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# LAW ENFORCEMENT DISTRESS SYNDROME

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*An Analytical Study on the Mental Health of Police Officers*

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# CONTENTS



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## INTRODUCTION 03

04 ABSTRACT

05 STUDY DESIGN

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## RESULTS 06

06 DEMOGRAPHICS

08 HYPERVIGILANCE

10 REVENGE/VENGEANCE  
PARANOIA

12 DISTRUST OF OTHERS  
& MOTIVATIONS

14 ANTI-SOCIAL BEHAVIOR

16 CHRONIC FEAR CAUSED  
BY FATALISTIC THINKING

18 ADRENALINE ADDICTION

20 DEPRESSION / SUICIDAL  
THOUGHTS

22 ALCOHOL / SUBSTANCE  
ABUSE

---

## CONCLUSION 24

25 SYMPTOM FINDINGS

29 FINAL THOUGHTS

30 FUTURE REPORTS

31 WORD FROM THE AUTHOR



Opening the Dialogue on Mental Health Awareness in Law Enforcement

# INTRODUCTION

2018 marks the second straight year where police suicides outnumbered line of duty deaths, according to data from Blue H.E.L.P.<sup>1</sup> and the Officer Down Memorial Page.<sup>2</sup> In 2018, 140 police officers committed suicide, outnumbering the 129 officers who died in the line of duty. Unfortunately, that trend is already on pace to repeat itself for the third year in a row.

The job of law enforcement is critical to maintaining our way of life: If there were no police officers, society would descend into anarchy and chaos. The men and women who protect us sacrifice their lives every day for the peace and prosperity of strangers. **After serving 15 years in law enforcement**, I've observed another, hidden sacrifice many police officers are making simply by doing their jobs.

Law enforcement produces a varying psychological toll among police officers. I have observed and noted signs of what I have termed Law Enforcement Distress Syndrome (LEDS) in different members of the law enforcement community.

It is my mission to improve the health and wellness of current and former police officers and to help re-establish the community respect and trust law enforcement deserves.

The purpose of this research study was to corroborate **Law Enforcement Distress Syndrome (LEDS)**, identify any data trends of interest and use the findings to develop a curriculum to enhance the quality of life for those affected.

While reviewing the data, it should be noted that we chose to only show the agree and disagree percentages, omitting those who abstained or answered neutrally.

<sup>1</sup> "Home." Blue H.E.L.P., [bluehelp.org/](http://bluehelp.org/).  
<sup>2</sup> "The Officer Down Memorial Page (ODMP)." Officer Down Memorial Page, [www.odmp.org/](http://www.odmp.org/).



# ABSTRACT

Law Enforcement Distress Syndrome (LEDS) is defined as a psychological condition developed by some law enforcement officers due to prolonged exposure to continuous threat, violence, trauma, accidents and crime.

LEDS has eight identified symptoms:

- Hypervigilance
- Revenge / Vengeance Paranoia
- Distrust of Others & Motivations
- Anti-Social Behavior
- Chronic Fear Caused by Fatalistic Thinking
- Adrenaline Addiction
- Depression / Suicidal Thoughts
- Alcohol / Substance Abuse Issues

It is possible that not every officer exhibits every symptom and there are varying degrees of severity. LEDS is not PTSD. While there is some slight overlap in symptoms, they are significantly different enough to warrant their own designations. It is possible to suffer from both LEDS and PTSD.

To identify the existence and prevalence of LEDS, we surveyed 1,041 self-identified law enforcement officers. These officers voluntarily completed our 137-question survey. Participants could choose not to answer any of the questions. This methodology was chosen due to the traditional unwillingness of police officers who are known to truthfully answer questions containing this type of subject matter.

Our results showed a significant presence of each symptom identified in LEDS in many of today's law enforcement personnel.



# STUDY DESIGN

This survey was open to law enforcement personnel from all over the world with varying degrees of tenure. Both current and retired police officers were allowed to participate.

These officers voluntarily completed our survey of 122 Likert scale<sup>3</sup> questions. There were an additional 15 questions aimed at identifying demographic information, experience levels and one open-ended response.

This study was the first of its kind aimed at researching LEDS. Much more research is needed to understand, diagnose and identify management and treatment options. The recommendations for subsequent research are the following:

1. **Researching non-law enforcement personnel as a means of comparison.** Some of the questions in this survey were set aside with the intention of comparing responses to a future survey of civilian, non-military personnel.
2. **Developing a diagnostic tool.** It will be important to have a formal diagnostic tool and an agreed upon threshold for an official diagnosis for the eventual inclusion in The Diagnostic and Statistical Manual of Mental Disorders (DSM).<sup>4</sup>
3. **Any other academic, medical, or scientific research aimed at learning more about LEDS.**

When reviewing the results from the survey, pay particular attention to the highlighted boxes as they possess key points of interest.

<sup>3</sup> McLeod, Saul. "Saul McLeod." Simply Psychology, 1 Jan. 1970, [www.simplypsychology.org/likert-scale.html](http://www.simplypsychology.org/likert-scale.html).  
<sup>4</sup> "Diagnostic and Statistical Manual of Mental Disorders (DSM-5)." DSM-5, [www.psychiatry.org/psychiatrists/practice/dsm](http://www.psychiatry.org/psychiatrists/practice/dsm).





