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Law Enforcement Officers' Experiences of Exposure to Trauma

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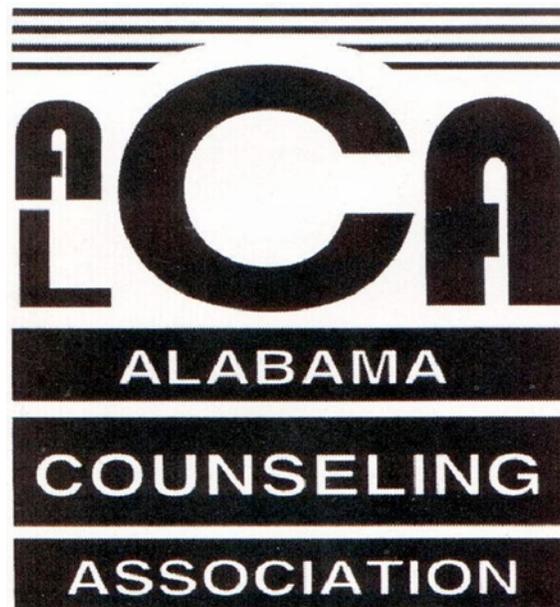
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The Alabama Counseling Association Journal



- Enhancing human development through the lifespan
- Promoting public confidence and trust in the counseling profession
- Caring for self and others
- Acquiring and using knowledge
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Letter from the Editor

Hello and happy Spring 2016!

It has been a pleasure to serve as the ALCA Journal editor for the past few years. And now it is time to pass along the honor to the next editor!

We have celebrated 40 years of publication and that is certainly a milestone for our organization.

Deepest appreciation goes to Chip Wood who keeps our association strong and vital! Chip is one of the best executive directors I have ever met because he truly cares about our profession and the ALCA membership. We are lucky to have him!

Another big thanks goes to the contributors to our Journal. The contributors bring us fresh and new perspectives on a variety of topics!

And finally, thank you to the editorial board members who volunteer their time to read and provide feedback to the manuscripts received.

I am turning over the helm to one of those dedicated editorial board members, Dr. Eddie Clark. Dr. Clark has been a frequent contributor to the Journal and more importantly has served as an editorial board member for many years. Congratulations Dr. Clark!

I encourage all of you to keep our Journal going by contributing. Our association is strong because of the diversity of our members. The Journal can and should reflect our membership through professional literature emphasizing the unique diversity of our divisions.

Thank you for the opportunity to serve as the Journal editor. And I look forward to seeing the next ALCA journal as we begin a new associational year.

Kind regards,

Dr. Linda Foster



Alabama Counseling Association

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Editor-Elect ALCA Journal

I am greatly appreciative for the opportunity to serve in the position of editor for the Alabama Counseling Association Journal starting May 1, 2016. I am a tenured Associate Professor at Troy University in the College of Education/Counseling Psychology Department.

I have been recognized for my commitment to research including receiving the Individual Publication Award from the Alabama Counseling Association in 2005, 2007, and 2014. I also served as the chair of the Troy University Institutional Review Board (IRB) from 2009 to 2011.

As editor of the ALCA Journal, I will solicit for publication manuscripts that are thought-provoking and pertinent to the diverse needs and interests of Alabama counselors who are employed in a variety of work settings. The main focus will be to strengthen the common bonds among counselors and to help maintain a mutual awareness of the roles, concerns, ethical issues, and progress of the counseling profession.

I look forward to working with you so please do not hesitate to contact me.

Respectfully,

Eddie Clark, Ph. D, LPC

Editor

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Law Enforcement Officers' Experiences of Exposure to Trauma

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Abstract

Violent, traumatic, and stressful work situations are common for law enforcement officers (LEOs). LEOs are susceptible to stressful situations that impact their emotions and have the ability to affect job performance. This phenomenological study focused on identification of how traumatic incidents affected 10 LEOs from 2 rural law enforcement agencies from a rural community in the southeastern United States. Participants were interviewed regarding the experience of how encountering or witnessing traumatic events impacted their emotions during and after the incident, coping mechanisms they implemented, views on seeking mental health treatment, and importance of peer support. Findings indicated that LEOs expressed significant emotional distress as a result of traumatic incidents, most specifically when responding to incidents involving children. Additionally, they compartmentalized feelings in order to remain professional and perform job.

