Officer Safety and Wellness Group Meeting Summary

Pandemic Policing

Kelly D. Bradley
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Kelly D. Bradley
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Letter from the Directors of BJA and the COPS Office

Colleagues:

Since 2011, the National Officer Safety and Wellness (OSW) Group has worked to improve the health and well-being of our nation’s law enforcement officers. In recent meetings, the group has focused on officer resilience; officer suicides; felonious assaults on officers; mental health, peer support networks, crisis hotlines, and other programs to help improve law enforcement health and safety; and the particular safety and wellness challenges facing small and rural law enforcement agencies.

In July 2021, the OSW Group convened virtually to discuss the safety and mental and physical health and well-being issues arising from the COVID-19 pandemic and widespread protests in many American cities related to high-profile incidents and calls for police reforms during the summer of 2020. This series of meetings focused on managing simultaneous crises with insufficient resources and personnel, along with planning efforts to mitigate future events based on lessons learned from the past two years.

BJA and the COPS Office are proud to partner in support of the OSW Group. We are grateful to the law enforcement officers, leaders, subject matter experts, and others who continue to offer their time and expertise to help guide our efforts as we develop the best resources we can for the field.

Sincerely,

Karhlton Moore
Director
Bureau of Justice Assistance

Robert E. Chapman
Acting Director
Office of Community Oriented Policing Services
The Bureau of Justice Assistance (BJA) and the Office of Community Oriented Policing Services (COPS Office), both components of the U.S. Department of Justice (DOJ), formed the national Officer Safety and Wellness (OSW) Group in 2011 to bring attention to the safety and wellness needs of law enforcement officers following a number of high-profile ambushes of police that resulted in officer fatalities. Since 2011, the OSW Group has raised awareness and increased knowledge about officer safety and wellness and encouraged law enforcement agencies to adopt practices that recognize that their most valuable resource is the men and women who put their lives on the line every day to keep their communities safe. For this reason, it is critical that the OSW Group—with support from DOJ leadership—discuss, share, and promote the best possible strategies to keep our nation’s law enforcement officers safe on the job.

To that end, the OSW Group regularly brings together law enforcement practitioners, researchers, and subject matter experts (SME) to amplify new and existing practices designed to improve officer safety and wellness in the field. The goals of the OSW Group are

- to create an enabling environment for law enforcement organizations and researchers to collaborate on improving officer safety and wellness;
- to bring together law enforcement organizations and researchers to share knowledge and information about officer safety and wellness initiatives;
- to broadly disseminate information and best practices to the law enforcement field.

The OSW Group identified 16 priority areas on which to focus, grouped under four main themes:

I. Operational and emergency responses

1. Injuries and deaths from gunfire
2. Premeditated and unprovoked ambushes
3. Rifle, long gun, and assault weapon threats
4. Task force operations (federal and local)
5. Offender history and behavior during incident
6. Court security
II. Leadership and management

1. Leadership and safety practices
2. Equipment
3. Deployment strategies and communication technologies

III. Mental and physical health and wellness

1. Physical health (i.e., addressing common health conditions)
2. Psychological health
3. Maintaining good health
4. Former military in law enforcement

IV. Training

1. Education and training
2. Emergency vehicle operation and safety
3. Foot pursuit safety

Since 2011, the OSW Group has discussed these critical officer safety and wellness issues at regular meetings and produced a number of resources that encourage law enforcement agencies nationwide to adopt a culture that recognizes and elevates the value of officer safety and wellness. BJA and the COPS Office continue to strive to provide agencies with all the tools necessary to respond effectively to the most persistent and prevalent safety and wellness challenges facing law enforcement officers today.

American policing faced unprecedented challenges in 2020: a pandemic the likes of which had not been seen in 100 years beginning in January and widespread civil unrest fueled by the killing of George Floyd in Minneapolis, Minnesota, in May. These events impacted the safety and wellness of policing agencies nationwide. For three days in July 2021 the COPS Office and BJA held a series of virtual meetings focusing on the impact of these challenges to law enforcement. In total, 45 people came together: 23 law enforcement leaders from agencies large and small, representing local, state, and federal jurisdictions, as well as 12 experts from nongovernmental organizations and 10 staffers from DOJ offices. The meetings were structured to foster a dialogue with the smaller and more rural departments on July 20 about coping with sustained crises in the absence of sufficient resources; with the larger and more urban departments on July 22 about managing simultaneous crises; and with the entire group on July 27, in a wide-ranging discussion about the lessons learned for mitigating the adverse impacts of future crises, with a focus on addressing human resources concerns.
Overview of the July 2021 Virtual Meetings

On March 11, 2020, the World Health Organization (WHO) declared COVID-19 a global pandemic (World Health Organization 2020). The pandemic upended most facets of daily life across the globe. Countries shut their borders; travel was restricted; and many businesses, government offices, and schools of all levels were locked down with only essential workers physically going to work. Anyone who was able to conduct their work duties or schooling from home was now doing so, and virtual meetings and classes replaced in-person gatherings. In the United States, every urban, suburban, and rural community in all 50 states plus the District of Columbia and U.S. territories was affected by this highly infectious disease. Without a clear understanding of what exactly the disease was and how it spread, public health and government officials were left trying to figure out how to keep the public safe. Less than three months into the pandemic, George Floyd was killed in the custody of Minneapolis (Minnesota) police officers attempting to arrest him for passing a counterfeit $20 at a convenience store. Mr. Floyd’s death sparked widespread demonstrations as hundreds of thousands of people across the United States took to the streets in protest (Wright 2021). Consequently, law enforcement executives across the country faced the challenge of protecting their communities and their officers from COVID-19 while also needing to determine how to keep their workforce healthy as they policed the protests—creating, in the words of one police executive, a “really good test of what systems or processes we had in place” because “none of us could have predicted what was going to happen the last year and a half.”

The twin challenges of a worldwide pandemic and nationwide civil unrest in the wake of the death of Mr. Floyd forced law enforcement agencies to confront a number of extraordinary situations and continuously adapt as needs and circumstances changed. A unique aspect of these challenges was their widespread nature: Virtually no department was untouched by either the pandemic or civil unrest, and many departments had to deal with both simultaneously. The challenge for law enforcement agencies has been how to navigate these crises while also keeping communities and officers safe. From an officer wellness perspective, keeping officers safe is not just a physical safety issue; these stressors created a psychological toll on the officers as well. As COPS Office Assistant Director Deborah Spence noted, “When everyone is looking to public safety officials for leadership, it’s hard to stop or slow down and address the health and well-being of the very people charged with protecting the public. It is vitally important to ensure that the police that patrol our streets and investigate crimes are not only physically able to do the job but [also] emotionally and mentally healthy as well.” And acting Deputy Director of BJA Cornelia Sigworth added,
Experts from the field

Brandi Adamchik  
Senior Special Agent  
U.S. Department of the Interior

William Balling  
Chief of Police  
Sidney (OH) Police Department

Robert Bryant  
Chief of Police  
Penobscot Nation Police Department

Valerie Cunningham  
Deputy Chief of Police  
Indianapolis (IN) Metropolitan Police Department

Greg Davis  
Captain  
Texas Department of Public Safety

Dr. Alexander Eastman  
Senior Medical Officer, U.S. Department of Homeland Security  
Lieutenant, Dallas (TX) Police Department

