IACP NATIONAL LAW ENFORCEMENT POLICY CENTER

Post-Shooting Personnel Support

Concepts and Issues Paper
Originally Published: March 1991
Revised: January 2012

I. INTRODUCTION

A. Purpose of the Document

This paper is designed to accompany the Model Policy on Post-Shooting Personnel Support developed by the IACP National Law Enforcement Policy Center. This paper provides essential background material and supporting documentation to provide greater understanding of the developmental philosophy and implementation requirements for the model policy. This material will be of value to law enforcement executives in their efforts to tailor the model to the requirements and circumstances of their community and their law enforcement agency.

B. Background

For many years, qualified mental health professionals (QMHPs) working with law enforcement agencies have recognized the emotional and psychological impact that can result in the aftermath of life-threatening catastrophic events. Over the last several decades, however, this phenomenon has been brought to wider public attention in large measure by the significant number of war veterans who have suffered adverse and sometimes severe emotional reactions to their wartime experiences—in many cases, years after they have returned from combat. These and other factors have increased our understanding and appreciation for the psychological and emotional effects on survivors of traumatic violence in a variety of contexts.

Even though law enforcement officers are trained to recognize and deal with a variety of traumatic and violent circumstances, they can suffer from negative stress reactions to officer-involved shootings. Situations wherein an officer shoots someone else or is shot; witnesses the shooting or killing of another officer or individual; or fires his or her weapon on duty with the intent to use deadly force, can increase the development of traumatic stress reactions. Officers involved in a shooting incident or other similar deadly force confrontation experience a range of responses. However, some of those who experience more serious reactions, and particularly those who do not receive proper assistance, leave law enforcement in the aftermath, and many suffer from long-term consequences.

The individual impact of specific circumstances on law enforcement officers cannot be reduced to a simple formula and should not be overly simplified. The potential traumatizing effects of specific circumstances depend greatly upon the dynamics of the situation and the experiences and mind-set of the officers involved.

This document is meant to provide a general understanding of the range of possible reactions and their interrelationships. Recognition of these emotional reactions will better equip the police administrator to interpret officer responses and reactions during investigative proceedings and in later work situations and provide a basis for understanding model policy recommendations. This document is designed to address the needs of the officer who discharged his or her firearm. For guidelines that pertain to additional personnel who may be directly affected by the shooting, please refer to the IACP Model Policy on Critical Incident Stress Management.
II. PHASES OF THE EMOTIONAL AFTERMATH

Each officer experiences the emotional aftermath of a shooting in a personal manner that depends on many factors. These include:

- the officer’s perceived vulnerability during the incident;
- the amount of control he or she had over the situation;
- the ability to react effectively;
- expectations concerning shooting situations and how closely those expectations correlated with what happened during the incident;
- the proximity of the officer to the suspect;
- how bloody the shooting was;
- the reputation of the suspect, for example, whether he or she was a murderer or a scared teenager;
- the perceived “fairness” of the situation, for example, shooting a person who used the officer to commit suicide is perceived as unfair and may produce anger or other reactions in the officer;
- the legal and administrative consequences of the officer’s actions;
- the amount of stress in the officer’s life and his or her level of emotional adjustment;
- personal coping skills; and
- the amount of peer and family support.

Not all officers exhibit the reactions described here and those who do may not experience them in the order in which they are presented.

A. Shock Disruption

The traumatic experience starts when a situation puts the life of an officer or another person in danger, and the officer makes the decision to use deadly force. Many physical, psychological, and emotional phenomena such as those listed below may occur during the brief moments of peak stress and may be confusing to the officer.

1. Sensory reactions. It is quite common to experience perceptual distortions of various types. Some may experience time distortion in which events appear to occur in slow motion. Under such conditions, a few seconds may seem like a minute. For other officers, time accelerates. Auditory distortions are common among officers involved in a shooting. For most, sound diminishes and gunshots, shouts, or other sounds may be muffled or unheard. Visual distortions occur in about half of shooting instances. In these cases, officers may experience “tunnel vision,” a condition where the officer’s visual attention is so focused as to exclude all or most peripheral objects that would normally appear in the field of vision. Tunnel vision is generally accompanied by a heightened sense of detail about a narrow range of subjects, typically the source of danger, to include the assailant and the weapon involved.