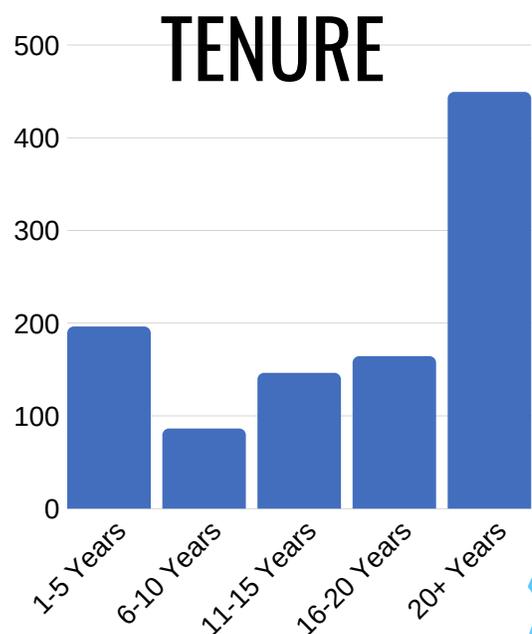
# DEMOGRAPHICS

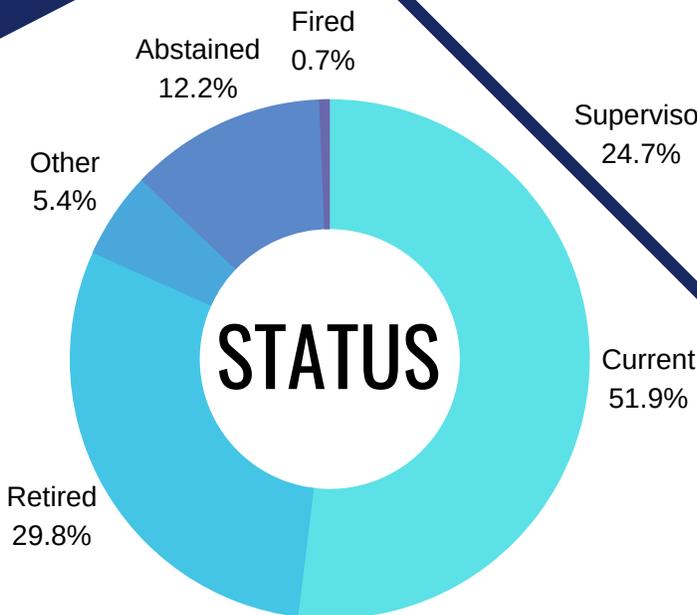
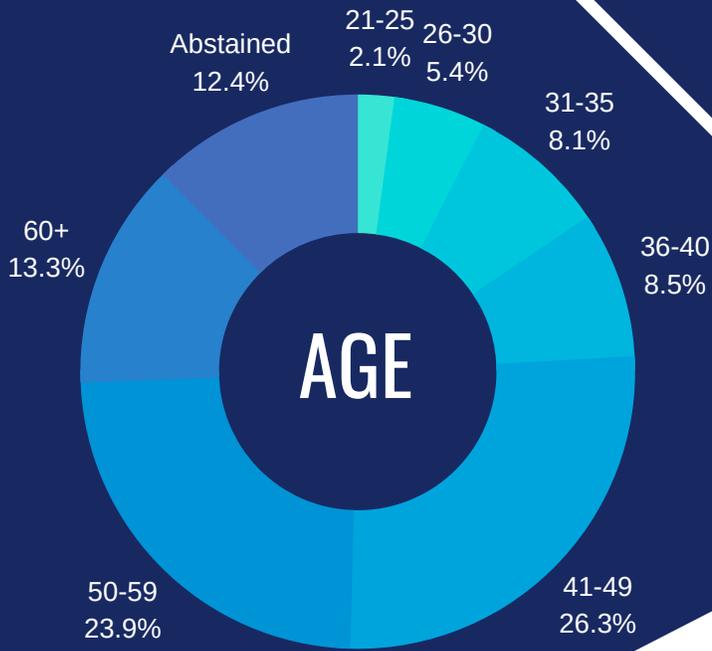
& BREAKDOWN

Total Surveys: **1,041**  
Avg. Completion Rate: **86%**  
Typical Time Spent: **15M : 48S**

## City Size Served:

Small City	< 50K	256
Medium City	50K - 500K	330
Large City	500K >	278
Abstained	-----	177







# HYPERVIGILANCE

Combined Response Data



## Off Duty

Question	Agree	Disagree
I feel like I am constantly searching for threats.	64.82%	12.53%
If I am not paying attention I will be victimized.	50.92%	20.27%
People accuse me of appearing distracted and distant when out in public.	49.47%	26.19%
Travel makes me more anxious now than before I was a cop.	57.28%	26.19%
I can't go anywhere without my gun.	55.48%	26.87%
The danger of being victimized by a crime at home is high.	25.43%	43.42%
The danger of being victimized by a crime while out in public is low.	16.10%	58.49%
I can relax easily in public.	9.00%	72.41%

## On Duty

Question	Agree	Disagree
I feel uncomfortable working on a report while seated in my police car in public view.	64.86%	17.63%
I am nervous the administration is out to get me.	34.51%	45.02%
I believe most people would like to hurt me.	22.65%	46.80%
My chances of being a victim are low.	20.11%	51.77%
I can be relaxed while at work.	15.83%	62.57%



# HYPERVIGILANCE

Participant Quotes & Moderation from Steve



*"I still have people describe me as 'hyper-vigilant' [sic]. Sometimes they laugh and dismiss me and it makes me shake my head. I feel I am just more aware and have a better idea of what risks really present themselves..."*

*I am amazed at how cavalier people are about their safety and the safety of their loved ones."*

*"People have no idea what police work does to you. I have been told I am heartless, jaded, uncaring and worse. None is true."*

*"I feel that I am pretty good at separating the job from my personal life, but it has been brought to my attention by outsiders that sometimes this isn't always the case. But I still feel that I do a good job of not taking things from work home."*

*"Attention to detail is a must in every day [sic] life. Whether it be on or off duty, or transitioning in to [sic] and maintaining a civilian life style [sic]."*

Hypervigilance is one of the two symptoms of LEDS, which is a difficult and complex trait to evaluate because a certain amount of it is necessary for law enforcement to remain on guard against legitimate threats.