Introduction

The role of Law Enforcement Officers (LEOs) can be multifaceted and complex. LEOs work to instill a sense of safety through community service in which they interact with children and adults. Conversely, these same LEOs interact in an authoritarian capacity with members of the same community during times of violence or trauma. LEOs often face traumatic events on a daily basis, which can result in psychological distress (Marmar et al., 2006).

Norris et al. (2002) identified a prevalence of Post-Traumatic Stress Disorder (PTSD) in LEOs and first responders who encountered or witnessed traumatic events, such as mass shootings and industrial disasters. Regardless of how physically or emotionally resilient the LEO appears, he or she has only a finite ability to resist the cumulative effects of traumatic events (Patton, 2000). LEOs can experience long-term effects due to traumatic exposure including a) substance use, b) disruption of family and social support, and c) decreased job performance (Regehr, LeBlanc, Jelley, Barath, & Daciuk, 2012). Some psychological effects associated with traumatic exposure are less visible, PTSD. However, as a result of the stigma associated with mental health services, many LEOs avoid treatment for their traumatic exposure for fear of being seen as weak within their subculture (Woody, 2005).

According to Woody (2005), LEOs face numerous stressors, including potentially dealing with the issues of community members' deaths, deaths of fellow officers, natural disaster response, as well as organizational demands of the job (e.g., public relations). LEOs face challenges to their mental and physical health, resulting from continual exposure and efforts to cope with these situations. Marmar et al. (2006) found a strong association between reactions during or in the immediate aftermath of exposure to a traumatic incident, known as peritraumatic reaction, with PTSD symptoms. However, there is little qualitative research regarding the daily traumatic events and stressors encountered or witnessed by LEOs.

This exploratory research offers an in-depth look through the eyes of LEOs regarding response to traumatic and stressful events within their community. LEOs were asked to identify the types of traumatic events they encounter on a regular basis, the extent repetitive traumatic events affect their levels of stress, symptoms they experience as a result of the traumatic experiences they encountered, and coping mechanisms they employ to manage the effects.

Purpose of Study

For this study, LEOs were interviewed regarding their awareness of how they had been affected by recurrent traumatic events. The research illuminated where their experiences intersected and diverged and what common characteristics could be described concerning these experiences. One of the main objectives of the research was to explore repetitive traumatic events as a transcendental phenomenological experience and to examine how LEOs cope with the traumatic nature of these events.

Methodology

Participants

Ten participants were recruited through a community partnership between researchers, the chief of police, and the sheriff, in a small rural community in the southern United States. A snowball sample was used to obtain participants, along with posting flyers throughout law enforcement agencies. Ninety percent of the participants were Caucasian and 10% African American. The average age of participants was 32. Participants varied within their agency's ranking system. All of the participants were employed within the chosen small rural community.

Procedure

A set of open-ended questions focused on the general theme of the impact of exposure to traumatic experiences on LEOs was used to gather data, in order to identify common themes and behaviors of LEOs regarding the traumatic events dealt with on a daily basis. The interviews were audio recorded and transcribed. The interview questions were designed to understand how the experiences of the impact of exposure to trauma emotionally affected LEOs. Some of the open-ended questions participants responded to included: a) summarizing the most traumatic incidents experienced most frequently as a law enforcement officer; b) describe what an officer experiences in the aftermath of a traumatic incident; and c) what were some of the emotional feelings you experienced after the traumatic incident.

Data Analysis

Data was coded and themed through recording of important words and statements that told the story of the participants' lived experiences. Codes were formed by using the symbolic words, phrases, and ideas identified from participants' interviews. After the coding process, the codes were classified in a way to identify and form common themes. The codes listed in Table 2 were obtained by reading and rereading the data line by line as well as analyzing the data in order to identify common themes shared by participants regarding their emotional experiences to traumatic incidents. Each participant was provided a copy of the transcription of their original interview and a copy of the questions asked of them during the first interview. Participants read over the original interview questions as well as their transcribed responses to verify the accuracy of the transcriptions. None of the participants disagreed with the final transcribed account of their lived experiences obtained from responses to the interview questions originally asked of them.