It is important that supervisors at the scene and investigators assigned to the shooting understand that these sensory distortions are normal and common.

2. Physical and emotional reactions. The shock disruption phase starts when the shooting ends. An officer may experience a few minutes of shock symptoms such as tremors, shaking, crying, nausea, or hyperventilation among others. These are symptoms of the de-escalation of stress that sometimes occurs when a high-impact situation is over, and they are not signs of weakness.

Initially, an officer may be dazed, inattentive, and upset. There may be a feeling of disbelief or difficulty comprehending the reality or significance of what happened. An officer could be shot and not realize it at the time. The shock sets in, and the pain is numbed until the shock lifts and the officer understands the magnitude of what just took place. This can also impact the officer’s memory. It can be difficult for the officer to concentrate and to remember details. From a few hours to a few days following the incident, the officer may be on an “adrenaline high” and overstimulated, causing him or her to be tense, anxious, agitated, or irritable. This adrenaline high may make it difficult to sleep. This sleep deprivation can impact officers in a negative way, causing them to become hypersensitive to treatment by the agency. Questions perceived as critical, such as “Why did you shoot” or “Why didn’t you shoot?” can magnify the trauma, whereas supportive statements such as “Are you okay?”, “I am glad you survived” shows support and can help mitigate the stress reactions they are experiencing.

Commonly, during the shock reaction period, emotions concerning the incident, and awareness of these emotions, become blunted. An officer may generally feel emotionally detached and numb, but also experience occasional anxiety attacks during the same period. There is a tendency to feel as if one is running on “automatic pilot”—just going through the motions. Indeed, an individual does not feel as if one is running on “automatic pilot”—just going through the motions. Indeed, an individual does not experience the full emotional impact of a critical incident immediately after the event. Psychological defenses, such as denial, automatically intervene to temporarily shield the officer from what may otherwise be overwhelming emotions.

The shock disruption period may last anywhere from a few minutes to a week or longer depending upon the individual, but usually lasts two to three days. For this reason, it is important to require that an officer take mandatory leave immediately following a shooting and not be allowed to return directly to a normal duty assignment even if he or she tells the agency they are doing well, as they may be experiencing a “denial” of emotion. If necessary, the officer should be reassigned to a temporary,
Recognizing the possible impact of a shooting on an officer and his or her potential reactions to the event, the model policy makes several recommendations for dealing with the officer at the scene:

- **Emotional first aid.** First, a supervisory officer should be immediately assigned to any officer-involved shooting and assume control of the situation. The first order of response in such situations is to identify any injured persons and to ensure that medical attention is secured.

  When order has been established and the officer is no longer required at the scene, he or she should be transported to a quiet and secure location away from the sights and sounds of the event area. In many cases, spectators, as well as friends and relatives of suspects or victims may congregate at the scene, many of whom may focus attention on the officer. For these and related reasons, it is best that the officer be given some physical space as soon as practical so he or she may regain some composure and attempt to relax.

  Officers who have been removed from the immediate scene should be accompanied by a peer support team member or personal friend. Many jurisdictions, either individually or in combination with neighboring law enforcement agencies, train law enforcement officers to serve as peer support team members who may assist a QMHP in these and similar situations. Such individuals are often officers who have personal experience with the impact of PTSD (post-traumatic stress disorder) and/or ASD (acute stress disorder) and have an interest in helping fellow officers who may experience similar problems. If a trained peer support team member or a QMHP is not readily available, a companion officer or chaplain may serve in this supportive role. This individual should show concern and compassion whether or not the officer chooses to talk or remain quiet. The mere fact of having a companion officer or chaplain close at hand can serve a strong emotional support function until the QMHP is available.