Kiana Farlow  
Law Enforcement Fellow, Office of Community Oriented Policing Services  
Officer, Philadelphia (PA) Police Department

Fred Farris  
Chief of Police  
Goddard (KS) Police Department

Edwin Garrette  
Sergeant  
San Diego (CA) Police Department

Rachel Harley  
Wellness Coordinator  
Rapid City (SD) Police Department

Michael Harper  
Program Supervisor  
Texas Department of Public Safety

Don Hedrick  
Chief of Police  
Rapid City (SD) Police Department

Melissa R. Hyatt  
Chief of Police  
Baltimore County (MD) Police Department

Neely Jennings  
Inspector  
New York State Police Department

David Kennington  
Manager, Professional Wellness Section  
Nashville (TN) Police Department

Dave Kinser  
Research and Development Specialist  
Rapid City (SD) Police Department

Roger Marcoux, Jr.  
Sheriff  
Lamoille County (VT) Sheriff’s Department

Bobby Martin  
Chief of Police  
Snowflake-Taylor (AZ) Police Department

Kathryn Mone  
Chief of Police  
North Hampton (NH) Police Department

Steve Petrilli  
Assistant Chief of Police  
Normal (IL) Police Department

Susan Rockett  
Chief of Police  
Mexico (MO) Police Department

Ron Shaw  
Captain  
Seminole County (FL) Sheriff’s Office

Kevin Shive  
Chaplain  
Golden (CO) Police Department, Federal Bureau of Investigation, and Rocky Mountain Police

Mark Williams  
Chief of Police  
East Longmeadow (MA) Police Department

Subject matter experts

Matt Brown  
Legislative Liaison  
Fraternal Order of Police

Patty Dobbs Hodges  
Senior Vice President  
Institute for Intergovernmental Research

Andy Edmiston  
Director of Governmental Affairs  
National Association of Police Organizations

Kenlee Foskey  
Intern  
National Association of Police Organizations

Continued on page 3
“Despite our best efforts, none of us could foresee the events of the past year and the incredible toll it exacted on law enforcement, the officers, their families, the agencies, and really our entire communities. The worldwide pandemic has strained the limits of public safety with deadly consequences for so many, but overly so for law enforcement. Two-thirds of all line-of-duty deaths in the United States this last year were due to COVID-19, and COVID-19 continues to be the leading cause of death for law enforcement in 2021. So it really has taken a huge toll on this community.”

Law enforcement is well trained in responding to crises and critical incidents by quickly managing and containing the crisis-causing situation. Such events, however, usually affect localized or regional areas, as did the terrorist attacks of September 11, 2001 (New York and Washington, D.C.), Hurricane Katrina (New Orleans), or the annual wildfire season (the western United States). In these types of incidents, agencies can rely on help and assistance from sister agencies in other jurisdictions—reinforcements coming from other federal agencies or from state or local departments who
are not directly affected by the crisis at hand. While critical events are typically focused in time or geographical area, COVID-19 has been “the first global police event...” For the first time in history, police in just about every jurisdiction in the world have been mobilized at the same time due to the same fundamental occurrence” (Sheptycki 2020, 158). The trauma caused by the global pandemic was exacerbated by the civil unrest that spread across the United States. For many in law enforcement, the compounding effects of navigating a pandemic while working to quell civil unrest proved to be particularly stressful. As one meeting participant stated, “Who would have thought we’d have been responding to unrest in the middle of a pandemic? I mean, that’s the law enforcement final exam of your advanced coursework.”

It was abundantly clear in the discussions over the course of the three virtual meetings that for police leadership, the health of their workforce is of utmost concern. Each law enforcement executive in the meetings explicitly identified the health and well-being of their officers as their number one priority. Law enforcement officials were forced to navigate unfamiliar terrain and provide critical leadership and guidance to their officers while adapting to the contours the pandemic would take locally, statewide, nationally, or worldwide. From a workforce health perspective, police officials were concerned about the physical, psychological, and emotional health of their employees. They needed to keep their officers safe and free from COVID-19. At the onset of the pandemic, the major concern for law enforcement agencies was protecting the physical health of their officers and civilian staff. In their day-to-day duties, officers come into contact with a wide range of individuals—they respond to 911 calls, interact with citizens through traffic stops and calls for service, and arrest and transport offenders. This varied contact increases officers’ risk of being infected with COVID. As the pandemic progressed, the widespread civil unrest and subsequent demonstrations—some protesting the death of Mr. Floyd and others protesting lockdowns, stay-at-home orders, and masking requirements—also put officers in harm’s way.

SAFEGUARDING PHYSICAL HEALTH

The declaration of a global pandemic resulted in the promulgation of mitigation measures, including local and state level lockdowns, mask requirements, sanitization protocols, and social distancing recommendations (Mohler et al. 2020; Leal et al. 2021). These mitigation measures focused on curbing the spread of the virus and highlighted the primary concerns of public health officials, government administrators, and anyone in a leadership position who manages essential workers—a designation that includes police executives. Prioritizing health was a key focus for many of the meeting participants because officer health is key to mission completion. As Chief Melissa Hyatt of the Baltimore County (Maryland) Police Department said in talking about her agency’s workforce, “if we can’t keep them as safe and healthy as possible, they’re not going to be able to complete their mission... the biggest piece is if we can’t protect our workforce, we’re not going to be able to keep the public safe.” Of particular importance to the group was maintaining physical health and sending the message to officers that their health was a priority, especially during a pandemic.


As one stated, “the main thing was we wanted our people to understand that if you felt you were exposed, we were going to take care of it. We were going to take care of you, and we were going to take care of your family.” The OSW Group agreed that what was important was “caring for your officers” and “doing the little things that take care of your personnel.”

The rapid spread of COVID-19 is a rare and deadly pandemic event¹ that has triggered a powerful fear of the unknown. Public health experts, epidemiologists, and virologists were limited in their ability to provide a definitive understanding of the virus to government officials, businesses, and the general public. There was a significant need for real-time information and guidance for planning exposure and quarantine procedures, yet many felt this information was lacking. A number of meeting participants expressed frustration at the lack of reliable information available to them, especially early in the pandemic. Law enforcement executives needed to determine how best to keep officers and communities safe with the limited information available.

¹ According to Roychoudhury et al. (2020), viral pandemics in the 2000s prior to COVID-19 included Ebola from 2013–2016, Middle East Respiratory Syndrome Coronavirus in 2012, and H1N1 influenza virus in 2009. Roychoudhury et al. (2020) noted that Ebola had “been one of the largest of its kind in history which resulted in a huge public health menace with large-scale social and economic impact in the affected countries” (9412).
Indianapolis, Indiana, is a city of about a million residents in a midwestern state; demographically, it is generally similar to the United States as a whole (see table 1), and because the city was consolidated with Marion County in 1970, it has a full range of environments from urban downtown neighborhoods, suburban development, and exurban farms and villages. The Indianapolis Metropolitan Police Department (IMPD), with a budgeted strength of 1,743 sworn officers and 205 civilian employees,* is divided into six service districts across about 400 square miles and serves a broad cross-section of residents of different races and ethnicities, cultures, faiths, and socioeconomic means.1 The department tackles everything from homelessness to homicide to homeland security. Service to community, however, remains key for the IMPD and is reflected in its numerous community-focused efforts such as buying gifts for the annual holiday clothe-a-child program, delivering groceries to families in need, offering bicycle safety courses, and conducting virtual book readings with school children.