When the amount of hypervigilance becomes so high that it is difficult to relax and begins to detract from the officer's quality of life, it becomes an issue.

The picture painted from our research is an overwhelming one. When looking at these numbers as a whole, it becomes clear that there are problems for law enforcement personnel seldom being able to relax and constantly being on guard, many even in their own homes.

The physiological and psychological toll on these individuals is inarguably severe.



## Off Duty

Question	Agree	Disagree
I believe people are interested in revenge if they believe they have been wronged.	60.64%	10.69%
I'm scared to post on social media about any personal information about me or my family.	67.12%	15.03%
Posting on social media about my physical location scares me.	64.89%	17.02%
My home is a target for crime because I'm a police officer.	45.16%	27.91%
I want to get to know my neighbors.	21.81%	51.65%
I want my neighbors to know I'm a police officer.	12.12%	64.31%

## On Duty

Question	Agree	Disagree
I am anxious following a use of force event even if my actions were justified.	67.55%	16.27%
People have complained on me solely to get revenge.	55.41%	29.48%
I have been the target of revenge or retaliation for on duty, justified actions.	44.48%	37.40%
I avoid self initiated police contact with people because I fear it will lead to a complaint.	17.45%	62.52%
People would be too scared to seek revenge against me because I'm a police officer.	6.54%	75.88%

# REVENGE / VENGEANCE

## PARANOIA



Participant Quotes & Moderation from Steve

*"Interesting survey, I was even paranoid answering it."*

*"I still have occasional nightmares about some of the really bad shit that happened on the job... I had an auto thief in a large, stolen flatbed truck ram my patrol car. I was backing away quickly as I realized it was happening. He later admitted he was trying to kill me... Had suspects assault me on traffic stops with no other provocation than me walking up to the car they were in."*

*"Social media and the media is the worst thing to happen to police [sic] a lot of negativity results towards police."*

Paranoia is defined as the irrational and persistent feeling that people are "out to get you" or that you are the subject of persistent, intrusive attention by others.<sup>5</sup> Paranoia is often easily dismissed by outsiders who witness it in others.

It's important to realize that many police officers have been and are targeted for revenge in many different ways—violence, property damage, erroneous complaints, baseless lawsuits or other means. Therefore, the purpose of these findings is not to establish whether or not an officer's paranoia is legitimate, but rather to show that a significant number of them are worrying about it constantly, even when their actions are justified.

It then follows that many of the affected take actions to reduce the likelihood of retaliation and try to ease the feeling that everyone is out to get them by changing their behavior.

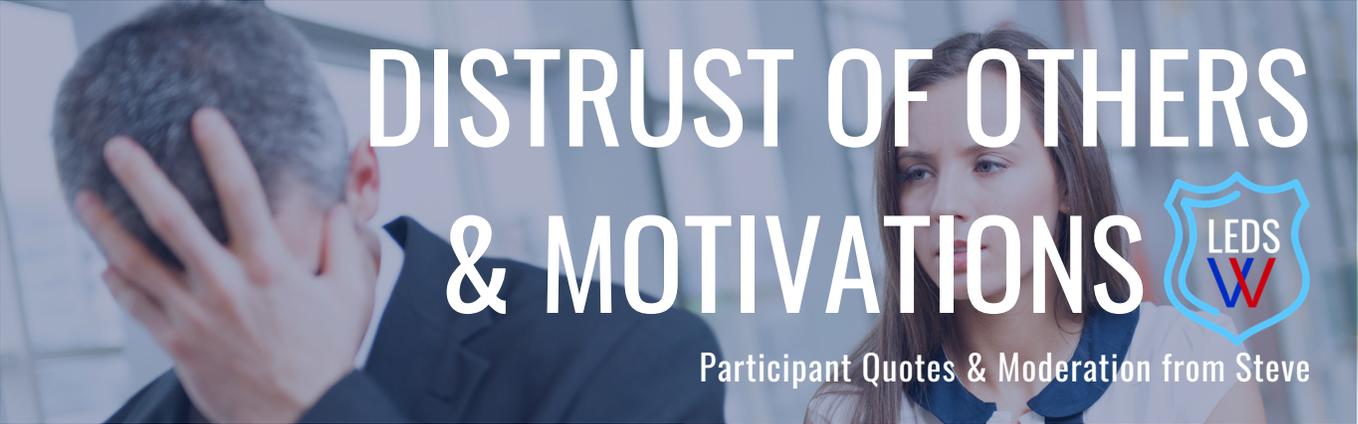


## Off Duty

Question	Agree	Disagree
I don't believe what people tell me.	55.87%	10.72%
I like animals more than people.	62.34%	18.39%
People are generally good.	21.57%	39.94%
My significant other would never lie to me.	37.74%	40.67%

## On Duty

Question	Agree	Disagree
I trust no one.	42.88%	18.91%
I trust no one besides other officers and family.	48.45%	25.83%
People are generally up to no good.	32.65%	29.14%
People are generally telling me the truth when they answer my questions.	4.92%	69.09%



# DISTRUST OF OTHERS & MOTIVATIONS



Participant Quotes & Moderation from Steve

*"The truly untrusting police officer won't take surveys."*

*"In a small office such as mine, there is no one inside to talk with other than officers. I'm not comfortable talking with fellow officers because I'm never sure who I can trust."*

*"I have found that animal therapy can make a huge impact on how you feel."*

This is the second symptom of LEDS in which a healthy amount of distrust of others not only keeps law enforcement personnel safe but also makes them more successful at their job. A good officer is one who does not just accept what he/she is being told unless corroboration exists.