  The officer should be cautioned at this juncture that he or she should not discuss the incident with anyone but a personal or agency attorney, union representative, agency representative, or a QMHP until the preliminary investigation is concluded.

  Immediately following an officer-involved shooting, a substantial amount of media attention can be anticipated. Media personnel can be expected to attempt to make contact with officers. In no case should these officers make comments to the press concerning the incident. All information concerning the incident should flow from the supervisory officer, the law enforcement agency’s public information officer, another assigned spokesperson, or the agency’s chief executive. At this stage, basic information concerning the incident should be provided to the press as soon as possible if it will not inhibit or undermine the agency’s investigative process. Timely release of such information will serve to discourage the press from speculation or uninformed or misdirected commentary that could be harmful to the officers and the agency.

  Most officers also have a desire to contact their families at such times. If the officer is not injured, he or she should contact his or her family by telephone to let them know what happened before they hear rumors, news reports, or get the news from some other source. No details concerning the incident should be provided at this time. The officer should limit the conversation to stating that there was a shooting and that he or she is okay.

  If the officer is injured, the officer’s designated friend, family member, or coworker should contact the officer’s significant other or family members and take them to the hospital. The designated individuals are noted on the “Emergency Notification” form provided by the agency. These forms should be filled out by every employee upon employment and updated when changes are made. In these instances, it is also important to ensure that the family members have someone with them for support, such as close friends or relatives.

  The supervisory officer, as well as all others who have contact with the officer—whether at the scene or at a later point, should attempt to be reassuring and supportive without being unrealistic. At all times, they should act in a manner that reflects an understanding of the potential stress the officer may be experiencing. Phrases such as “I know that everything will be fine” or “I know things will work out perfectly” should be avoided. It is preferable to indicate support for the officer and a willingness to help in whatever way possible.

  At this early stage, the officer’s fears of the short- or long-term consequences of his or her actions—such as potential civil or even criminal charges or a protracted internal investigation—may fuel his or her fears and anxieties. Investigations of officer-involved shootings can be one of the more stress-provoking activities following such an incident. Officers will be removed from duty and their firearms taken from them. They may also be isolated from fellow officers and family for a lengthy period during interrogation and may be informed of their “rights” much like those whom they arrest. Investigation of officer-involved shootings is essential. However, officers involved in these situations are acutely aware of how they are perceived, and the manner in which such investigations are

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1 Please refer to the IACP Model Policy on Investigation of Officer-Involved Shootings.
conducted can heightened or diminish feelings of alienation and isolation. Complete and professional investigations of officer-involved shootings can be conducted while also showing consideration for an officer’s well-being.

With this in mind, the model policy provides several recommendations. For example, only minimal preliminary questions should be asked about the incident in the period just following the shooting. The officer should be informed that a more detailed agency briefing will be conducted by the agency’s administration and will cover what happened during the shooting. This is different than the debriefing conducted by a QMHP. The investigation process should be discussed with the officer at this time so that he or she will not later feel singled out for scrutiny. At the same time, the officer should be made aware this is standard procedure and does not necessarily mean he or she is charged with a crime or violation of agency regulations or that his or her fitness for duty is questioned.

When the officer’s firearm is taken for evidentiary purposes, it should be replaced with a similar weapon he or she is qualified to use. Unless the officer is being relieved of duty on charges or concerns regarding fitness for duty, there is little justification for confiscating the officer’s duty weapon without replacing it.

**B. Impact**

At some point in the process, the emotional impact of the situation is experienced. The adrenaline “high” wears off, and the officer typically experiences an emotional and physical letdown. This impact phase usually occurs within three days of the incident although some officers experience a delayed reaction ranging from six months to a year or more after the incident. During this phase, the officer confronts feelings of vulnerability and mortality. Generally, the more vulnerable the officer felt during the incident, the greater the emotional impact of the situation. Feelings of vulnerability often stem from a perceived lack of control over the incident.

