century that is difficult at best. However, a small number of men and women trained as correctional, police, sheriff deputies, fire, EMS, medical, and other public safety agency personnel cannot be the only line of defense against traumatic and potentially life-threatening events. All facets of the community, its people, businesses, social and political organizations, volunteer groups, and religious and health-related agencies also have an important role. The key to finding solutions to overcoming problems includes a greater level of understanding, planning, preparation, and an increased ability of individuals, organizations, and communities to be resilient in the face of pending disaster and risk to life and property.

Coaching Required

A powerful and non-threatening method of helping others to build and maintain resilience is coaching. The coaching model is applied in a variety of situations, from professional sports to informally helping someone learn a new software program. As a supervisor we should ask, “Why not help someone switch from a path of derailment to another track where a more comfortable journey can continue?” Unless peers, supervisors, and administrators engage with troubled employees, there is only a slim chance the problems observed will cease to exist. It does not take a sophisticated predictability scale to know that, left unchecked, existing dysfunction and demeanor
will continue on its erratic path. However, there seems to be reluctance or inability to engage in helping a fellow employee change the path they are on. Is it a lack of skill, uncertainty, overreliance on policy and discipline, or a false sense of understanding that believes “ole George will work through this and get better”? Waiting and watching is not acceptable and should be prohibited. If George were on fire, would we wait to see if he somehow extinguished himself and emerged unscathed? No, of course not! It comes down to an important question: why do we go to extremes to save the physical well-being of an officer and seemingly ignore the psychological seeds of self-destruction?

Coaching is warranted when employee behavior and work-related performance do not follow the organization’s mission, policy, and standards of practice. Deviation from acceptable practice should initiate supervisor action. However, that action has many approaches and knowing one’s employees helps in making a correct decision about what can be done. Identification of problem behavior or performance and making the decision to act is somewhat subjective and includes a broad array of variables and considerations. Decision-making is dependent on having solid information and confidence in what must take place.

If we can say with certainty that we want to engage and help, then perhaps it is useful to know some of the intervention tools that can be helpful. Examples of intervention tools would be to refer the troubled employee to an agency for assessment and supportive counseling. Another possibility is to adequately develop a team of employees, overseen by a supervisor, who are thoroughly trained in the resiliency model. They would be well versed and able to identify the signs and symptoms when a colleague is heading down the slippery slope toward dysfunction or self-destruction. This team would work with the delivery and development of resiliency training in the workplace and serve as the “go to” people within the agency to approach an officer in a supportive manner and provide guidance toward wellness. This will hasten the return to healthy productivity and reduced lost work time and accompanying problems.

We adhere to the principle “that good relationships and coping strategies are the key to success in every area of human activity” (Stein & Book, 2000). To be successful, it is important that the employee is able to know and manage him- or herself. In policing and public safety, as perhaps with few other occupations, it is necessary that employees are sound, sane, and optimistic about the world they work within. It is incumbent that supervisors and managers are trained to identify the onset of problems and have the requisite skills and knowledge to intervene effectively with the employee. As such, they must be aware of the many influences that impact on the individual and require corrective action. Partial skills and expertise are not sufficient. The peer coach must be well versed and trained in intervention and follow-up that also includes evaluation and attention to the personality and behavioral characteristics listed in the training realms.

Corrective action addresses employee behavior, performance, and activities that were outside of policy, procedures, and rules of conduct. Normally, we take corrective action to punish past behavior and prevent future occurrence. Sometimes this has the desired effect. But, all too often it tends to drive the employee toward a more secretive and low-profile position where caution is exercised, but attitudes and behavior may remain at or below pre-event levels. We sometimes lose trust with lingering disfavor, which then interferes in the workplace by creating even more tension and disruption.

Coaching is not punitive. Instead it seeks to engage the individual in a collaborative process with the supervisor or peers providing assistance. Coaching is about change, helping a person to do better, to drop old habits, and to be a more effective employee. Coaching is done to intervene in work-related performance problems, not personal issues. The driving force may be personal but work guidance is focused on performance. The coach strives to help the employee make appropriate life and performance changes and to do so in a positive and non-threatening manner.

Assisting the employee to find resolution to problems and bring about sustainable change in their thinking and behavior involves a guided process and supervisor participation. This is a collaborative process where both parties seek the best method to achieving goals the employee stated as part of setting change goals.

The coach assists the employee to conduct a self-assessment, list strengths, articulate expectations, examine barriers to success, and stipulate what motivates them (Whitworth, Kimsey-House, & Sandahl, 1998). Motivation includes several aspects of the job and each is a separate target goal. They include:

- Job performance.
- Productivity.
- Job satisfaction.
- Promotion and advancement.
- Outlook and attitude.

Motivation helps the employee acquire and maintain an enthusiastic attitude while retaining a positive outlook toward their job and the organization. Motivation guides improvement, contributes to work performance, increases engagement with other employees, and reinforces an improved attitude toward the organization.

Effective coaching skills provide guidance and help to a person by using the coach’s own skills, knowledge, and experience, applied to the situation or issue being addressed. Coaching another person demands commitment, dedication, and personal investment. Included in being an effective coach are the following skills:
Summary Statement

Assisting public safety personnel in acquiring special skills and knowledge that are useful in addressing personal needs and establishing a foundation for acquiring skills as a peer coach is a primary goal of resiliency training. Public safety is a unique occupation that provides critical services to communities. Employees are subjected to unusual and stressful situations that, over time, accumulate and result in behaviors and performance problems that cannot be left unaddressed. Addressing and reducing the effects of exposure to danger and traumatic events is a common goal of the individual employee and the organization, and demands that steps are taken to strengthen resilience and sharpen methods and skills used to help employees who may become derailed by the challenges they confront.

We should not expect that simply by telling an employee to “straighten out” that he or she will automatically do so, or possess the skills or resiliency to do so. Success for change is highly dependent on the individual and his or her supervisor and substantial levels of sincerity, trust, and confidence. Finally, there is no more important supervisor role than to care for and guide subordinates. Helping employees maintain a healthy lifestyle benefits family, peers, work, and the health and welfare of the individual. To accomplish this, resilience training provides a great number of benefits to all involved.

References


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