



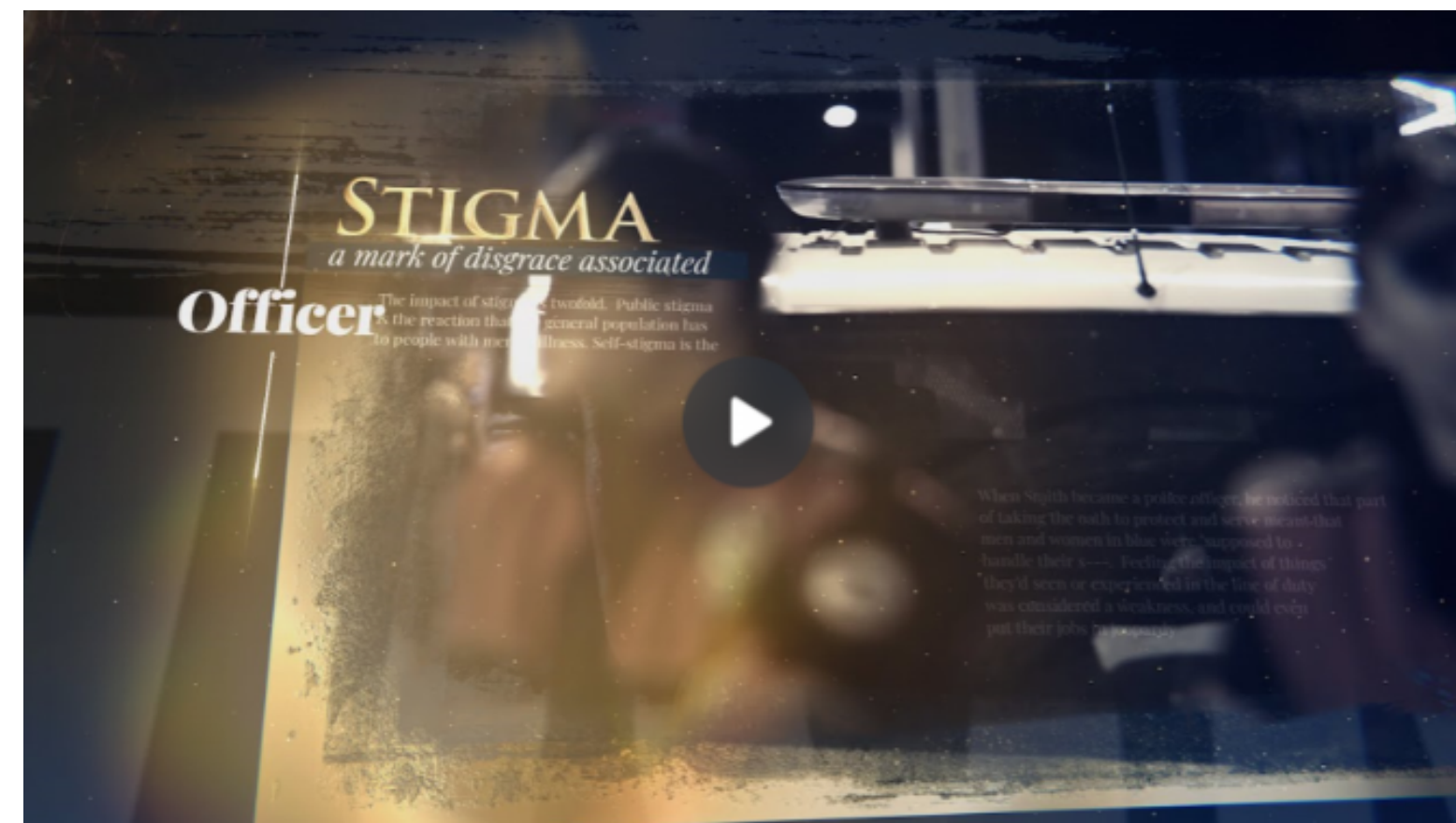
WE **6**VE GOT YOUR SIX

A six-part series discussing officer health and wellness



WE'VE GOT
6 YOUR SIX

Part One: Stigma





Creating a Foundation of Wellness

By Brandon Cassinelli

If you polled peers and researchers about what is effective in the field of first responder mental health, you are bound to get a myriad of responses. Some will tout the latest and greatest theory on community policing as the only way to bridge public servant/public served cultural gaps. Others will simply toss out a veritable beehive of buzzwords and phrases.

“Resilience!” They’ll cry.

“Postvention is where it’s at. We are responders after all, it’s just what we know.”

“No, it’s all about prevention. Get to the heart of the culture and be competent before disaster strikes.”