Officers may experience many kinds of reactions during this phase that, although normal, may make some feel they are losing emotional control. Some of the more common reactions an officer may experience include the following:

- Heightened sense of danger/vulnerability
- Fear and anxiety about future encounters
- Anger/rage/blaming
- Nightmares
- Flashbacks/intrusive thoughts of the incident (repeated disturbing memories)
- Sleep difficulties (disturbing dreams)
- Feeling future will be cut short
- Depression
- Triggers (situational reminders)

- Guilt/sorrow/remorse
- Emotional numbing
- Isolation and emotional withdrawal from others
- Sexual difficulties
- Stress reactions (e.g., headaches, indigestion, muscle aches, insomnia, diarrhea, constipation)
- Anxiety reactions (e.g., difficulty concentrating, excessive worry, irritability, nervousness)
- Feelings of loss of control
- Grinding of teeth

Department provided training in this area will help officers realize that these are normal reactions to an abnormal situation, not signs of mental illness.

**C. Acceptance Resolution**

The next phase, which in most cases starts soon after the emotional impact hits, is the acceptance or coping phase. At this stage an officer begins understanding, working through, and coming to grips with the emotional impact of the situation. The emotional intensity tends to wax and wane over time, often peaking after about two weeks, and then decreasing. There is often much introspection during this time, and the officer may mentally recreate the incident, repeatedly wondering if he or she made the correct decision, took the correct action, or if there was anything else that could have been done. If the officer allows himself or herself to work through the emotional impact, and does not try to suppress or deny it, he or she will normally come to accept the incident without inordinate guilt or anguish.

The acceptance resolution phase is usually achieved within two to ten weeks, but may take longer depending on the incident, the legal and/or administrative aftermath, the amount of peer and family support, and the officer’s coping skills. Once achieved, the officer understands and accepts what happened. There may still be occasional nightmares, flashbacks, and anxiety, particularly those triggered by situational reminders while on the job. Follow-up contact by the QMHP and peer support personnel is important to catch any problems the officer may be having after the initial interview is done. This contact should occur two weeks and again one month after the officer-involved shooting incident. Contact around the one-year anniversary date may serve as a reminder that help is still available.

The officer who is returning to a healthy and balanced emotional state comes to understand these and other underlying emotions and is capable of dealing constructively with them. With proper support and coping skills, the officer may even become stronger.

However, some officers do not progress normally along this path to emotional stability and get “stuck” going through the trauma process. Supervisors should be aware of some of the signs of this inability to deal effectively with
the incident. They include the following:

- Continuation and intensification of post-incident (impact phase) symptoms
- Excessive stress and anxiety reactions
- Increased obsession with the incident
- Increased absenteeism, burnout, and decreased productivity
- Increased anger and irritability
- Overreaction or being overaggressive
- Risk taking
- Increase in family/relationship problems
- Alcohol/drug abuse
- Inordinate amount of focus on critical comments made by coworkers
- Uncertainty, suspiciousness, poor problem solving
- Poor attention/decisions
- Overreaction or being overaggressive

If an officer who has been in a shooting develops a pattern of work problems, such as repetitive excessive use of force that he or she did not exhibit before the incident, it may be a sign of trauma. It is important to be able to recognize these problems and be prepared to refer the officer to an appropriate QMHP for assistance rather than merely administer discipline. This resource should be offered by the agency, and the QMHP should be familiar with law enforcement and officer-involved shootings.