### Table 1. Population of Indianapolis (Marion County), Indiana, and United States by race

<table>
<thead>
<tr>
<th></th>
<th>Marion County (N)</th>
<th>Marion County (%)</th>
<th>United States (N)</th>
<th>United States (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>566,853</td>
<td>62.75</td>
<td>223,553,265</td>
<td>72.41</td>
</tr>
<tr>
<td>Black or African American</td>
<td>240,975</td>
<td>26.67</td>
<td>38,929,319</td>
<td>12.61</td>
</tr>
<tr>
<td>American Indian / Alaska Native</td>
<td>2,901</td>
<td>0.32</td>
<td>2,932,248</td>
<td>0.95</td>
</tr>
<tr>
<td>Asian</td>
<td>18,314</td>
<td>2.03</td>
<td>14,674,252</td>
<td>4.75</td>
</tr>
<tr>
<td>Native Hawaiian or other Pacific Islander</td>
<td>458</td>
<td>0.05</td>
<td>540,013</td>
<td>0.17</td>
</tr>
<tr>
<td>Some other race</td>
<td>48,435</td>
<td>5.36</td>
<td>19,107,368</td>
<td>6.19</td>
</tr>
<tr>
<td>Hispanic or Latino of any race‡</td>
<td>85,127</td>
<td>9.42</td>
<td>50,740,089</td>
<td>16.43</td>
</tr>
<tr>
<td>Two or more races</td>
<td>25,457</td>
<td>2.82</td>
<td>9,009,073</td>
<td>2.92</td>
</tr>
<tr>
<td>Total</td>
<td>903,393</td>
<td>100</td>
<td>308,745,538</td>
<td>100</td>
</tr>
</tbody>
</table>


What began as a “wouldn’t it be nice” discussion in 2009 became reality when the IMPD signed a lease for a 30,000-square foot warehouse storage space on December 17, 2019. IMPD Deputy Chief Valerie Cunningham modestly describes IMPD’s incredibly innovative logistics warehouse—which was made operational just prior to the declaration of COVID-19 as a global pandemic—as “better to be lucky than good sometimes.”

In 2019, the IMPD placed a priority on standing up a logistics warehouse to allow its logistical support unit adequate space to focus on preparedness, and the IMPD’s chief financial officer was able to negotiate a good lease on a large warehouse space. At the time, the IMPD logistical support unit was planning for support of “no-notice events” as well as the numerous large public events routinely held in the area such as events held at the Indianapolis Motor Speedway and NFL football games.

On March 20, 2020, the IMPD logistical support unit opened its doors and became fully functional, able to both receive and distribute supplies and with a capacity to receive deliveries from vehicles ranging from semi-trailer trucks to box trucks to pickups. The logistical support unit—staffed with one sergeant, four patrol officers, and 25–30 personnel trained for collateral duty—has designed a space that allows for storage of everything from PPE and air-purifying respirator gas mask kits to ATVs and trailers for crime scene support, as well as decontamination of patrol cars. Importantly, the ability to store large quantities of PPE allowed for an orderly and organized distribution to all IMPD personnel, eliminating any concerns about supply. The support unit put together and distributed PPE kits for officers, which provided them an ample supply of masks, gloves, and sanitizer that they kept in their patrol units. Because of the space available in the warehouse, the logistical support unit was able to acquire supplies in quantities that would not have been possible without the storage space. For instance, when individual hand sanitizers were in short supply, IMPD purchased 55-gallon drums of sanitizer that they then repackaged into smaller containers and made available to officers. Absent the storage space in the warehouse, IMPD would not have had the capacity to handle such large drums.


† About 90,000 residents of the city of Indianapolis and Marion County live in about a dozen towns that are included as part of the consolidated city-county government but also retain local governments, in some cases maintaining their own police departments while also relying on the IMPD.
Penobscot Nation, located on an island in the Penobscot river in central Maine, is home to more than 2,000 people of the Penobscot Indian tribe, one of the oldest recognized tribes in the United States. Surrounded by pristine wilderness, Penobscot Nation is a microcosm of the considerable challenges confronting federal, state, and local officials in 2020 and 2021. Chief Robert Bryant, chief of police for the Penobscot Nation, has straddled two law enforcement worlds since he became chief in 2007: the island tribal nation and greater Maine. He understands the challenges small departments face, including staffing, recruitment, coverage, and providing services. He also understands that relationships matter—relationships within the tribal community, relationships among his officers, and relationships with his counterparts in other jurisdictions. COVID-19 significantly impacted all of that.

For Chief Bryant, keeping his officers healthy was a critical concern. As the chief executive of a five-person department (four officers plus himself), Bryant realized that if one of his officers became sick with COVID, he could easily lose another two or three officers to quarantine to COVID protocols*—resulting in only one or two officers to run the department and patrol the entire community. The widespread nature of COVID-19 resulted in many agencies facing significant staffing crises, thus limiting mutual aid availability between jurisdictions. Bryant found that assistance and backup coverage from other agencies in his rural area was not available in the first months of the pandemic because these jurisdictions were facing staffing challenges of their own.

For Chief Bryant, a model of strong interpersonal communication was a natural outgrowth of the community policing standards he brought to the tribal nation. Recognizing that the relationship between the tribal community and law enforcement was historically fraught, Bryant saw the community policing model as the most effective mechanism for building bridges between the tribe and law enforcement. In particular, he found community outreach to be instrumental in both forming and maintaining these relationships. However, because of the COVID-19 pandemic, these tools were no longer available, resulting in frustration on both sides. Members of the tribal community become frustrated at what they saw as “lax” law enforcement resulting from visibly scaled back traffic enforcement, while Bryant and his officers were working more than 75 hours per week on patrol, covering shifts, and operating the border crossing. Within his department, communication was key to maintaining strong staff relationships—a personalization advantage seen in small departments. However, while telephone and text messages were sufficient to convey necessary information, in the department’s sole reliance on them due to COVID-19 protocols led to social isolation and negatively impacted morale.

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For the Penobscot Nation tribal council, safety measures included limiting access to the island community. Two months into the pandemic, the tribal council restricted guests and only allowed island residents and “essential deliveries” to come onto the island. With only one bridge providing access to and from the island, Chief Bryant and his officers became responsible for staffing the border checkpoint, which was operational 24 hours a day, seven days a week—along with patrolling the community and keeping up with their other duties. For a department that fully embraced a community policing model, the animosity caused by staffing the checkpoint was difficult for both the officers and the community. Some officers did not like being “security guards” and “gatekeepers,” and some community members were resistant to having a checkpoint and their identification checked whenever they went on or off the island. After the officers started exhibiting signs of burnout, the tribal council allowed Bryant to hire security guards to staff the checkpoint, freeing the officers to resume their duties.

* Centers for Disease Control (CDC) recommendations at time of this publication are that those who were in close contact with someone who has COVID-19 quarantine depending on their vaccine status and their symptoms. Those who are not fully vaccinated should quarantine for 10 days; those who are vaccinated and show no symptoms should test after 5 days. Before vaccines were available, the CDC recommendation was that everyone exposed to someone with COVID-19 for more than 15 minutes in a 24-hour period from six feet away or less needed to quarantine for 10 to 14 days. CDC (Centers for Disease Control and Prevention), “Quarantine and Isolation,” last modified January 4, 2022, https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html.