But the truth is: there is no one answer to the multivariate and generations long issues in officer wellness.

I was teaching a Crisis Intervention Team class a few weeks back when I realized how parallel the topics of dealing with community wellness and law enforcement wellness really are. One of the dispatchers in the class—a little frustrated with our frequent answer of “Well. . . it depends” when she asked us to provide concrete, simple answers to complex calls for service—had a great way to describe this parallel: “There’s this little bit of black and white on each end, and so much gray in the middle!” I could not have said it better myself.

Being fixers at heart, we become quite frustrated in the midst of a disaster when we have no all-encompassing, all-comforting single solution. This frustration only grows in us when we realize meaningful change takes time and humility, and that once in a while we sadly don’t get to be the agents of positive change. In psychotherapy, much like in policing, we are faced with selling not only the solution, but the purpose behind our very professions themselves. As I like to say to clients and partners, “Something that took 30 years to put in place is not going to be fixed with three visits using the Employee Assistance Program.”

Embracing this multifaceted and multi-year approach to things is how the Reno Police Department’s wellness programs have really been able to come to fruition. At baseline, we need to challenge culture. We just do. Having grown up in a law enforcement household where my father, two uncles, myself, and a brother all became cops, I had no shortage of fascination with seeing how the profession has changed over the last 50 years (my dad started in 1975 at the wise old age of 19).

However, it was only within the last four years or so that we have seen a real internal shift in mindset at Reno PD concerning mental health.

Prior to 2018, Reno PD made various efforts to improve wellness—most of these in physical health—by partnering with community agencies who specialized in offerings for first responders. LEO-based ground defense systems and classes, meal preparation programs aimed at healthier, more sustainable, and evidence-based diets, a collaboration with Robb Wolf (the author of The Paleo Diet), and tuition reimbursement for gym memberships were all great springboard components. We recognized the carcinogenic effects of stress and cortisol on our bodies and minds (especially for our shift workers), so we established an in-house gym, a partnership with a local medical provider to track health metrics, and a place for employees to catch up on much-needed sleep.

In 2019, three years after having lost my brother to alcohol, I obtained my degree in marriage and family therapy. I was fortunate enough to be able to collaborate with Chief of Police Jason Soto and City of Reno Mayor Hilary Schieve on a position that was specifically designed to see to that all-too-neglected aspect of policing: mental health. Harkening back to culture, I cannot stress enough how deeply crucial it is to have buy-in from police executives and jurisdictional officials alike when introducing new (or changing outdated) ideas on mental health.

Leaning heavily on other passionate members in our department, community agencies specializing in first responder mental health, and a statewide, grassroots non-profit called The Nevada Peer Support Network, Reno PD has incorporated numerous programs in a thankfully short amount of time. Our Peer Support Team, by design, consists of differing ranks of officers, dispatchers, victim advocates, civilian support staff, and even retirees. The consolidation of this diverse group of people has extended our reach to often overlooked professional groups who also struggle with mental health issues and has proven to be invaluable when conducting Critical Incident Stress Decompressions. Building these decompressions into an overall reintegration program—inspired by the Edmonton Police Services—allows officers to return to work in a more holistic and healthier manner. In addition to participating in these decompressions, officers are also assigned peer counselors and given generous flexibility in leave time. To provide a more comprehensive view of their choices and to normalize their emotional responses, officers have the opportunity to return to the scenes of their trauma with a counselor and a senior member of the department who has survived and thrived despite a similar experience of their own in the lifetime of their career.

In looking to the community to bolster our officers’ opportunities to not only heal, but also reaffirm their belief in a populace that still deeply supports them, we have partnered with numerous local mental health providers and organizations. At present, we share over 35 clinicians with The Nevada Peer Support Network who have been vetted as culturally competent and willing to accept both our insurance and our injured souls. The establishment of first responder-focused intensive outpatient programs, a first responder Alcoholics Anonymous group, and close relations with fitting residential treatment facilities has proven to be crucial for those moments when one of our brave partners makes the equally courageous decision to finally ask for help.

Somewhere between the brilliant capability we expect of our first responders daily and the dark places we allow them to arrive at after years or decades of trauma lives a reasonable and absolutely necessary compassionate mindset that must be pivoted toward if we wish to save the noble heart of the policing profession. After all, those three big “Rs” are haunting us every day: Recruitment is abysmal nationwide, retention is faring no better, and retirements have never been so high. To anyone reading this article—whether you are a trooper working daily with your boots on the ground, a supervisor of your valiant people, a police executive, a city official, or even a politician—if you take nothing else away from this brief article, please let it be this: we can no longer afford not to evolve our ways of thinking, our means of treating, and our being truthful with ourselves about what needs to happen next.