Not all officers experience a serious or even moderate traumatic reaction after a shooting. This does not suggest they are insensitive or uncaring individuals. There are typically several reasons why these officers are relatively unaffected or have strong emotional control. First, they are typically mentally prepared for the potentiality of an officer-involved shooting. They have anticipated what can happen, thought it through, and accepted the reality of what they might have to face and the actions they may be required to perform. Second, some officers are also better able to maintain an objective, detached point of view and accept the reality of police work and the police role. Thirdly, they may have accessed support prior to the shooting, or they may have talked to peer support team members or QMHPs when they were having difficulties. This coping skill can make a difference when an officer is faced with handling the aftermath of a shooting. Fourth, as a result of coming to grips and working through feelings of vulnerability resulting from previous involvement in high-risk situations, an officer may experience little emotional reaction after a shooting. After successfully working through one incident, it is often easier to go through another. On the other hand, if emotional reactions from a previous incident have been suppressed rather than resolved, a subsequent incident becomes more difficult to deal with. Officers who have a traumatic reaction and suppress their emotions may develop long-term emotional problems, such as PTSD or ASD.

III. STRESS AND THE INVESTIGATIVE PROCESS

The investigation of any law enforcement use of deadly force is essential. Difficult questions must be asked and answers found. However, the stress of the administrative, investigative, and legal processes following the incident can compound the stress of a shooting. It is not unusual for the officer to perceive that he or she is being treated like a suspect and is being abandoned by the agency. As noted earlier, the officer’s handgun is usually confiscated, giving the message that he or she did something wrong or is now untrustworthy to carry a firearm. They may be read their rights and isolated from other officers until they can be interviewed or interrogated. Suddenly, there is the perception that they are the prime suspect in a homicide investigation. Most ranking administrators avoid contacting the officer for fear of giving the impression that the agency supports his or her actions, leaving the officer with the feeling that the people for whom he or she works do not care. To add to the stress and finalize the officer’s loneliness, he or she is placed on leave, pending completion of the investigation. Mandatory leave may imply to other officers and the public that the officer was wrong or at least under serious suspicion of wrongdoing. If the officer has not experienced emotional trauma as a result of the incident itself, it is possible it will be precipitated by such actions of the agency. Another consequence of such treatment is potential alienation from and distrust of the agency, often long after the incident has been resolved in favor of the officer. This can spread throughout the agency, and, in the next shooting incident, the officers involved may not want to talk to investigators or at least have a very bad impression of the agency and management. It is paramount that this mandatory leave is explained to everyone and that it does not constitute a disciplinary action.

Although the process described is appropriate and necessary, it is not necessary to subject an officer to insensitive, unsupportive, or impersonal treatment. There are many constructive actions that can be taken and procedures that should be followed to avert or minimize an officer’s stress that will not interfere with or compromise the investigative process. The model policy recommends agencies take the following actions in this regard during the days and weeks following the incident.

A. Post-Incident Procedures

Law enforcement agencies, recognizing the impact the investigative process can have on officers, should make every effort to complete the investigation as quickly
as possible. This is not to suggest the agency should rush to judgment, but it should do all that is possible to expeditiously yet professionally gather the necessary information to decide whether the shooting incident was lawful and within departmental policy. As soon as available, that decision should be made known to the officer and the public.

1. **Removal from duty.** The officer should be placed on mandatory leave pending counseling by an agency-designated QMHP. This mental health intervention should be a compulsory requirement to be completed as soon as reasonably possible. The mandated requirement for this intervention will remove much of the stigma encountered when consulting with a QMHP, and speculation from those who may question the officer’s emotional well-being. The QMHP should advise the agency if and when the officer should be returned to duty. These services should be provided by the agency and conducted by QMHPs who are familiar with the law enforcement culture and have experience dealing with officers who have been involved in shootings.

In addition to the required administrative leave, provision for additional leave should be made if deemed necessary by the QMHP. Unless there is a compelling reason to the contrary, the affected officer should be returned to his or her regular assignment after the mandatory leave. However, if circumstances of the incident dictate, it may be best to keep the officer off the street until the shooting has been resolved, that is, until after the investigation has been concluded or findings of a grand jury, coroner, or district attorney have been made public.

Depending on the officer and the circumstances involved, it may also be preferable to gradually return the officer to his or her normal duty assignment. In this as in other aspects of post-shooting procedures, there is need for some flexibility. Not all officers react in the same fashion to similar circumstances, and agency administrators need to be able to work with individual officers in shaping appropriate responses to best meet their mutual needs and responsibilities.