But again, this becomes a problem when the amount of distrust of others and their motivations reaches a level where it begins to deteriorate the quality of life and relationships of those involved.

The numbers here show that even when off duty, police officers experience a significant amount of distrust in others, including within their intimate relationships. This is why I have found police to have very strong relationships with their pets. It is one of the few times they feel the loyalty and honesty they seek without trying to corroborate it. For instance, police officers never question if their dog is really happy to see them when they get home or if it was all just an act.



## Off Duty

Question	Agree	Disagree
People always ask me to tell them my best stories.	73.73%	9.43%
Most of my friends are other cops.	58.48%	17.37%
I find it hard to make new friends since I became an officer.	55.34%	22.92%
Hanging out socially with groups of non-police is a problem for me.	41.55%	32.92%
Joining a non-police social group would be exciting.	17.28%	56.80%
People generally like the police.	16.26%	57.31%

## On Duty

Question	Agree	Disagree
The media is against the police.	88.02%	3.21%
If I don't have to talk to people, I'd rather not.	58.10%	20.15%
It's Us (The Police) vs Them (Everybody Else).	44.72%	23.16%
People fear the police.	33.40%	32.76%
My department does a good job of standing up for an officer if he/she has done the right thing.	27.53%	49.94%
People respect the police.	8.75%	62.00%
Discipline is fair in my police department.	18.48%	63.67%
The administration is held accountable for their actions.	9.30%	78.18%
People understand the job of police officer.	1.81%	93.39%



# ANTI-SOCIAL BEHAVIOR



Participant Quotes & Moderation from Steve

*"Withdrawn from people on too many levels."*

*"My girlfriend has told [sic] I'm antisocial at parties and go off and sit on my own. I just don't always feel like talking to people especially if I don't know them."*

*"I would also add the stress of the hate and animosity from the media, politics and the public as a major contributing factor."*

*"My 2 youngest children are anti-social because of my anti-social influence of not wanting to be around people."*

*"When possible, I actively avoid contact with public."*

*"I think that our bosses should back us up more than they do."*

This section's results stood out as a picture into the psyche of law enforcement officers. Whether their views here are correct should not be at issue. Rather, it's their perception that counts when discussing why law enforcement officers suffering from LEDS can become anti-social.

It's a difficult place to spend much of your time—feeling the public doesn't trust you, doesn't understand your job, feeling you are not respected or liked and the media is out to get you.

The research then shows the tendency of these officers to want to only be around people who they feel understand their situation. This is why the data shows a withdrawal from those who are not associated with the job. These officers need a place where they aren't always being asked to tell their stories or having to hear someone complain about their last contact with the police.

# CHRONIC FEAR CAUSED BY FATALISTIC THINKING

Combined Response Data



## Off Duty

Question	Agree	Disagree
I am more anxious since I became an officer.	68.14%	14.76%
I think about my death more since becoming a police officer.	63.98%	17.57%
I am a fanatic about safety precautions.	47.05%	21.44%
I think about my death often.	44.75%	29.32%
I restrict my loved ones from doing activities I deem dangerous.	40.78%	30.44%
Most activities have the possibility to injure or kill me.	19.75%	47.15%

## On Duty

Question	Agree	Disagree
I see trauma, significant injury and death on a regular basis.	69.19%	11.55%
If I'm not careful, the same accident, injury or trauma could happen to me as I've seen happen to others.	61.97%	13.25%
People die all the time doing regular activities.	62.49%	13.62%
I have seen mundane activities result in someone's death.	68.45%	13.79%
I see dead and / or seriously wounded people regularly.	59.97%	14.88%
Every call could result in my death.	67.95%	15.28%
The likelihood of me being killed at work is high.	49.57%	19.23%



# CHRONIC FEAR CAUSED BY FATALISTIC THINKING

Participant Quotes & Moderation from Steve



*"...but there are days when my anxiety is extremely high and I struggle internally for what feels like no explainable reasons."*

*"I have been involved in 2 shootings, ive [sic] been shot while dragging my partner out of a house who was shot 6 times, same call i [sic] watched as my other partner passed away from the same shooting... Towards the end of my career i [sic] was scared every domestic call, open door call, and man with a gun... It saddens me not being a police officer any more. I would do it again all over without hesitation!"*

*"Hundreds of homicides and dead bodies."  
- Ret. Sgt. Baltimore Homicide*

*"Saw numerous traumatic incidents. Probably suffer from PTSD. Never treated. Back when I worked, the disorder was unheard of - you simply went back to work. One of my last calls was a suicidal party that killed himself in front of me with a 357 mag [sic] handgun - still relive it - my partner and I tried to talk him down, we couldn't save him...too many traumatic things to list, I would be writing for years..."*

*"I have experienced Post Traumatic Stress due to a high volume of traumatic calls and one major death investigation within an 11 month period after returning to a regular patrol assignment."*

Law enforcement responds daily to one incident after another, taking reports of people whose homes have been burglarized or cars have been broken into or stolen. People have been robbed, beaten, sexually assaulted, harassed, stalked, stabbed, shot, or victimized in some other way. Others were just going about their day when they were broadsided by a drunk driver or injured in an accident. Even more people were hurt, maimed, or killed in accidents with machinery, plane crashes, drownings, were fall victims, or any of the other infinite ways injuries and deaths have occurred.