Table 1

Codes Identified by Analyzing Data Obtained Through Participant Interviews

Codes Formed From	Codes Formed From	Codes Formed From	Codes Formed From	Codes Formed From	Codes Formed From	Codes Formed From	Codes Formed From
Separation from Self	Connecting to other Officers	Vulnerability of Children	Professional Response versus Personal Response	Community Member versus Community Advocate	Gallows Humor	Law Enforcement Views on Mental Health Treatment	Coping Strategies
Compartmentalize	Communication	Kids more stressful	Duty to Complete Job	Focused on Job	Stress Relief	Weakness	Exercise
Personify	Stress Relief	Empathy to Parents	Desensitize	Depersonalized	Depersonalize	Emotionless	Talking
Nightmares	Shared Experiences	Anger	Adrenaline Rush	Lack of Friends		Hero	Peers
Numbness	Fears	Helplessness		Lack of Private Life		Inability to Perform Job	Get Away From Job
Helplessness	Friendship	Compartmentalize					Family
Inability to Focus		Focus on Job					Alcohol
Desensitized		Guilt					Rage

Results and Discussion

In general, participants consistently expressed similar initial emotional responses such as: a) adrenaline rush; b) shock, panic; c) desire to do job; and d) emotional numbness. Further, participants indicated they often relied on their instinct and training to determine whether or not to inform peers and mental health professionals regarding the emotional symptoms and feelings they experienced after a traumatic event. Participants reported a fear of being viewed as weak or unable to carry out their duties as LEOs should they receive assistance from a mental health professional. Some participants expressed emotion during the interview process through tears and anger when recounting traumatic material. The expression of feelings by participants during the interview demonstrated the traumatic affect that PTSD, job related traumatic experiences, and stress had on the lives of participants.

Participants were consistent with their identity within the law enforcement subculture and reports of difficulty in seeking assistance from a mental health professional. During interviews, many of the participants indicated that experiences differed based on gender and years of service as a LEO. Some participants expressed that male and female LEOs dealt with the emotional impact of traumatic incidents differently; however, responses to the interview questions identified that they coped with them similarly. For example, it was indicated that male LEOs who visibly expressed emotions were considered to be weak, while female LEOs who showed emotions were said to be sensitive. As supported by Malmin's (2012) findings, participants indicated that LEOs who showed emotions were perceived to be unable to perform their duties. It was noted that even if strong emotions were experienced upon arrival at a traumatic incident, LEOs needed to compartmentalize those emotions to remain focused on job duties. The following is a discussion of the themes identified from the data analysis.

Separation from Self (dissociative phenomenon). Consistent with the research of Carlson, Dalenberg, and McDade-Montez (2012), many participants indicated they were impacted with intrusions to cognition, sensory perceptions, or behavior into their daily life along with re-experiencing the trauma, nightmares, feelings of helplessness, numbing, and compartmentalization as a result of traumatic incidents encountered as LEOs. The symptoms experienced by the majority of participants were identified as being consistent with those of PTSD and have the ability to cause a severe disruption in an individual's life. Experiencing PTSD-like symptoms made it difficult for those affected to cope in several different aspects of their daily living including employment, personal relationships, and social relationships.

To illustrate the phenomenon of Separation from Self, a participant who was involved in an officer involved shooting explained how during the shooting he felt as if everything sped up and he could not remember actually shooting his weapon. In responding to his initial emotional reactions to the traumatic incident, Participant 10 indicated that he experienced "tunnel vision" during the shooting and a sense of "anger" during the aftermath. Another participant expressed how when he arrived at the scene where someone was shot he could not focus on the body of the individual because he had a job to do. He expressed that LEOs have to "hold your composure" and "go through the process, a checklist." Another participant described a feeling of numbness when attending traumatic experiences. He expressed that there were specific traumatic experiences that "stick" with him and he would remember them for periods of time.

Yet another participant stated he felt officers started to experience the "notion that if you have seen one death you have seen them all." One participant reported that dealing with traumatic events required "flipping a switch". He stated that when he got to the scene of the traumatic incident he just went through the mechanics of the job and although he saw the trauma he didn't

acknowledge it. He continued to explain that while at the traumatic incident you “just kind of don’t have any emotional feelings.”