About the Author: Brandon Cassinelli is a fifth generation Nevadan and a Reno native. Hailing from a law enforcement family, he began his career with the Reno Police Department in 2007. In 2015, while still working with the department, he earned his bachelor’s degree in human development and family studies from the University of Nevada, followed by his master’s in marriage and family therapy and an internship as a counselor with Nevada state in 2019. His current position with Reno PD is directed toward reducing the stigma surrounding first responders’ engagement with mental health services and community behavioral health project management. To practice his own mental health, when he isn’t working, he enjoys writing, narrating audiobooks, reading philosophy, and woodworking.



WE'VE GOT
6 YOUR SIX

Part Two: Physical Fitness



WE'VE GOT YOUR SIX
A RMIN SIX PART SPECIAL PUBLICATION
PART TWO: PHYSICAL FITNESS



WE'VE GOT
6 YOUR SIX



Building Resiliency and Conquering the Job

By Frank Voce

I have always felt called to give back to my community. I started helping others at a young age and when I was a teenager, I achieved the rank of Eagle Scout and was a Congers Volunteer Firefighter. In 2014, I graduated from SUNY Cortland with a bachelor's degree in Criminology. While awaiting acceptance into the police academy, I became a certified personal trainer so that I could help others reach their fitness goals. In 2015, I graduated from the academy in New York and embarked on my career as a police officer. I spent two and a half years patrolling the streets of the South Bronx before transferring departments.

In 2018, I experienced an unexpected mental health crisis that changed everything. Between 2015 and 2018, I did not think a police officer could be sober. My drinking began as "normal" social drinking on the weekends. I would go out with the boys after a shift for a few cold ones, sometimes staying out until three or four o'clock in the morning. I did not see anything wrong with my drinking for a long time. It was what young people in their twenties, especially young cops, would do. Drinking culture is practically threaded into the career of law enforcement officers. I felt invincible and totally in control, until my drinking started to interfere with my life, my relationships, and my personal happiness. I failed to realize that I was not in control at all. My ego was at the wheel and fear was riding shotgun. I was afraid of being judged by my coworkers, by others in the weight room, and even by friends and family. To mask my fear, I turned to alcohol.

On September 22, 2019, I finally surrendered and reached out for help. That was the last time I had a drink. I eventually came to realize that I was the only person judging me. No one else cared how much I drank, lifted in the gym, or how many arrests I made. I was the judge, jury, and executioner. We as humans, especially cops, are so hard on ourselves. We believe we are supposed to make perfect decisions every second of every minute of every day. I learned that having compassion for myself as an officer was the way to become a better one. I truly believe that once we accept that we are not perfect and that it is okay to be human and make mistakes, we are one step closer to being better officers. It will serve us both on and off the job to allow our decisions to be learning experiences.

With proper support, my mental health began to improve and even exceeded where it had been. I can think, act, react, listen, and be aware in ways I was not able to before. The myth that a cop cannot have a career and live sober is now a relic of the past. I give people so much credit for being sober and facing their problems head on, rather than masking them with drinking. Head strong can take on anyone, and it shows.

Another key component in my recovery was fitness, not only for my body, but for my mind and my emotions. Studies have shown that exercise can help alleviate depression, decrease stress, and improve anxiety disorders. Although the effects may be temporary, something as simple as taking a brisk walk can deliver several hours of relief, similar to taking an aspirin for a headache. I started lifting weights in high school to put on muscle and look good, but as my journey continued, I realized I was really doing it for my emotional health, confidence, and as a mood booster.

I am not saying you have to be a pro bodybuilder or MMA fighter, but it is important for officers to be fit. We need to be able to effectively perform CPR, drag someone to safety from a fire or out of a wrecked car, chase an offender with a gun, or fight off an attack that came out of nowhere for absolutely no reason. Exercise will help us physically perform those tasks, as well as help us manage the stress and emotional toll they take. Remember, this is for your health and wellbeing, so choose an exercise that you enjoy doing!

Through recovery, I once again felt the call to help others, only this time it was specifically to help other first responders who struggled the same way I did. I sought to provide a space for them to face their anxiety, depression, and addictions, so in 2020, the non-profit Reps for Responders was born. The Reps for Responders mission is to help others be the better version of themselves, one day at a time. Our services aim to support the mental health and wellbeing of first responders through fitness, nutrition, and wellness sponsorships, recovery coaching, and weekly support meetings.