2. **Family/Relationship counseling.** The model policy also recommends law enforcement agencies offer to provide the family of the officer with advice and guidance. The officer’s family plays a significant role as an emotional anchor during crises and can be instrumental for emotional readjustment. Agencies can help the officer’s family to understand and appreciate the significance and potential impact of the officer’s experience. These services can also make family members or significant others aware of the symptoms of PTSD and ASD and their role in providing support to the officer during the period of emotional accommodation and adjustment. It is also necessary to help family and significant others deal with their own stress created by the incident. Many family members and significant others simply do not know what to expect and why specific agency procedures are necessary. Therefore, the law enforcement agency should ensure family members and significant others are kept informed and provided the opportunity to clarify any of their questions or resolve misgivings.

3. **Managing information.** The law enforcement agency should be sensitive to the need to manage information concerning the incident to the greatest degree possible. News statements should provide as much information about the incident as possible without being prematurely judgmental or compromising the legal and personal considerations of the officer. As is generally the case, it is best if the law enforcement agency provides the media with all information that can be released. In this manner there is greater likelihood that news stories will match the facts as they are known, rather than being based on speculation or secondhand information that may act as a disservice to all concerned and potentially complicate swift and fair completion of the investigation.

If the officer’s name is released to the media, he or she should be advised the press may attempt to contact him or her for a statement. As noted, such statements from any officer should be prohibited unless authorized by the agency, and inquiries should be referred to the designated agency spokesperson. The officer should also be prohibited from referring to the incident in social media venues, such as Facebook or Twitter. The officer should be advised to have telephone calls at home answered by others.

In order to reduce rumors and speculation from within the law enforcement agency as well, all officers should be provided with factual information surrounding the incident as soon as possible. This will also serve to reduce the incidence of individual officers making often well-intentioned but potentially annoying repetitive inquiries of the officer. Peer support or companion officers can help prevent the “Monday morning quarterbacking” that takes place by coworkers after an officer-involved shooting.

4. **Administrative support.** Often during post-shooting situations, particularly during the investigative process, supervisors and administrators avoid making any supportive comments to officers for fear their comments may be construed as official endorsements of the officers’ actions. While this is often understandable, a failure to interact with the officer and to discuss the incident often gives him or her the impression that he or she is being labeled as a pariah. It is important that involved officers receive some indication of concern from the agency administration. It is possible to show compassion and
concern for the officer’s situation and feelings without commenting officially on the propriety of his or her actions in the incident in question. The important point here is that the officer not be allowed to feel he or she has been abandoned by the agency in a time of need. Such an impression can greatly enhance feelings of guilt, isolation, and apprehension and, as previously indicated, form long-lasting negative impressions about the agency’s administration and its concern for employees.

B. Stress Recognition and Training

The model policy points out that supervisory personnel are in the best position to identify officers under their supervision who may be suffering from some form of PTSD or ASD. As noted, traumatic stress disorders may develop in relation to a wide variety of incidents, some of which may not become apparent to the law enforcement agency in any official capacity. In officer-involved shootings, law enforcement officers may attempt to hide such symptoms from fellow officers and supervisors for fear that it will be perceived as a personal weakness, adversely affect their performance review, or result in an unwanted fitness-for-duty appraisal.

Supervisory personnel, therefore, must be aware of the potential for such traumatic reactions in an officer-involved shooting and be in a position to order the officer involved to seek assistance or counseling if it is believed that his or her job performance is being affected. On a broader scale, all police personnel must be aware of the potential for traumatic reactions and be prepared to seek assistance for themselves or recommend aid for a fellow officer who they believe is affected in this manner. In order for officers to be capable of making such judgments, their law enforcement agencies and immediate supervisors should provide the training necessary to make them knowledgeable about PTSD, ASD, and the agency’s policy and procedures for prevention and treatment of adverse reactions after an officer-involved shooting.