Law Enforcement and Trauma

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THANK YOU!
Trauma Assessment
What is Trauma?

PTSD

flashbacks

fear

 PTS D
A Traumatic Experience

• Threatens a person’s life, or the life of someone important to that person.

• Causes an overwhelming sense of terror, hopelessness and horror.

• Produces intense physical effects such as pounding heart, rapid breathing, trembling, dizziness, or loss of bladder or bowel control.
Types of Trauma

- Acute
- Chronic
- Complex
- Neglect (mostly in Children and older adults)
Trauma Responses: Hyperarousal

- Nervousness
- Jumpiness
- Quick to Startle
Trauma Response: Re-experiencing

• Intrusive images, sensations, dreams
• Intrusive memories of the event or events
Trauma Response: Avoidance/Withdrawal

- Feeling numb, shut down, or separated from normal life
- Pulling away from activities and relationships
- Avoiding things that prompt memories of the trauma
Disassociation
Trauma Response: Reminders/Triggers

• Things, events, situations, places, sensations and even people that seem connected to traumatic event.
Posttraumatic Stress Disorder

• A person displays several of these stress reactions
• Displays them for a long period of time
• The reactions get in the way of having a normal life
The Three-Parted Brain

Lizard Brain
(Brain stem and cerebellum)
Autopilot
Fight & Flight

Mammal Brain
(Limbic System)
Emotions
Memories
Habits
Attachments

Human Brain
(Neo-Cortex)
Language, abstract thought, imagination, consciousness, reasoning, rationalising

(From Paul D. MacLean's model of the "Triune Brain")
Things you may see:

• Problems concentrating, learning or taking in new information
• Difficulty going to sleep or staying asleep, nightmares
• Emotional instability; moody, sad, or angry and aggressive, etc.
Trauma and Physical Health

Inflammation Response:
• Chronic Pain
• Cardiovascular
• Autoimmune
• Musculoskeletal
• Digestive
• Respiratory Disorders
Resilience

• Is the key to recovery
• Is found in relationships
• Can be taught
  • You are Safe
  • Capable
  • Lovable
Building Resilience

In daily life:
• Sense of Control
• Reassurance of safety
• Affirming Safety
• Routine
• Rely on each other
• Talk about it

Calming the Nervous system:
• Mindfulness
• Grounding
• Yoga/ Movement
• Meditation
When to come see us...

(Because of the symptoms)

- Decreased work performance
- Conflicted relationships
- Health Concerns due to lack of sleep
- Increased alcohol consumption/Substance use
What to Ask for when you get to us:

Some well-known trauma-specific interventions:

• Risking Connection
• Sanctuary Model
• Seeking Safety
• Trauma, Addictions, Mental Health, and Recovery (TAMAR) Model
• Trauma Recovery and Empowerment Model (TREM and M-TREM)
• Eye Movement Desensitization and Reprocessing
What if I already had Trauma before this job?

• ACE’s
What if you are a spouse and you have your own trauma?
Critical Incident Debrief
Privacy

• HIPPA – Treated as an adult, could be requested if requested by law enforcement to attend treatment. They have to have a ROI (permission from you).

• Being proactive is the best

• Could choose to not bill insurance if wanted, cash pay only.

• Firewall

• https://www.apa.org/about/offices/ogc/amicus/jaffee

Police Officers are at the forefront of any significant disaster or public incident. Charged with protecting the safety of the population and themselves. By the nature of the work Police Officers perform they are at an increased risk of being exposed to traumatic situations. This constitutes a great risk for the behavioral welfare of the first responders. They are at risk for stress, depression, PTSD, substance abuse and suicidal ideation.

Solution?

- Studies indicate that professional mental health service was reported as helpful in the immediate phase following a traumatic event.
- Providing mental health, promoting therapy and debriefing after stressful situations is recommended by SAMHSA for all first responders.
Corey
Panel Questions