As police officers, if we are not focusing on our health and wellbeing, we are doing ourselves a disservice. Our thoughts will better serve us and will lead to better decision making, which creates healthier habits and increased self-confidence. We can then really show up for ourselves and those around us whom we care about. I refuse to be another statistic or suffer in silence. Sober living gives me the opportunity to break the cycle, because I know I am powerless to alcohol. I have surrendered, but I have not quit. If you can relate, know that you are not alone. Reach out!

In 2021, Reps for Responders:

 27 Provided 27 fitness sponsorships	 13 Provided 13 health & nutrition coaching sponsorships
 53 Provided 53 mental health resiliency skills & peer support sponsorships	 10 Hosted 10 community outreach events

About the Author: Frank Voce graduated from the police academy in 2015. After battling his own personal struggles, he was inspired to create a safe space for other first responders to face their anxiety, depression, or addiction. From that calling, Reps for Responders was born. Frank currently works in the Health and Wellness Section of the New York Police Department. He is also a recovery coach, Eagle Scout, assistant varsity football coach, and a first place Brazilian Jiu Jitsu and CrossFit competitor. He has been sober from alcohol since 2019.





WE'VE GOT
6 YOUR SIX

Part Three: Mental Health





Protect the Body and the Mind

By Rachel Korenblit

An officer arrives for his first day on the job and announces, “I will not be wearing a bulletproof vest! Most cops never get into a gunfight. Plus, I am excellent at dodging bullets.” How would you respond?

Even on the off chance that he is right about never taking a bullet or having a reason to draw his weapon during his career, in this profession, he is a target for bullets. For that reason, he must be prepared and take steps to ensure his safety.

Now consider this: an officer states, “I do not need to talk to someone. I am tough as nails and do not get affected by the stress and trauma. It’s just what we do and part of the job. It is not like every cop develops PTSD.”

In fact, there is a chance he is correct in that he might never have a post traumatic response that leads to Post Traumatic Stress Disorder (PTSD), but the job still exposes him to stress, grueling schedules, moral distress, politics, red tape, drama, trauma, and scrutiny via the court of public opinion.

Because of the dangerous nature of the job, wearing a bulletproof vest is a necessity. In the same way that officers need to wear a vest to stay safe, they also need tools to ensure they maintain their mental health.

Officers constantly put their bodies and minds at risk to help others, but rarely look to others for help coping with their stress. There is a misconception among law enforcement that if this work “gets to you,” you are not meant for it. It feels okay to complain about it or drink over it, but to actually experience feelings (other than variations of anger) about it means you might be “too soft.” For better or for worse, the work done on the force requires that you “toughen up.” It is hard to do your job when you are bogged down by your emotional responses. There is no room to be shaken by everyone’s personal trauma you respond to. So, in order to manage, you tune out these warning signals until you achieve a level of numbness; like turning down the volume of the tornado siren to become the calm in the storm. However, the defenses you employ that keep you safe in the field often work unapproved overtime and can easily spill over into your personal life. We have

normalized so many symptoms of police work: sleeplessness, hyper-vigilance, detachment, isolation, drinking, strained personal relationships, risk-taking behaviors. “It’s all normal,” we think. “No need to worry.” But “normal” does not mean healthy.

Why should you wait for there to be a “problem” or crisis to examine your health? Why wait for burnout, an alcohol-related incident, a positive tox screen, a suspension, a spouse’s ultimatum, a public panic attack, or a suicide attempt to reach out? Would you wait for your car to breakdown to consider getting it serviced? It can be dangerous to deactivate the dashboard warning lights at the risk of missing vital warning signs.

Due to the nature of the field, most of law enforcement operates on a reactive model, but prevention and maintenance are vital in staying mentally fit for the job and yourself. Instead of stuffing things down and moving on, it is important to face what arises head-on in real time.

During the winter, exposed pipes can quickly freeze in cold climates. As a result, the water may freeze in the pipes and the expanding ice can eventually cause the pipe to burst. An effective prevention method is to leave the water running at a trickle—the constant movement keeps the water flowing, preventing it from turning to ice.

In law enforcement, you are exposed to high levels of stress and trauma. When you do not express what you are experiencing, the stress builds up inside of you, sometimes to a point when you can no longer contain it. Too often, we only become aware of this buildup when it becomes a “problem.” A moment of rage, a panic attack, displacing an emotion on a loved one, feeling disconnected, unable to get out of bed, experiencing physical aches and pains, taking more medication than prescribed, drinking more often to settle—these are all signs the pipe is about to burst. When the job pushes you to be “above” normal, human responses, it is easy to let stress build up. In other words, it is crucial to process stress as you experience it to prevent accumulation.