Participants’ ability to separate themselves from the traumatic incidents by numbing, compartmentalizing, desensitizing, and automatically going through the motions of the job all demonstrated examples of dissociation which was a criteria for PTSD. This separation of self has contributed to difficulty in having healthy social and personal relationships, performing job duties without being compromised, and utilizing emotional outlets.

Consistent with other research on LEOs, participants experienced dissociation by “compartmentalizing” emotions in order to perform their duties. Carlson, Dalenberg, & McDade-Montez (2012) conducted a study to identify the relationship between dissociation and PTSD. According to Carlson et al., (2012)

Marked elevations in dissociation were observed in PTSD, DID, and other dissociative disorders, which are all described as having trauma etiologies in *DSM-IV* and are all categorized as stress-related disorders in ICD-10.

Beaton, Murphy, Johnson, Pike, and Cornell, (1999) expressed that frequent coping mechanisms such as numbing, avoiding, and withdrawal could also be associated with increasing PTSD symptoms instead of a way to decrease the impact of traumatic incidents. Researchers identified that dissociation had been used to protect the individual from being totally aware of the traumatic incident occurring (Sijbrandij, et al., 2012). The findings of this study, which are consistent with previous research, can provide a sense of normalcy to the experiences of LEOs who respond to traumatic incidents..

Connecting to other officers. Participants were asked about the importance of support from their peers and how they helped during traumatic incidents. Participants were able to share how they used fellow LEOs to work through traumatic incidents witnessed or encountered while in the line of duty. Participants reported comparable experiences when interacting with peers after traumatic incidents such as sharing experiences, talking about fears, friendship, and discussed emotions. It has been suggested that emotional support and having the opportunity to speak with others who have similar traumatic experiences peers were able to connect with one another on an emotional level; therefore, assisting with recovery (Stephens & Long, 1998).

One participant discussed the experience of crisis debriefing. He discussed how talking about the incident to his peers helped him cope with the situation. Further, he indicated that talking to a fellow officer helped because they have been in similar situations and “know what these people are going through”.

One participant said this:

There have been times I've left up here, had a late day, had paperwork and stuff to do or whatever and there wasn't anybody at the station to talk to about what you have going on and on the way home I will pick the phone up and I will talk to somebody. I will call one of my buddies, I will call another deputy. We all depend a lot on each other. Who better to talk to about traumatic stuff than the people you work with and see the stuff every day with you? And some of the guys with seniority, some of the veterans they've seen it, they can help out or they can just listen, you know. And I think that's where a lot of people go wrong in this job, you know. In this profession we are in, they don't talk about it with

anybody. They try to handle it their selves because they don't want to appear weak or appear like I don't have to talk to anybody.

Participants shared that having the support of peers had advantages such as support from senior officers, you obtain friends who would be there for you, you learned to depend on one another, and you learned from others mishaps. Several participants expressed the importance of talking and having the support of peers because they shared similar experiences and understood what fellow LEOs have been through. According to Stephens and Long, (1998) trauma was positively related to the criteria associated with PTSD and this correlation had been decreased by LEOs obtaining support while at work and obtaining emotional support and being able to talk to peers. Being provided the opportunity to communicate with friends, family, and peers about the traumatic incident had a strong negative association with symptoms of traumatization (Jones & Kagee, 2003).

Comparable with research, participants noted how their relationship with fellow LEOs was an important part of coping with traumatic incidents encountered or witnessed. Haarr and Morash (1999) found that LEOs who encountered or witnessed traumatic incidents often kept their thoughts and feelings to themselves; however, they would express their feelings and emotions to coworkers and relied on their support. Several participants noted they felt more comfortable discussing feelings and experiences with fellow LEOs because peers understood and have been through similar situations. According to Greenstone, (2005) officer-to-officer communication was identified as easier than officer to mental health professional. Respondents identified their peers as equals, which due to the LEO subculture, includes a certain code of silence and an implied sense of confidentiality. These findings were meaningful as they supported previous research findings that suggested a greater likelihood of burnout to LEOs who

encountered or witnessed traumatic incidents and did not have the support of their peers (Hawkins, 2001). Respondents who spoke to peers about traumatic incidents encountered felt supported and came to the realization to “never leave somebody to deal with it alone”. A significant reason for discussing exposure to traumatic incidents with peers included building a strong working relationship as well as a personal bond.