† The island borders remained closed until July 2021, at which point the restrictions were lifted.

And—naturally, but frustratingly for many including law enforcement—guidance evolved as the pandemic wore on. As the medical and public health community came to better understand COVID-19—how symptoms progressed, how it was transmitted, and how it evolved—the guidance changed (Fazio 2021).

For those in leadership positions attending the OSW Group meeting, a chief complaint was the lack of consistency in public health guidance they were receiving from local, state, and federal authorities. Many felt that recommendations and guidelines both changed frequently and were not aligned between public health authorities—with local guidance sometimes at odds with state or federal recommendations. Attendees stated things such as “in the beginning the guidance that we were getting was so confusing . . . some of the guidance we were getting was one day you need to do this for quarantine, another day you needed to do that for quarantine” and “We were getting one message from our county health department and that message seemed to change.
daily. So we opted to follow what the state health department’s guidance was and it was a much more common sense approach.” Some attendees also complained that the early guidance was targeted for the health sector and not the law enforcement community, contributing to their frustration and uncertainty. According to one participant, “Law enforcement–specific information was not available in the beginning . . . the challenge there was, there wasn’t enough information for the law enforcement officers that were out there . . . to enforce quarantine and other issues.” The lack of real-time information from public health authorities led some departments to figure out for themselves how to best proceed; as one attendee said, “What we did is reach out to a number of subject matter experts . . . to really share their thoughts about some of the challenges that officers were facing during the pandemic.” The risk of this approach, however, is that departments can unwittingly contribute to the confusion. Brooks and Lopez (2020) report that one outcome of the lack of clear and consistent guidance is that departments adopted an array of different approaches, “sowing confusion for ordinary people, who will encounter significant variance in police practices from town to town, county to county, and state to state” (14).

BJA recognized the gap in reliable information, tools, and resources and worked tirelessly to fill this gap. Since early in the pandemic, BJA has been instrumental in providing much needed resources to the law enforcement community. In particular, it administered the Coronavirus Emergency Supplemental Funding program, which provided $850 million in funding to law enforcement agencies to help offset expenses incurred because of COVID-19 response. This funding has been awarded to more than 1,000 grantees in local and state government, and BJA provided webinars focused on training law enforcement agencies how to apply for grant funding.

Furthermore, BJA developed a law enforcement vaccine toolkit as part of their VALOR officer safety and wellness initiative. This toolkit provides strategies for communicating the importance of vaccines to both the law enforcement workforce and the general public. In addition, through the VALOR program BJA released a number of resources focused on suicide prevention and family supports. In partnership with the National Police Foundation, BJA released a guide about wellness and staying healthy during mass demonstrations and protests. BJA also administers the Public Safety Officers’ Benefits (PSOB) Program and provided support and guidance on how an officer’s death or disability caused by COVID-19 triggers these benefits. Finally, BJA provided a number of supports, including training and technical assistance resources on preparing for re-entry from jails and prisons during the COVID-19 epidemic, finding inmates emergency housing upon release, and delivering instructions on how to use telehealth services for treating opioid use disorder in incarcerated populations.

The COPS Office likewise worked to get timely information and ideas to the field. This was primarily accomplished through the Collaborative Reform Initiative Technical Assistance Center (CRI-TAC), which produced a variety of tools and resources based on the most promising practices identified across the country.

For the executives at the OSW Group meetings, being able to keep their officers physically healthy was critically important. An initial concern was determining the best protection measures to adopt, including with respect to sanitization and personal protective equipment (PPE). Law enforcement
executives also struggled even to obtain adequate protective equipment and sanitation supplies, especially in the early days of the pandemic. A number of attendees expressed frustration about how difficult it was to get necessary supplies while the law enforcement community was tasked with providing services, maintaining order, and in some areas enforcing stay-at-home directives. According to one participant, “At the onset we were kind of begging, borrowing, and stealing N95 masks and were really trying to get up to speed with what that proper PPE looked like, because it seemed like on a daily basis, that stuff was changing.” One attendee noted, “None of us were really prepared for this, but there were concerns that officers were not getting the PPE necessary to keep them safe,” while another added, “PPE was another huge issue for us. We just simply were not prepared in the PPE realm; neither [were] our local emergency management folks.” Another attendee said, “I can say that at the beginning of the pandemic, and the larger departments surprisingly, there were concerns that they did not have sufficient PPE . . . there was not enough being done to ensure that you got more than a handy wipe of antiseptic or a sanitizing wipe and just a plain old medical mask.”

The difficulty in obtaining needed protection for officers was not unique to the meeting participants; Brooks and Lopez (2020) reported early in the pandemic that almost half of police departments nationwide did not have a sufficient amount of gloves, disinfectant wipes, and masks. While access to PPE was critically important for the departments, it was equally important that leadership communicate to officers that they would have what they needed. As one chief stated, “Our police officers realized that we had an abundance of PPE and a lot of neighboring jurisdictions didn’t . . . we were lucky.”

Many law enforcement agencies saw their workforces working longer hours than they had done before the pandemic and taking on more responsibilities. Departments had to adapt to the changing guidance while still providing services and staying mission-ready. For the attendees, flexibility was key. Stephen Petrilli, assistant chief of police in Normal, Illinois, characterized his department’s response as “a very, very fluid approach to operations; we focused on officer safety and trying to put them at the best vantage point to make the best decision given the situation, to really ensure their health, wellness, and safety.” Command staff had to assess need, leverage all available supports, and be strategic in use of resources. Instituting more flexibility was seen as a means of adapting to pandemic conditions, setting priorities, and “telling your workforce that you care about them.”

The International Association of Chiefs of Police (IACP) and the Center for Evidence-Based Crime Policy at George Mason University conducted a two-part study on how COVID-19 was impacting law enforcement, finding that the pandemic had “substantially changed” standard operating procedures (SOP) for the majority of the nearly 1,000 agencies surveyed (Lum et al. 2020a, 1). In particular, 91 percent of the agencies surveyed had made changes to calls for service, 43 percent had significantly changed their response to calls, 72 percent were using technology to respond to calls and take reports, and 57 percent had seen a significant decline in calls for service (Lum et al. 2020a). Among the OSW Group meeting attendees, departments made changes to their operational staffing plans and SOPs “for when we don’t take certain priority calls.” In effect, call responses
were streamlined whenever possible, using online and telephone response for “low priority” calls. Additional changes to SOPs included limiting “ambulance assist” and medical calls by responding only to those considered life threatening and having officers remain outside on calls unless they were specifically asked by the fire department or other first responders to “come in on non–life threatening calls.” The main advantage of changing response to calls, staying outside, and “pushing to telephone and online” was that it “staved off a little bit of exposure for our people . . . but we’re going to houses all day long and we don’t want to bring [the virus] to people either.” Departments changed their protocols both to protect their workforce and to protect the community they serve.

Although agencies were streamlining operations and changing their operating procedures by automating whenever possible and limiting contact with the general public, Lum et al. (2020a) report that 39 percent of the agencies they surveyed reported increasing their presence in public spaces where the general public was congregating, such as grocery stores and hospitals. Law enforcement agencies found themselves in the position of being part of the pandemic response because in many areas they become responsible for enforcing mitigation measures while also having to maintain their regular policing duties (Laufs and Waseem 2020). As such, some in law enforcement found their duties shifting as they moved from their usual wide-ranging policing duties to a tighter focus on maintaining public order and enforcing public health measures (Edwards and Kotera 2020). Some in the OSW Group reported that in jurisdictions where businesses were closed because of the shut-down response to the pandemic, their departments made sure to put extra patrols in business areas and they received a “significant benefit” and “a lot of support” from their communities as a result.