In the psyche of police officers, it stands to reason then the belief that their regular, mundane, daily activities might result in some sort of catastrophe is greater than it actually is. Anxiety and fear are then produced because of the recollection of the trauma that has been witnessed and the attached perception that the same result is possible if extreme care is not exercised.

It has been my experience that this symptom seems to lurk outside the consciousness of those suffering from it. In other words, the cause of the increased daily fear and anxiety is not usually known by those suffering from it until it is pointed out or the connection to the root of it is made.

# ADRENALINE ADDICTION

Combined Response Data



## Off Duty

Question	Agree	Disagree
I feel bored easily.	53.74%	21.19%
I crave action and adrenaline.	42.22%	28.50%
I engage in high risk activities often.	18.64%	54.37%
I have engaged in high risk sexual encounters (unprotected sex with strangers, prostitution, sex in public, partner swapping, etc.).	21.21%	69.94%

## On Duty

Question	Agree	Disagree
I have taken unnecessary risks while at work.	56.52%	25.75%
I crave more action at work.	34.44%	35.61%
At work, I have daily adrenaline dumps.	36.55%	35.90%
I crave more adrenaline dumps.	29.35%	44.19%

# ADRENALINE ADDICTION

Participant Quotes & Moderation from Steve



*"Loved every minute of it, but would never do it again, as the price is too high. Three failed marriages plus a number of long term relationships destroyed. I was in an OIS that resulted in acute PTS [sic]. The accumulated traumas over the years and the responder fatigue has also resulted in chronic PTS [sic]. I thought it would get better after retirement, but it didn't. It's like a highly addictive drug...gotta have your fix. The high can kill you, but the withdrawals are worse. I was highly successful and served as both Chief and Sheriff, but I would never make the sacrifices I've made again. The cost is too high and the fallout too devastating."*

*"Loved my career, would do it all over again. Miss the adrenalin [sic]."*

***"Police work is 98% boredom and 2% sheer terror."***

- Unknown

While the above quote isn't entirely accurate, the general idea is true. Officers can be driving around in the middle of the night yawning and tired, and then the next minute their colleague is screaming into the radio as they are involved in a gunfight.

Naturally, assignment has much to do with the frequency of adrenaline dumps while on duty. Patrol officers, SWAT members, hostage negotiators or others prone to regular high-stress events will experience the presence of high adrenaline levels more often than say a desk assignment. Also, adrenaline addiction is not exclusive to law enforcement personnel, although the prevalence of it seems to be higher than that of the general public.

Adrenaline addiction is a symptom that can stay outside the awareness of the sufferer until circumstances remove it. When a human being regularly experiences such intense highs, it becomes normal for them. Change assignment, go on leave or vacation, or separate from the department and all of a sudden the daily highs are far below those in which the individual is accustomed to experiencing. This leads to feeling numb and the individual begins trying to create situations that mimic the high adrenaline situations no longer present in order to feel alive and normal again.

# DEPRESSION/ SUICIDAL THOUGHTS



Combined Response Data

## Off Duty

Question	Agree	Disagree
If I were in counseling, I would NOT want anybody to know.	68.97%	17.46%
I believe the job of police officer depresses people.	54.98%	18.65%
I feel depressed more often since becoming a police officer.	45.92%	31.71%
I have voluntarily attended counseling since becoming an officer.	39.73%	51.85%
I would say I currently have depression issues.	38.17%	40.02%
I can talk about my issues with family.	26.58%	52.57%
Depression is a sign of weakness.	24.32%	53.72%
I have been formally diagnosed with depression.	25.80%	66.15%

## On Duty

Question	Agree	Disagree
I think many police officers battle depression.	69.38%	8.57%
I've noticed negative changes in my personality since becoming an officer.	68.13%	14.22%
I am aware of resources my department provides for mental health issues.	55.92%	26.79%
My depression started after becoming a police officer.	54.29%	27.57%
I can talk about my issues with co-workers.	25.86%	48.61%
I don't know how to cope with what I've seen.	24.01%	51.44%

# DEPRESSION/ SUICIDAL THOUGHTS



Participant Quotes & Moderation from Steve

*"My duties as a gang enforcement officer, an undercover drug agent and now as a detective investigating child pornography, human trafficking, sexual assaults and the like have left me with PTSD and depression. I feel isolated because I don't want to spend any more time with cops and I can't talk to my family about it because I don't want to scare them and they wouldn't be able to relate."*

*"Sought help by going to Psych [sic] ward in 1988 when it was not accepted and frowned on."*

*"I joined young. I feel being a police officer has molded me into a person I don't like. I woke up And [sic] wondered how I became such an asshole."*

*"I don't want my family to know about PTSD because I need to be strong for them."*

*"Many officers need help. Even if that is just talking to someone. We are drilled that we are the problem solvers and I think many officers, myself included, think it looks weak to ask to talk about [sic] something we've seen or done. Which makes us internalize everything and get 'it out' in other ways like with alcohol or other risky behavior."*

*"I wouldn't go see shrink... Career ender..."*

The CDC says, "During 2013–2016, 8.1% of American adults aged 20 and over had depression in a given 2-week period."<sup>6</sup>

My research shows the prevalence of a formal depression diagnosis among law enforcement is over three times that of the national average. If you consider those officers stating they currently have depression issues, it is a 371% increase.

While 25.80% of those surveyed admitted to a formal depression diagnosis, 38.17% say they are currently experiencing issues with depression. It's significant that 68.13% of respondents say they have experienced negative changes in their personality since becoming an officer.

I believe it's the awareness of negative changes coupled with a lack of coping mechanisms and a fear of jeopardizing their job by speaking out that causes such notable depression levels.