Gallows Humor (humor that treats serious, frightening, or painful subject matter in a light or satirical way, (Henman, 2001)). Participants were able to share what part humor played in helping with coping, as well as the importance of humor as a way to relieve the stress associated with witnessing/experiencing different traumatic incidents. During their interviews participants reported similar feelings about the role humor played when dealing with the stressors of traumatic incidents such as, gallows humor, depersonalize, relieve stress, and lighten to mood. Researchers have discussed how finding the humor and joking was a way of taking control of one’s reaction and assist them in maintaining control of a situation in which they have little to no control over (Henman, 2001).

One participant indicated the reason LEOs use humor when dealing with traumatic incidents was to assist them in living with the tragedies they witnessed or encountered. He expressed the importance of employing “light heartedness” to the incident. Another participant shared that he used humor as a way to prevent himself from taking the traumatic incidents witnessed or encountered personal. And yet another participant indicated that humor served as a distraction from the traumatic experience. One LEO offered:

The only way of dealing with it, you have to laugh at it. Life sucks, we see the worst of the worst. We see people when they are having the worst day of their life and if we get so

emotionally involved then it becomes our worst day because we try to connect with them. We don't connect with people so when you see something funny you have to laugh about it. You have to think that is funny. You are doing it to lighten the mood to deal with it.

Not all of the participants believed that humor should be used to relieve stress; however, they have recognized that many LEOs have used it for that purpose. Several participants stated that relieving stress was very important; however, making jokes about someone who was deceased or had experienced a traumatic incident should not occur and was disrespectful..

Henman (2001) proffered that using humor was a good way to overcome numerous types of traumatic incidents. Humor has been identified as a significant part of communication that had been analyzed as a determinant of resiliency and helped individuals recover from traumatic incidents witnessed or encountered (Henman, 2001). According to participants, the use of humor helped them live with the trauma seen as well as to make some kind of sense of it. Henman (2001) indicated that finding humor in a situation was a way to covertly fight back emotions felt while at the traumatic incident, and a way to maintain control over one's feeling when they do not have control over the situation. These findings are relevant as they demonstrate how humor lightens the situation so that LEOs are not only working among doom and gloom (Scott, 2007).

Vulnerability of Children. Participants expressed they found it more difficult coping with their emotions when witnessing/experiencing traumatic incident involving children then when the incident involved an adult. Researchers have found that symptoms associated with PTSD were more prevalent among LEO who interacted with children involved in traumatic incidents (Follette, Polusny, & Milbeck, 1994).

Several participants shared feeling anger at the parents because their irresponsibility allowed for the situation to occur and a child to get hurt. They shared a sense of grief for the children and even the family, but indicated the anger overwhelmed them.

One participant shared to cope with traumatic incidents involving children he “pushes it down and sticks it in a bag. He further explained how he believed it was human nature to want to protect a child and that it was natural to feel guilty because of the inability to help them when they had suffered. Another participant explained how when she witnessed/experienced a traumatic incident involving an adult it did not affect her as much as an incident involving a child. She shared that when she arrived at the scene of an adult she went through the motion and does her job, but has cried when a child was involved.

Consistent with other studies (e.g., Bourke & Craun, 2014), the LEOs found it difficult to control sympathizing and understanding emotions when obtaining reports pertaining to the sexual assault of a child. The LEOs expressed how they experienced more emotions for these children because of their innocence. The emotional experiences felt by the participant had consequences that went beyond affecting their duties as a LEO but also affected them personally as they often visualized their own children in these situations. These findings were meaningful to this study as previous research has demonstrated that LEOs are at higher risk of psychological injury due to exposure to child abuse and other traumatic incidents involving children (Powell & Tomin, 2011).