With the changes to SOPs—the emphasis on being more efficient in handling calls by instituting telephone and online reporting systems, allowing calls that previously would have been conducted in person to now be handled through technology—attendees reported some net positives but wondered about the negative impacts of not “policing in person.” In reporting on the ways using technology was positive, participants like that it “increased our efficiency” and “made it easier for people to file a report.” Some wondered if the cost of this efficiency was that the information collected was not as thorough because “you can generally get better information in most situations from most people when face to face versus over the phone.” Many agreed with the assessment of one chief who said, “So many things were definitely for the worst, but then there were a few things for the better.” But some wondered if these changes to SOPs and reporting mechanisms negatively impacted the most vulnerable populations. In particular, departments that had been active in doing presentations at senior centers and in schools were no longer doing so. Chief Kathryn Mone of the North Hampton (New Hampshire) Police Department reported a “huge influx of scams and elderly losing money” and wondered if their department had “lost those opportunities to build the relationships and that trust with both groups.”

In the face of all these challenges, many agencies were still having to figure out how to recruit officers to replace officers who retired or otherwise left their departments. Recruitment is difficult in the best of circumstances and was made more difficult during the twin crises of a pandemic and
nationwide civil unrest. Meeting participants felt they were working harder and seeing “drastically reduced” application rates for a career in law enforcement. According to one, “I think less people are now interested in going into the career.” Chief Robert Bryant of the Penobscot Nation in Maine discovered that the politically charged issue of COVID-19 vaccine mandates can also complicate recruitment efforts. After the Penobscot tribal council instituted requirements that personnel either get vaccinated or be tested weekly, three of the five police officers in the tribal police department chose to quit rather than be vaccinated against COVID-19. Bryant has been able to recruit one officer since then but has found that some potential recruits cannot be hired because of their own hesitancy to get vaccinated. Vaccine refusal is an issue facing many other departments as well. Numerous news stories throughout 2021 (Hassan 2021; Stanley-Becker 2021; Bates 2021; Nickeas and Krishnakumar 2021; Calvan and Seewer 2021; Smith 2021) have reported on the lagging rates of vaccination for law enforcement officers in communities across the country, high-profile efforts have been launched by police unions in some cities to block vaccine mandates for their members, and some law enforcement executives have also spoken out to reject vaccine mandates, believing they would lead to an unmanageable level of vacancies.

PRIORITIZING MENTAL HEALTH AND WELL-BEING

While the initial demand on law enforcement agencies was securing adequate supplies of protective equipment and making any necessary changes to SOPs, the next concern was the toll to officers as a result of being on the front lines of both the pandemic and civil unrest. The stressors of 2020 and the beginning of 2021 laid bare a number of challenges facing law enforcement agencies, including enacting adequate safety measures, gaps in wellness programming, and the limited mental health resources available to officers. The strain of being first responders during a worldwide health emergency was exacerbated in some jurisdictions by officers’ being asked to work longer hours while also taking on multiple assignments and additional responsibilities. For law enforcement agencies, the workforce is largely composed of essential workers requiring both community engagement and prolonged contact between officers and suspects. As one attendee noted, reflecting the viewpoint of many law enforcement officers, “We already had a really stressful job and a lot of places closed their doors during COVID, but we were the only ones on the street.”

A number of meeting participants also expressed the feeling that lack of support from city or county leadership was an issue. As one said, “One of the biggest issues with law enforcement is how we’re asked to do everything, but we don’t have the support at the level we need it.” Another said, “Our city made some decisions through the course of everything that was going on, both with COVID and social unrest, that did not help our police department feel more supported. It actually made them feel less supported.” Support is critical because researchers have pointed to the potential negative psychological impacts this pandemic could have on officers, including an increased risk of isolation from family members (Milliard and Papazoglou 2020), substance abuse (Laufs and Waseem 2020), post-traumatic stress disorder (PTSD) (Drew and Martin 2020), and death by suicide (Carlson-Johnson, Grant, and Lavery 2020).
Many departments had to cope with chronic staffing shortages resulting from staff quarantining for at least 10 days if they were exposed to the virus—and often longer periods of isolation if they were infected. Police executives reported that many officers needed to work longer hours as a response to such shortages. But research indicates that long working hours at the expense of spending time with family and friends is a primary driver of officer stress (Edwards et al. 2021). So law enforcement executives were concerned about their officers’ mental health, recognizing the strain the dual crises of pandemic and social upheaval could cause in creating or exacerbating anxiety, depression, and PTSD. Furthermore, researchers have identified risk of COVID-19 infection as another key stressor (Edwards and Kotera 2021; Frenkel et al. 2020), and the medical community has recognized that some infected individuals get much sicker than others but they do not have ready answers as to why (Khamsi 2021). The uneven trajectory of COVID-19 infections can exacerbate the apprehensions of officers who witness two people in the same household having vastly different reactions to an infection, with one barely noticing any symptoms and the other winding up in the hospital or worse. Police leadership recognized the need to be attuned to the cumulative impact of COVID-19 and additional stressors on the psychological health of their employees. Meeting participants were keenly aware of the pressures on their departments; as one opined, “We’re the only ones that can’t drop the ball.” Policing scholars have also recognized this pressure and argue that police departments, being operational 24/7, have a mission to protect life and an “impossibly vague mandate that encompasses every imaginable human problem” (White and Fradella 2020, 712).

While some participants described the pressure of attending to their duties while focusing on the physical health of their officers as particularly stressful, others noted that it was the civil unrest that was the most stress-inducing. Meeting attendees reported that officers with more experience were particularly rattled by the intensity and depth of the social strife affecting their cities and towns. One chief, describing a particularly stressful protest, said, “It was a very hot day where officers were getting yelled at for many, many hours and just acknowledging the psychological issue that can cause and the negative morale that can cause. So after that event occurred . . . one thing that was helpful for us is to just take a step back and try to debrief some of that event with our officers. . . . [W]e had an officer of 20 years . . . talk about how he had never been called so many names before all at one time, and if you think . . . that got to him, what did it do to the two- and three-year officers that were out there on that same day?” Another chief reported that it was the “more tenured officers” who struggled after spending time on the front lines of the unrest because they had never been subjected to “just absolutely violent acts;” during protests in previous years, “there had been kind of a mutual understanding where it never gets violent.”