<sup>6</sup> "National Center for Health Statistics." Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, 13 Feb. 2018, [www.cdc.gov/nchs/products/databriefs/db303.htm](http://www.cdc.gov/nchs/products/databriefs/db303.htm).



## Off Duty

Question	Agree	Disagree
I drink alone.	32.92%	46.34%
I drink more now since becoming an officer.	36.09%	48.48%
I drink as a means of escape.	21.02%	62.53%
I worry drinking could become a problem for me.	23.81%	64.33%
Drinking is a problem for me.	10.82%	78.85%

## On Duty

Question	Agree	Disagree
I know of co-workers who have or had alcohol problems.	83.87%	8.12%
I know of a co-worker who has lost their job because of alcohol or drug use.	65.96%	26.36%
I know of co-workers who have or had drug problems.	48.02%	40.43%
I know of a co-worker who has died as a result of alcohol.	36.87%	56.27%
I know of a co-worker who has died as a result of drugs.	17.79%	76.53%
I have been fired or disciplined for alcohol use.	2.68%	96.69%
I have been fired or disciplined for drug use.	0.64%	99.36%

# ALCOHOL / SUBSTANCE ABUSE ISSUES



Participant Quotes & Moderation from Steve

*"While I was an officer I did drink alcohol in excess much more than regular. After leaving the department, my drinking decreased dramatically."*

*"I had a very bad drinking problem especially when I would end up separated or divorced."*

*"I am a recovering Alcoholic, Divorced Once, Diagnosed and Suffer [sic] from PTSD."*

*"I supervised officers who had drinking problems and drug problems."*

Prior to beginning this research, it was my hypothesis that alcohol and/or substance abuse was a symptom only exhibited by long-term, severe sufferers of LEDS who have not received any help or discovered any healthy coping mechanisms. It is my mission to provide tools, resource management, coping techniques and options to the 21.02% of those saying they drink as a means of escape and to the 23.81% who worry drinking could become a problem for them.

At the On Duty section, it is important to note the high percentages do not correlate to the number of instances, only to the knowledge of one person or instance causing an answer in the affirmative. In most workplaces, law enforcement departments being no different, even if one member has had an alcohol or drug problem, the entire workplace can often be aware of it.

# CONCLUSION

There are seemingly endless ways of analyzing the data obtained in our LEDS survey. Before explaining how and why we did what we did, let's begin by stating our purpose.

The purpose of this research study was to:

- Confirm the existence of LEDS. We believe the data responses to a question are significant when greater than 20% of respondents are affected.
- If confirmed, attempt to gauge the prevalence of LEDS in the law enforcement community.
- Begin to get an idea as to the level of severity of those suffering from LEDS.

Undoubtedly, we could have assigned a weighted average to each question, scored all the responses, and come up with a threshold, proclaiming, "X number of people have LEDS." However, we believe this to be a job best suited for a larger collaboration between researchers and mental health professionals.

To be clear, the purpose of this research was not to:

- Come up with a complete and exhaustive survey that could answer all of our questions about LEDS.
- Design a survey to act as an official diagnostic tool.
- Identify and set thresholds for any official medical diagnosis.

For this first analysis, we kept the statistics basic and analyzed the law enforcement community as a whole. Although we have also completed more in-depth analyses of our data, that information will be released at a later date. For now, we went through the data systematically by symptom and determined if there were any numbers of interest. What we found were enough numbers of interest in all symptoms and categories to confirm that LEDS not only exists, but is a problem for law enforcement personnel.



# SYMPTOM FINDINGS

## HYPERVIGILANCE

The caveat for hypervigilance has been made already, but it bears repeating. A certain amount of hypervigilance and distrust of others are important traits not only for law enforcement to possess, but also to cultivate in new recruits. A healthy amount of these traits allows for enhanced safety of police officers and makes them more successful at their job. When we speak of these two traits in terms of a person suffering from LEDS, we are speaking about a point at which an individual's hypervigilance has gone beyond healthy levels, becoming symptomatic as it begins to reduce their quality of life and their personal and intimate relationships.

Firearms-related fatalities were the leading cause of officers' deaths in 2018, with 53 officers shot and killed,<sup>7</sup> so the data in the On Duty section isn't too surprising. With police officers being ambushed in their cars and finding themselves the targets of violence more often, it's common sense that police don't find work a relaxing place. It even goes so far as most officers do not feel relaxed while seated in their patrol car completing paperwork after a call, a place where a ton of administrative tasks are completed.

It's the Off Duty section though that is striking. One participant said it best when they responded, "People have no idea what police work does to you." It's obvious that much of the symptom of hypervigilance is permeating into the private lives of police officers. The numbers are staggering in this section. Most all of them are over the 50% mark, except for the question I believe to indicate the most severe cases of LEDS, "The danger of being victimized by a crime at home is high." That question still is noteworthy with 25.43% of respondents who don't even feel completely at ease while in their own homes, simply because of their job.

## REVENGE / VENGEANCE PARANOIA

I believe a quote from our data encapsulates this symptom's relevance best when a participant wrote, "Interesting survey, I was even paranoid answering it." While there are several questions in this section that don't necessarily stand out as anything significant on their own, when the totality of responses are analyzed, the data shows a significant amount of paranoia. For instance, the question "I believe people are interested in revenge if they believe they have been wronged" isn't necessarily persuasive of any overwhelming paranoia. Indeed, there may be a significant amount of the general population who agrees with that statement. But now factor in the rest of the data and look at the totality of information. It's clear there is a significant amount of officers attempting to mitigate the possibility of any type of revenge or vengeance by reducing the number of people who know anything about the officer.