Law Enforcement Views on Mental Health Treatment. The stigma associated with receiving mental health treatment and the law enforcement subculture affected the participant’s ability, identify, and receive relief from symptoms related to PTSD. What emerged from

disclosure by the majority of participants was that seeking mental health assistance as a result of symptoms associated with traumatic incidents witnessed or encountered caused a fear of being viewed as weak and unable to handle job duties. Participants reported that they not only did not want to appear weak to peers but also to citizens who often look to them as a “hero” and someone who should be able to handle any situation without being affected by emotions. The participants expressed a concern the LEO who sought out mental health treatment would not be capable to “have the back” of fellow officers during stressful situations. One participant felt it was a “huge tactical disadvantage” because the LEO who was sensitive would break down.

Despite all the traumatic incidents witnessed or encountered, the law enforcement culture did not encourage police officers to express emotions they identified with. Instead, they were encouraged not only by peers, but also by the community served to control their emotions and not discuss them with professionals, which is consistent with findings by Brown, Fielding, and Grover (1999) and Malmin (2012).

As seen within other research pertaining to LEOs who sought out mental health treatment due to exposure to traumatic incidents, nine of the ten participants in this study expressed they would not seek mental health treatment. Many participants shared they personally did not believe anything was wrong with seeking counseling; however, they would not personally seek counseling for fear of what their peers, supervisors, or the community might think. These findings further supported the research of Malmin (2012) and Paoline (2003) who found that LEOs do not seek mental health treatment due to the stigma and fear of appearing incapable of performing their job as a result of mental weakness. However, there was one outlier who indicated he believed seeking mental health treatment should be mandated for LEOs who encountered or witnessed traumatic incidents. He reported changing his opinion about mental

health treatment after attending a debriefing as a result of being involved in a shooting. The respondent indicated that,

We'll be the best ones in the world to talk to. When we went to that seminar, all the officers that were there to talk too had been through what we had or worse. You could see it on their face, like I said, we coped well, even the people at the seminar said that for the simple reason that we talked through it so much. These other guys had no one to talk to. It was tearing them up in there. I don't know if you've ever seen anything like that but, whew. It was intense. I felt for those guys, so never leave somebody to deal with it alone, give them support. That's what I took from it. People need support.

Community Member versus Community Advocate. Working within a rural community could have disadvantages over working within an urban community such as, no anonymity within the community, loss of friends due to occupation, and possibility of relatives involved in traumatic incidents. Rural LEO go under additional stress because they were unable to attend community and social functions with family and friends without being seen as law enforcement and expected to uphold a particular image by community members (Buttle, Fowler, & Williams, 2010). As a result of the connection between the rural officer and their community, it may be difficult to have a private life because even when off duty the community identifies the LEO as an officer (Buttle, Fowler, & Williams, 2010).

Participants indicated that they did not have friends outside of law enforcement because outsiders "don't want to be put in jail". One participant explained how even though he grew up in the same rural community for which he served as a LEO, he had few friends outside of those with whom he worked. He shared that once you became a police officer many of your friends

abandon you because they do not want to be associated with law enforcement. When discussing the aftermath of the shooting he was involved in and how negatively it was perceived within the community, one participant expressed disappointment and anger as a result of feeling betrayed by the rural community that he protected for many years.

The majority of the participants shared how no matter the circumstance, whether there was a traumatic incident involving a family member, close friend, or acquaintance the important thing was to maintain professionalism and focus on the job at hand. Within many rural communities LEOs took on more roles than just an enforcer of laws such as, a humanitarian role, first-line responder in emergency situations, educator in the community, overseer of youth programs, and maintaining traffic control (Jobes, 2003). In a study by Jobes (2003), respondents indicated that one of the most stressful aspects of being a LEO within a rural community was the lack of respect shown to them by the offenders, the public, and at times the judicial system. In this study, several participants discussed how one day they were seen as heroes within the community and then after a traumatic incident they were turned on and seen as a villain.

Professional Response versus Personal Response. Participants were asked about their reactions upon arrival at the scene of a traumatic incident as well as the difference between their professional response and their personal response. The majority of the participants continued to perform their duties and felt they had to disregard their personal feelings and emotions. Several of the officers mentioned experiencing an “adrenaline rush” that assisted them in getting past the trauma being witnessed or encountered so they could do their jobs.