Physical and psychological health are inextricably linked (Van Hasselt et al. 2020; Gershon, Lin, and Li 2009), yet policing’s “warrior culture” often prevents many in law enforcement from either acknowledging or expressing emotional and psychological traumas (Fleischmann et. al. 2018). For departments dealing with crises that profoundly impact their operations, the OSW Group recognized that mental health services were going to be critical for the workforce. These services, which were expanded as the pandemic dragged on and the civil unrest became increasingly confrontational,
included routine debriefings, counseling, and peer support programs. Some policing scholars argue that robust peer support programs embedded in the culture of the department are the key for agencies to change the stigma of mental health care (Cohen et. al 2019). Meeting participants felt that both peer support and mandatory check-ins were critical. One police executive said, “I’m a big fan of the mandatory mental health checkups. . . . I think just the sheer tax that cops around the country have been put under for the past year and a half, that was an outlet for them.” Cohen et al. (2019) hold that police leadership drives the culture of a department and thus their embrace of mental health awareness and that putting measures in place to address mental health issues is key to creating a cultural shift towards acceptance of psychological interventions. And the meeting participants recognized that the key to building resiliency was managing stress. According to police psychologist Dr. Mark Kirschner, “the biggest key to stress management is not having the thing stress you out to begin with. So if we can do things ahead of time through nutrition, sleep, and all those other things, in terms of preparation, we’re better able and equipped to deal with the stressors.”

A number of meeting attendees pointed to an expansion of mental health supports in response to the twin crises facing their departments. Smaller departments, however, relied on different types of strategies than the larger departments. The bigger, more urban departments generally had fully staffed wellness units built into the command structure of the department; they also had more access to therapists and counselors. While the smaller departments did not have those same benefits, they relied instead on regional peer support services, video or virtual therapy and counseling sessions, and having their executives take the lead in conducting wellness checks. As one attendee said, “Our chief decided to give every individual in the department a one-on-one. And they met, and some of them met for 15 [or] 20 minutes and some of them met for two hours . . . and so he let people just voice their concerns, their frustrations and opinions without consequence.” Both large and small departments formed relationships with chaplains or made use of chaplains already on staff as an additional means for their officers to receive counseling support. Attendees reported that department chaplains became more integrated into the wellness teams, a phenomenon also noted by research published by the Police Executive Research Forum (PERF) in January 2021 (PERF 2021). Departments reported relying extensively on their chaplains, and those chaplains were spending more time “just walking around the building and just being there.” As one attendee from a larger department said, “Part of the power of the chaplaincy program is what they represent. People see that, they respect that, and they believe in that.” An added benefit, they noted, is that many of the chaplains are volunteers who also are pastors for a congregation, so that allowed them “to move in ways that most others weren’t in the department and in the community.”

While policing scholars generally find that many in law enforcement are resistant to seeking help for their mental health (Cohen et al. 2019), the crises faced by many departments in 2020 and 2021 pushed many officers to seeking help. Some meeting participants reported that demand for their mental health services were “through the roof.” It may be that the stress of the pandemic heightened the stress created by widespread protests and unrest or vice versa. Clearly, many in law enforcement were navigating new terrain, often beyond their control.
Drew and Martin (2020) argue that the best lens for understanding the impact of COVID-19 is thinking of it as an experienced trauma. They argue that officers experience a direct threat to their personal safety by the potential to be exposed to the virus in their day-to-day duties as well as through the potential for “the weaponization of COVID-19” in the form of arrestees spitting on officers (Drew and Martin 2020, 33). Furthermore, as a result of this experienced trauma, officers have a heightened risk of poor mental health outcomes, including PTSD, anxiety, and depression (Drew and Martin 2020). The OSW Group recognized the trauma afflicting their officers as a result of the events of 2020 and 2021, particularly for the officers who were on the front lines of the civil protests. According to one chief, “We, like many other major cities, had our downtown tore up and violent actions. And we had a homicide in the midst of the civil disturbance. Our officers were attacked and had bricks, rocks, and pellets thrown [at them].” Meeting participants acknowledged the psychological and emotional impact of these events. They reported that “many” of their officers “feared that they weren’t going to be able to go home,” they “felt for their own safety,” “shots being fired at the officers,” and “individual officers and their family members were being targeted.”

An additional stressor for law enforcement was that their heightened risk of contracting COVID-19 also presented an increased risk that they would infect their family members. The OSW Group reported that officers had profound concerns about keeping their families healthy, a finding supported by the limited number of policing studies conducted thus far on the impact of this pandemic on policing. Drew and Martin (2020) state that not only are officers fearful of infecting their families, but their job “is directly impacting the health and safety of family members to an extent that is atypical” (33). Having a high-stress job, navigating a pandemic as a first responder, and carrying the worrisome burden of possibly bringing home a deadly disease to loved ones causes those in law enforcement to experience multidimensional stress (Edwards and Kotera 2020). Policing is already a high-stress occupation; policing through a pandemic and widespread civil unrest pushes that stress to new levels.

For police executives, having officers overworked and overtaxed is a significant concern. There is a sizeable body of literature that explores the relationship between occupational and personal stress, burnout, and negative coping strategies (Can and Hendy 2014; Griffin and Sun 2018; Oliver and Meier 2009; McCarty et al. 2019). This research shows that high levels of stress can lead to burnout (Griffin and Sun 2018; McCarty et al. 2019) and cause officers to use maladaptive coping techniques such as alcohol abuse (Chopko, Palmieri, and Adams 2013; Violanti et al. 2011) and engage in unhealthy behaviors including repressing anger or eating high-fat and high-sugar foods (Can and Hendy 2014). For the OSW Group, burnout—defined by participants as “not wanting to come in and perform your best, due to the stressors of the job or the environment around the job”—was a primary concern. Burnout was seen as a very real outcome to the unceasing physical, emotional, and psychological pressures of 2020 and 2021. Another attendee stated, “I can tell you from incidents that are popping up now within our workforce, they’re wounded, they’re vulnerable . . . they’re overworked and depleted right now.” Burnout was also being experienced by those
in attendance at the virtual meetings in July. When attendees were polled on whether they have experienced burnout during the previous 18 months, 16 out of 19 respondents reported yes and only three said no.

The participants’ concern about burnout is substantiated by policing research. According to Adams and Mastracci (2018), law enforcement has a higher level of burnout than other occupations because of the unique subculture in policing and the emotional exhaustion of the work. Research psychologists report that pathways to burnout are increased exhaustion resulting from physical workload, time pressures, recipient contact, and shift work, as well as increased disengagement when job resources are lacking (Demerouti et al. 2001). In a study of 13,000 sworn officers from 89 agencies, McCarty et al. (2019) found that a heavy workload leads to both emotional exhaustion and depersonalization, fueling burnout. For the meeting attendees, helping officers ease burnout is the job of the leadership team. As Chief William Balling of the Sidney (Ohio) Police Department stated, “When I start seeing burnout... they’re performing at a lower ability. They’re not maximizing their potential and they want to be away from the department. And that’s our job as administrators and leaders to change that.”

The meeting participants recognized the constant pressures departments have been under during the pandemic. One said, “Law enforcement is already the most complex case study in human management... you’re balancing customer service with burnout and tackling an already taxed system.” The emotional cost of providing customer service to those in need is known as compassion fatigue (Papazoglou and Tuttle 2018). Compassion fatigue is a concern in professions where nurturing is an expected aspect of the job or there is a regular exposure to trauma (Carlson-Johnson et al. 2020); law enforcement often involves both. Researchers refer to the antithesis of compassion fatigue as compassion satisfaction, which is defined as the emotional well-being one experiences after helping others (Carlson-Johnson et al. 2020). The participants described ways they foster compassion satisfaction in their officers who are at risk of burnout. According to one chief, “To avoid burnout the officers rotate through community events—from citizen academies to juvenile academies to church programs. When I start seeing officers being burned out, the more you can get them in the community and they feel appreciated by your community members, they realize it is not just working with people with problems, not just responding to bad calls.” Other suggestions for promoting satisfaction and alleviating burnout included the following:

- Consistent messaging from leadership about the importance of wellness
- Creating opportunities for officers to be heard about their concerns
- Letting staff on their lunch hour eat lunch and not attend meetings
- Promoting complete separation for those who are on leave so than can be totally disconnected from the workplace.
These techniques will likely foster compassion satisfaction and increase perceived organization support for the officers, which, according to policing scholars, is crucial for reducing burnout (Adams and Mastracci 2019; Carlson-Johnson et al. 2020). These specific solutions have the added benefit of being tailored to the specific demands of police work, which Demerouti et al. (2001) argue is the way to prevent or reduce burnout.