It's also significant that 67.55% of officers feel anxious following a use of force event, even if their actions were justified. That is a notable statistic, as most people at work would feel very confident, if not proud, if they did what was right. For police, there is still an overwhelming concern of backlash, lawsuits, media attention, complaints or other types of retribution. As you can see, most officers don't even believe that their position in law enforcement is enough to dissuade people from seeking some sort of revenge.

<sup>7</sup> "Causes of Law Enforcement Deaths." National Law Enforcement Officers Memorial Fund, [nleomf.org/facts-figures/causes-of-law-enforcement-deaths](http://nleomf.org/facts-figures/causes-of-law-enforcement-deaths).



## DISTRUST OF OTHERS & MOTIVATIONS

Again, this is the second of two symptoms that cops need a healthy amount of in order to do their job successfully. It's when this distrust of others and their motivations begins to leech its way into situations where it isn't warranted and/or into the private lives of police officers that it becomes a problem. The On Duty section revealed a higher percentage of distrust on duty than I believe most people would expect. This is definitely a noteworthy piece of information as it offers insight and understanding into the mentality of working police officers.

While the data in the Off Duty section may not be as substantial as some of the other symptoms, the responses paint a picture of what law enforcement is thinking with regards to trusting others and how they cope with it. Nearly 40% of police officers do not even trust the word of their significant other, which is a sign that can only hinder intimate relationships.

One participant who stated "I have found animal therapy can make a huge impact on how you feel" is onto something for those who struggle with this symptom. I have found this to be true in my experience, not only with myself but also with several close police acquaintances. That is why I have a section in my curriculum for LEADS working with animals as a possible coping method.

## ANTI-SOCIAL BEHAVIOR

Much of the questions and responses in the previous section also hint toward anti-social behavior, and one may wonder why the tenor of the questions surround the media, public and the administration. The picture painted by the response data is clear. Officers feel the public doesn't understand their job, the media is against them, the administration doesn't stand up for them, nor are those in charge even held responsible for their actions. There is a perceived lack of trust in the police and a pervasive "us vs. them" mentality. What other direction would that force an ordinary human being to go besides becoming anti-social and only wanting to be around others who understand? This is why we see many of the participants preferring only to hang around other officers and avoiding non-police social circles. It's no wonder why one of our respondents commented that they have "Withdrawn from people on too many levels."

This section's data is a powerful and illustrative description about the isolation perceived by police officers in our nation and just how severe that perception is. Combined with always having to be "on" and tell your best stories to an audience that doesn't understand, respect or support you, it makes for an unwelcome environment that has many officers running away from normal social settings, opting for self-isolation instead.



## CHRONIC FEAR CAUSED BY FATALISTIC THINKING

Standing out in our data is the overwhelming 68.14% of participants who say they are more anxious since becoming a police officer. The other responses are also telling. The question “Most activities have the possibility to injure or kill me” aims to find those with more severe cases of LEDS. While the response of 19.75% is a little below our threshold of significance ( $\geq 20\%$ ), it was close enough to illustrate fatalistic thinking is still an issue.

The On Duty section here is one that probably won't cause that much surprise upon review, but serves as a reminder just why the Off Duty questions are so resoundingly answered in the affirmative. It's also a reminder for non-law enforcement just how often and how many of our officers are coming into contact with violence, victimization, trauma, death, accidents, and other horrific instances. Compare that to the experiences of civilian personnel, and ponder for a moment what effect that has on the human psyche of those putting themselves in harm's way.

## ADRENALINE ADDICTION

My experience and research also has shown me that leaving the job or a particularly exciting assignment is when adrenaline addiction becomes more of a problem. When human beings experience extremely high adrenaline-pumping instances on a regular basis, their baseline of highs and lows becomes skewed. The addiction to these highs and lows can become intense, to where an individual craves more of these situations in order to feel normal. Absence of adrenaline causes the person to feel numb, empty, bored and apathetic toward situations to which they should normally have a response.

The response percentages for this symptom are slightly lower than some of the other symptoms. Also, some of them are close to and one below the  $\geq 20\%$  level. However, the question “I engage in high risk activities often” is aimed at finding more severe cases of adrenaline addiction, and once again it is very close to our minimum threshold.

Trying to feel “normal” by achieving such intense physiological and emotional highs is a dangerous situation that can lead to other problems, especially when coupled with other symptoms of LEDS.



## DEPRESSION / SUICIDAL THOUGHTS

I believe these last two symptoms, depression and alcohol abuse, usually take place when any of the first six symptoms become present in an individual, coupled with a lack of coping methods or management techniques. Certainly depression and suicidal thoughts or actions are not exclusive to law enforcement or to those suffering from LEDS. There are people from all walks of life who experience these issues. The discussion here that is important is how depression applies to LEDS, or results from the nature of the job of police officer.

Our data shows 69.19% of participants responded that they see trauma, significant injury and death on a regular basis. Depression with regards to LEDS can occur because people don't know how to cope with what they've seen. In fact, 24.01% of participants agreed with that statement. Obviously not all of those people will turn to alcohol, but depression can be debilitating for anyone who suffers from it, substantially detracting from one's quality of life.

The data in this section shows the experience of depression among law enforcement to be significantly higher than the general population. It is very telling about the lack of outlets for police officers. Close to 50% of participants, both on and off duty, not only feel like they can't talk to co-workers but can't even talk to their own family about their issues.

Many feel how one respondent told us: "I don't want my family to know about PTSD because I need to be strong for them." When looking at the absence of perceived support and the sheer number of people experiencing depression issues, it should send off alarms that drastic and sweeping changes are in order across this community.