Anger is an emotion that was identified as a particular struggle when responding. One participant recounted responding to the rape of an elderly woman and how he struggled to set

aside the anger to take care of the victim. He also described an incident of having to shoot and take the life of a perpetrator, stating that it was the last thing that an officer wanted to do; however, it was part of the job.

One participant stated that he typically did not experience any emotions or feelings when on the scene of a traumatic incident; however, once he had to respond to a suicide which had a great impact on him. He stated that all this time later, he still returns to the scene of the suicide just to think.

Several participants had a difficult time coping with not being able to arrive at the scene of the traumatic incident fast enough. One LEO expressed that it was not the traumatic scene that bothered him because he just went through the motions and did the job he was trained to do. He shared that for several days after the incident he replayed the event and wondered “what if” he got there a minute even 30 seconds faster.

The occupation of law enforcement has historically been considered to be masculine work, primarily geared towards fighting crime. The emotional experienced of responding to traumatic situations and the need for LEOs to hold back all displays of emotion while on the scene can negatively impact psychological well-being (Schaible & Gegas, 2010). The majority of the participants explained no matter what emotions felt while at the scene of the traumatic incident they knew it was imperative to maintain control over their emotions and to focus on job duties. LEOs learned how to react or not to react during a traumatic incident through training and watching more experienced LEOs. The LEO subculture and rituals also regulated the way emotions were displayed at the scene of traumatic incidents as well as when it was appropriate to display these emotions (Martin, 1999). Implications of the information gathered during the

interview process of this study revealed that respondents felt as if they became desensitized to emotions and automatically went through the motions of the job when at the scene of a traumatic incident.

Implications and Conclusions

Little research has focused on the impact of exposure to daily trauma on LEOs. Understanding and recognizing the symptoms experienced by LEOs who have encountered or witnessed traumatic incidents could decrease the potential of PTSD related symptoms (Beck & Coffey, 2005) and increase the quality of life for the individual affected (Nicoara & Amelia, 2012). Obtaining a better quality of life for the affected individual could increase productivity, decrease in susceptibility to burnout, enhance job enjoyment, and manage psychosocial issues that may impact daily life (Nicoara & Amelia, 2012).

Conversely, not recognizing the severity of the emotional impact the traumatic incidents plays on the LEO can cause the quality of work and life to be affected. LEOs who try to hide their emotions often found themselves experiencing prolonged stress, poor job performance, disrupted relationships, changes in personality, and the development of PTSD (Levenson, 2007). When officers internalize traumatic scenes and life-threatening events witnessed they eventually had a difficult time functioning within a healthy lifestyle and spend the majority of their work day trying to hold him or herself together (Levenson, 2007). Through information gained in this study, LEOs, supervisors, and mental health professionals can work together to develop a partnership within the workplace and reduce the lasting emotional effects of traumatic incident, including stress reduction, decrease in depressive episodes, and decrease in anxiety by resolving issues such as sadness, anger, and fear (Chesney et al., 2006).

Recommendations for Further Action

For future research, there are several areas to be considered. It would be fitting to conduct research on how emotional reactions differ between urban and rural LEOs and whether having close ties with the community increased the emotional reactions caused by traumatic incidents. Future researchers could also examine how the support of peers, supervisors and administration affected the decision of LEOs regarding seeking assistance from a mental health professional. In addition, forthcoming researchers could discuss the impact of dealing with traumatic incidents involving children resulted in more emotional distress as compared to incidents involving adults.

Summary

LEOs who encountered or witnessed traumatic incidents within the line of duty often experience many of the aforementioned criteria. However, there has been limited focus on the emotional impact of daily exposure to traumatic incidents of LEOs. This current study researched the lived experiences of LEOs who encountered or witnessed traumatic incidents. Using the data identified from the lived experiences of the participants, the common themes identified could possibly improve counseling practice with LEOs in areas such as identification, diagnosis, and treatment. The benefits have great meaning for LEOs, their families, and the communities they serve. Potential implications for positive social changes as a result of this study could include law enforcement agencies and supervisors acknowledging the stressors encountered or witnessed by LEOs and how officers are affected and working with trained mental health professionals and organizing a critical incident stress debriefing team along with developing policies regarding critical incidents and traumatic incidents.

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