Burnout is the result of occupational stressors; resilience focuses on coping and recovering from stressful events and trauma. The COPS Office—examining resilience in law enforcement and the mechanisms by which departments can promote healthy, resilient officers—reports that the “building blocks of resilience” are tactical trauma care, cardiac screening, fitness standards, addressing overweight and obese officers, and emotional or mental health (Spence 2017, 26). Integral to developing resilient officers is creating resilient agencies. Resilient agencies are those that recognize the challenging nature of police work, including its trauma-inducing aspects and puts mechanisms in place to protect the workforce (Spence 2017). Hill and Giles (2019) contend that police management should create a culture of collective resilience whereby the physical and psychological well-being of officers is central to the functioning of the department.

For the OSW Group, fostering resilience was important. For them, resilience is tied to promoting the overall health and well-being of their workforce, and as a consequence, beneficial to both the department and the community at large. Statements such as “I think we really need to take care of our officers holistically” and “whether we’re talking about COVID or police recruitment or civil unrest . . . it’s [about] taking care of your people . . . providing mental health, and physical health, financial, nutrition . . . you have a healthier department, have healthy relationships with your community” were reflective of the thinking of the group.

While fostering resilience, especially organizational resilience, is decidedly important, the consequences of an extended period of stressor events on the scale of this pandemic have not yet been observed in modern policing. So, in effect, the impact of this pandemic and the civil unrest will provide a living laboratory for researchers trying to understand the long-term impact of such stressors on the health and well-being of officers. Research has long shown that officers are at risk for employing negative coping strategies to deal with stressors (Stogner et al. 2020); what remains to be seen is how this collective stressor impacts officers over the long haul. Policing scholars will be studying the pandemic’s impacts on agency culture, officer characteristics, and officers’ physical and mental health. It is also highly likely that there will be disparate impacts on different groups of officers—women reacting differently than men, newer officers reacting differently from more seasoned officers, those with families differently than those without—but little is yet known about these differences (Laufs and Waseem 2020).
COVID-19, as well as mass protests and demonstrations, led to a widespread disruption to society affecting major cities, suburban areas, and rural communities alike. The effect of this disruption on police agencies was that law enforcement personnel faced extraordinary stressors, resulting in considerable concern about their physical, emotional, and psychological well-being. As a result of these compounding stressors, many agencies faced the additional challenge of being able to recognize, cope with, and adequately treat workforce burnout while also maintaining active recruitment efforts to fill open positions as officers departed. Many agencies found themselves on the front lines in quelling civil unrest and navigating a pandemic resulting in a patchwork of stay-at-home orders, while aiming to keep both their workforce and their communities safe. Chief Fred Farris of the Gladstone (Missouri) Police Department summed up these stressors, saying, “I think there probably isn’t a cop or deputy in this country that didn’t feel the stress of what was going on. . . . Something’s terribly wrong and you really need to start figuring out what you need to do.”

As an answer to the stress and uncertainty facing law enforcement agencies, departments developed a range of strategies for coping with and responding to the pandemic. Some of the departments created COVID-19 response teams whereby their medical assistance team and wellness units staffed a call center set up specifically to answer questions from within the department about exposures or potential exposures. Developing mechanisms for tracking and following up with any personnel exposed or infected with COVID-19 was seen as critical. A number of departments created internal COVID-19 exposure forms and COVID-19 databases for tracking any officers exposed in the performance of their duties. This tracking allowed the command staff to both monitor their case rates and communicate with the exposed personnel: “The science, here’s what we know. Here’s what happened to you. Here’s what we think your risk level is.”

An additional concern, especially for smaller departments that had small workforces to begin with, was the potential loss of personnel who would need to quarantine after exposure. These agencies needed to ensure adequate coverage in mission critical positions, so they instituted cross-training for key positions, such as dispatch, as well as regional mutual aid agreements to ensure coverage. A number of the smaller agencies described instances where they covered for other jurisdictions and vice versa. One attendee described how a neighboring department “lost their entire tactical team, [so] we stepped in for a two-week period to cover their tactical responses for them.” For these departments, the staffing challenges brought on by the pandemic exposed potential staffing shortfalls, leading some to conclude, as one chief said, “I think this is a call to formalize some of these things” and not rely on “another chief that knows somebody that can come out and provide support.” While smaller agencies were able to leverage their relationships and networks, larger agencies had to be more inventive in communicating throughout their departments. As one chief said, talking about communication, “I think it’s definitely a challenge in some of the larger agencies because it’s not that easy to have those personal touch points with people. . . . I try to have that communication and try to make people feel like we’re reaching out to them. I will tell you, there’s
some times that it feels like it’s very successful, and there’s other times, just frankly, it doesn’t.” Others found that hosting impromptu events, such as handing out ice cream or hosting a cookout at roll call, allowed the command staff to engage in “casual, low-pressure” contacts with their officers and to communicate that “we care about you.”

A widely used strategy embraced by the entire group was focusing on multidirectional communication. Many felt that “communication was key” and had to “be intentional and not haphazard.” They believed that communication needed to be top-down, with the chief executive “modeling the messaging . . . showing your workforce . . . that you care about their physical [and] mental well-being.” They believed that communication also needed to be bottom-up, through officers letting command staff know about possible exposures and talking through stressors in debriefs. Finally, communication needed to be inside-out, whereby spouses and family members were included in the “communication loop” because families are “watching the news, they know what’s happening.” Family members are tracking COVID-19 rates and they know what is happening on the streets, so officers can no longer come home and tell their spouse everything was “fine” when asked. The most common mechanism mentioned by attendees was communicating with family members through newsletters, while some mentioned using different smartphone applications that allowed for push notifications to be sent from the department to anyone who signed up—staff, spouses, and even children.

The OSW Group argued that it is incumbent on leadership to create a culture of wellness and that the responsibility to keep the workforce healthy is the duty of the entire department. Many agreed that “the mental health and well-being of our workforce is actually the responsibility of every leader and every person. And we should do it and work toward it every day and not basically pass it off to just the mental health workforce.” Policing scholars believe that creating a culture of wellness within departments is critical for building officer resilience (Cohen et al. 2019; Carlson-Johnson et al. 2020). According to Cohen et al. (2019), police officers are routinely exposed to high levels of stress, resulting in negative impacts on both their physical and psychological health. Thus, they argue, it is incumbent upon police organizations to change police culture by developing and implementing a “wellness vision and mandate” that enhances resiliency through targeted mental and physical health wellness interventions (Cohen et al. 2019, 224).