It then follows after reviewing our data for depression as a symptom of LEDS that suicides are off the chart for law enforcement, especially over the last few years. Police suicides outnumbered line of duty deaths for two straight years in 2018, according to data from Blue H.E.L.P.<sup>8</sup> and the Officer Down Memorial Page.<sup>9</sup> In 2018, 140 police officers committed suicide, whereas 129 officers died in the line of duty caused by an accident or the attacking hands of another. That trend is already on record to repeat itself in 2019. Our data corroborates a very upsetting trend where an increasing number of these people are not getting the help they need and feel there is no alternative other than to end their lives.

## ALCOHOL / SUBSTANCE ABUSE

While it's somewhat encouraging to see that only 10.82% of respondents say that drinking is a problem for them, well below our threshold, I am not as encouraged by the data in the other responses. I believe, and the data corroborates, that less than 1% of officers are having issues with drugs or at least have been disciplined for it. Due to the fact that a loss of job could occur should officers engage in such activity, it follows that it is less likely a coping mechanism of choice for police officers. This is consistent with my experience. The alcohol numbers are high enough to indicate the possibility of alcohol issues which are potentially in an incubation period for many of today's law enforcement officers.

<sup>8</sup> "Home." Blue H.E.L.P., [bluehelp.org/](http://bluehelp.org/).  
<sup>9</sup> "The Officer Down Memorial Page (ODMP)." Officer Down Memorial Page, [www.odmp.org/](http://www.odmp.org/).



## FINAL THOUGHTS

I believe the data from this research presentation is not only fascinating, but also stands on its own. It paints a vivid picture of just how affected officers are from being constantly under threat coupled with repeatedly responding to crime, victimization, violence and trauma. This report shows how this mindset begins to permeate into the private lives of many police officers. It then is obvious how, in many cases, it detracts from their much-needed relaxation and rejuvenation time, hurts their personal and intimate relationships, and causes fear and anxiety, leading to more serious issues like alcohol or substance abuse, depression or even suicidal thoughts or actions.

My hope for this research is for the general public to better understand what it is we as a country are asking for from the women and men who protect and serve us. The freedoms we enjoy and our very way of life require the job of police officer in order to function. Because our rule of law and the physical manifestation of it—the police—are the ones enabling us to live as we do, it's necessary we understand each other. Understanding breeds compassion and trust and enables us to grow together as a country. Conversely, lack of understanding brings divisiveness, segregation, animosity, distrust and fighting.

My second hope for this project isn't to further the same type of pro-police narrative we so often hear—victimizing the police and attempting to elicit sympathy for them because their job is difficult. It isn't to say that these “poor police officers” need more leeway because they are suffering from the mental ramifications of doing their job. It isn't to say we should feel sorry or pity them. My hope for this project is EMPOWERMENT. It is to teach law enforcement and those affiliated with it about LEDS so that they can take charge of their own happiness and make the changes they deem necessary to live a joyful, productive and satisfying life.

In order to accomplish that, I have developed a curriculum to assist law enforcement to cultivate mindfulness and use it to take inventory of where they are with respect to LEDS. I then provide resources, techniques, and other methods to improve their quality of life and overall happiness.

Talking about LEDS and the mental issues associated with the job of law enforcement is a dialogue that's long overdue in this country. Implementing a method for these officers to talk about and manage what is happening for them is not only an important part of increasing the quality of life of our police officers, but it is also the first step in breeding a mutual understanding among the citizens whom law enforcement protects. That understanding is the first step of healing the tattered, torn, and divisive relationship that has been allowed to languish between cops and the world. An improved relationship means enhanced safety and quality of life for everyone in this country. So, let's talk...



## THESE STATISTICS ARE JUST THE BEGINNING...

The dialogue is open and awareness of the mental health and well-being of our law enforcement officers is increasing. But there is still more work to be done to help the men and women in blue suffering from Law Enforcement Distress Syndrome.

## FUTURE REPORTS

As aforementioned, besides proving the existence and prevalence of Law Enforcement Distress Syndrome among officers today, there were other surprising revelations revealed from this research study.

In order to address these issues and combat them directly, I will be releasing reports specific to these findings.

- **Impact of Retiring**
- **Impact of Tenure**
- **Misc. Items of Interest Including:**
  - **A Letter to Chiefs**
  - **Counseling vs. Non-Counseling**
  - **Male v Female.**



# A WORD FROM THE AUTHOR

Due to the nature of police work and the necessary training that goes into preparing the men and women who protect us to successfully do the job, there may not be a way to prevent LEADS. Some of these symptoms in their root form are appropriate—vigilance, paranoia, and distrust in their basic modes are necessary for an officer to be safe and successful in law enforcement. I paint a real life example in my book *From Boy To Blue*.

Therefore, instruction of this syndrome should take place at the entry level police academies as well as during recurrent wellness training. This will help both with identification, prevention, and knowing when to begin the next steps of management and treatment for the symptoms of LEADS.

Counseling, support from family and friends, as well as the curriculum I've developed for LEADS can help the affected deal with the trauma and find ways to assist in coping with the job, so as to reduce the severity and number of symptoms they are experiencing.

Oftentimes, the affected are so tied to their job that leaving without any separation assistance can make symptoms worse. However, over time and with proper preparation, leaving police work and assimilating back into normal life can greatly reduce the number and severity of symptoms.

The department administrations can also be of more assistance to their officers, as continuing education and honesty are important in the management of LEADS. By implementing my curriculum with actionable goals, treatments and methods of communication, officers will not only have a support system in place specifically for their condition, but also experience fewer symptoms, hopefully ultimately leading to a significantly reduced number of police suicides.



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