The meeting participants, while not characterizing their efforts expressly as a wellness directive, put into practice a number of wellness interventions. The purpose of these interventions is to target officers’ physical and mental health and to provide additional support in all areas of wellness. The interventions include the following:

- **Targeting physical health**
  - Ensuring staff have adequate PPE
  - Having a system for providing PPE so that everyone knows they will get exactly what they need
• Taking measures to reduce exposure to COVID-19, such as changing SOPs for low priority calls
• Targeting mental health
• Increasing access to mental health programming through increasing the number of therapists and “first responder–specific counselors” available either in person or virtually
• Using department chaplains to supplement wellness programming
• Increasing the number of group and individual debriefings
• Instituting wellness checks with command staff, counselors, and chaplains, both formally and informally “just to touch base”
• Requiring annual wellness checks that are “not counseling, it’s not therapy, it’s not a psychological fitness for duty, but it’s a chance for us to sit down with those men and women and just check in with them”
• Providing tablets or other internet-enabled devices so officers can have virtual therapy sessions in private at a time of their choosing

Providing other support

• Building out family programs, such as monthly meetings with spouses and partners to “just sit down and talk and process”
• Providing temporary housing for officers either exposed to COVID-19 or concerned about exposing friends and family

Many agreed that by creating a culture of health within the department, wellness programming would be systematized and not simply a response to crisis. Some have found that emphasizing trauma-informed training on crisis intervention “builds awareness around trauma because if you never understand trauma in somebody else, or yourself personally, you're never going to . . . have situational awareness.” Placing an emphasis on trauma-informed officers leads to a positive feedback loop with peer support teams by increasing acceptance of peer support and also receptiveness to crisis intervention training.

While no attendees would argue that being on the front lines of a global pandemic while simultaneously coping with nationwide unrest was a positive thing, several did point to a “silver lining.” These twin crises forced a number of agencies to openly embrace the wellness programming, overcome resistance to mental health supports and reduce the stigma for such, and embrace more innovative ways of delivering training and information delivery. As one service provider said, “Finding that sweet spot of building effective training and delivering effective messages in the online or virtual world . . . gave us all a chance to test some new ways of doing that . . . . We found some pretty good success in doing both asynchronous self-paced work combined with virtual live delivery.”
Conclusion

The years 2020 and 2021 were difficult for everyone, including law enforcement. Law enforcement agencies responded to the demands asked of them while recognizing their role in keeping their workforces and communities safe. Agencies pushed for physical supports, such as adequate amounts of PPE and changes to SOPs, and embraced much-needed psychological interventions, including more debriefings, counseling, and chaplain support. Key to navigating the twin crises of the global COVID-19 pandemic and widespread civil unrest in the United States was realizing that multidirectional communication is critically important, as is developing and maintaining relationships with other law enforcement agencies in neighboring jurisdictions. Many recognized that these crises gave them an “opportunity to build out relationships,” and they saw the focus on physical well-being and psychological health as a net positive. For the OSW Group, health and well-being mattered. As a result of the OSWG meetings, Chief Kathryn Mone of the North Hampton (New Hampshire) Police Department made some key changes. In particular, Chief Mone

- connected with one of the attendees she met at the meeting—a chief from another small agency in a different state—to understand the programs that agency has in place for officer wellness, receiving sample policies and additional information that she says “will make it so much easier for me to establish these programs for my department;”

- is looking to incentivize mental and physical health check-ins, which her officers have expressed an interest in, and which the OSWG meeting and connections made provided a better understanding of how to accomplish;

- conducted an anonymous survey of the North Hampton police force about their perception of the benefits of having an accessible chaplain resource, about wellness checks, and to evaluate their level of burnout;

- contracted with a local psychologist for annual wellness check-ins of the officers;

- recognized how a chaplain can be a vital resource in supporting officer wellness, invited a prospective chaplain to a department wide meeting, and met with him to discuss officer wellness issues;

- learned about the 30x30 initiative² (which is focused on recruiting female police officers), shared the initiative’s recommendations with the newly formed New Hampshire Women in Law Enforcement group, and shared this information with a local police chief who is currently recruiting to fill vacancies.

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² The 30x30 initiative comprises a coalition of police executives, policing scholars, and professional organizations that aims to have 30 percent of police recruits be women by 2030. See https://30x30initiative.org for more information.
It is vital that departments develop or enhance their mechanisms of organizational support for officers and be cognizant of the potential impacts on the physical and psychological well-being of their personnel. By doing so, departments can help decrease the likelihood of burnout, thereby decreasing job turnover or, worse, police suicide. Meeting attendees were cognizant that preparation is vitally important and that it is likely there will be similar public health events in the future. As one participant said, “If we continue to go through this type thing in the future, everybody certainly will be more prepared based on the experiences they had.” Many felt that departments need to make wellness a central focus and to embrace health holistically. For the OSW Group, law enforcement is composed of essential workers who worked long hours in challenging conditions because it is a profession committed to service. As Chief Mark Williams of the East Longmeadow (Massachusetts) Police Department noted, “Police work is one of the very few jobs in the world where you get to have a starring role in people’s life moments . . . there’s not many jobs out there that offer that opportunity.”
References


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- Build relationships in the field.
- Provide training and technical assistance in support of efforts to prevent crime, drug abuse, and violence at the national, state, and local levels.
- Develop collaborations and partnerships.
- Promote capacity building through planning.
- Streamline the administration of grants.
- Increase training and technical assistance.
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The Office of Community Oriented Policing Services (COPS Office) is the component of the U.S. Department of Justice responsible for advancing the practice of community policing by the nation's state, local, territorial, and tribal law enforcement agencies through information and grant resources.

Community policing begins with a commitment to building trust and mutual respect between police and communities. It supports public safety by encouraging all stakeholders to work together to address our nation's crime challenges. When police and communities collaborate, they more effectively address underlying issues, change negative behavioral patterns, and allocate resources.

Rather than simply responding to crime, community policing focuses on preventing it through strategic problem-solving approaches based on collaboration. The COPS Office awards grants to hire community policing officers and support the development and testing of innovative policing strategies. COPS Office funding also provides training and technical assistance to community members and local government leaders, as well as all levels of law enforcement.

Since 1994, the COPS Office has invested more than $14 billion to add community policing officers to the nation's streets, enhance crime fighting technology, support crime prevention initiatives, and provide training and technical assistance to help advance community policing. Other achievements include the following:

- To date, the COPS Office has funded the hiring of approximately 130,000 additional officers by more than 13,000 of the nation's 18,000 law enforcement agencies in both small and large jurisdictions.
- Nearly 700,000 law enforcement personnel, community members, and government leaders have been trained through COPS Office–funded training organizations and the COPS Training Portal.
- Almost 500 agencies have received customized advice and peer-led technical assistance through the COPS Office Collaborative Reform Initiative Technical Assistance Center.
- To date, the COPS Office has distributed more than eight million topic-specific publications, training curricula, white papers, and resource CDs and flash drives.
- The COPS Office also sponsors conferences, roundtables, and other forums focused on issues critical to law enforcement.

COPS Office information resources, covering a wide range of community policing topics such as school and campus safety, violent crime, and officer safety and wellness, can be downloaded via the COPS Office's home page, https://cops.usdoj.gov.
In July 2021, the OSW Group convened virtually to discuss law enforcement safety and wellness challenges during the global COVID-19 pandemic and the nationwide civil unrest of the summer of 2020. The meetings focused on functioning with limited resources, dealing simultaneously with multiple critical events, and lessons learned with respect to mitigating future crises.