As an officer, you signed up for a job that you knew in advance would be stressful in order to help others. Should there not be someone there to help you cope with your stress? There are resources that can help alleviate the stress that inherently comes along with the job.

When you install an exposed pipe in a cold climate, you should expect to take steps to mitigate the possible damages. When you embark on a profession that exposes you to danger, you wear a vest and arm yourself. And, when you embark on a profession that exposes you to extreme stress, it’s necessary to make a conscious effort to upkeep your mental health.

About the Author: Rachel Korenblit, LCSW is a trauma therapist for first responders in New Jersey. She leads a team of clinicians treating NJ first responders in recovery from substance and alcohol use and facilitates Warrior Talk, a national virtual support group for military and first responders. In her spare time, Rachel attends Seton Hall University School of Law with the hopes of enhancing policy to promote and protect first responders seeking mental health treatment. As an advocate for improving and maintaining mental wellness, Rachel herself is in therapy.



Common Questions About Therapy

What can I do for my mental health?

- Take care of yourself physically. Your body and your mind have a symbiotic relationship, each fueling the other and sharing messages with each other. When you keep your body healthy, you unburden yourself of the messages sent from your brain to your body, and you quiet the chatter your body is sending to your brain.
- Speak to someone who “gets it,” whether they are in the field or not. Make sure to have people in your life you can share with, vent to, and rely on for support. There are many support groups for first responders that you may find helpful. You can even attend some virtually and wait to turn your camera on when you begin to feel comfortable.
- Establish a relationship with a therapist

How do I find a therapist?

At times, finding the right therapist can be like dating. The first one is not always the right fit. Some prefer to see a therapist with experience or expertise working with first responders because they are familiar with the culture, and not much can shock them. For most, it is important that they feel understood and safe in their sessions. It's a good idea to ask a potential therapist for a free consultation so that you can get a feel for their style. Where can you find a therapist:

- By asking someone you trust for a recommendation
- Therapist databases (e.g., psychologytoday.com)
- A google search for someone in your geographic area
- Reach out to a first responder wellness advocate - they probably have therapists they've worked with or referred people to
- Call your insurance to ask for someone in your network

What kind of techniques should I look for?

There are many schools of thought out there, but at the end of the day, the technique is only as good as the therapist utilizing it. It's most important to look for the therapist behind the method. You can ask a therapist what their approach is in a consultation and see if it is something you feel comfortable with.

What should I talk about in therapy?

There is no “supposed to” in therapy. You can use your session in whatever way works for you. You can process past events, explore your relationships, process recent events, target habits you'd like to change, learn more about how you tick, improve communication, air your grievances, and more. It is mostly someone you can confide in and a place to let out your thoughts and feelings.

Will my department penalize me for being in therapy?

This is a common question I receive. Here are some important points:

- Some employers encourage their employees to be in therapy
- If you seek out treatment on your own, your therapist cannot disclose that you are being treated, let alone the details, without your express consent. One of the only exceptions is that, like cops, therapists are mandated reporters. They have a duty to warn if your life is actively in danger, if you are endangering someone else's life, or if there are clear signs of child or elder abuse (each state regulation differs slightly).
- Being in therapy can be a point in your favor if, in the future, you're faced with a fit-for-duty evaluation
- Insurance companies legally cannot share your health information with your employer
- There are potential legal protection options. Under the ADA, it is illegal to fire someone merely because they have a disability. FMLA can provide qualified employees with protected leave. If you take time off for treatment, be sure to comply with the FMLA guidelines. It is illegal for an employer to interfere with or retaliate against an employee's entitled protected leave. Take a closer look at ADA and FMLA if they are of concern, and be sure to speak to your delegate, supervisor, or EAP, and seek legal guidance.



Do I need a problem to go to therapy?

I see all sorts of normal people in therapy. The healthiest of people are those in therapy. When speaking through what's on your mind, you become more aware of yourself and those around you.

How often do I need to see a therapist?

I'd suggest you start seeing your therapist weekly and continue to meet regularly at an interval decided on with your therapist. If you are no longer meeting regularly, keep therapy on standby and check-in or increase session frequency when something comes up.

When is a good time to check-in with my therapist?

It might be a good time to set up a session when you notice a change in any of your habits: such as eating, sleeping, or alcohol consumption. If you feel more frustrated or agitated than usual, feel your motivation waning, or if you're unsure how to approach a specific communication/relationship hurdle. If you feel conflicted with a new directive, worked a scene that throws you off or sticks with you, or simply want to share your thoughts, setting up a session can help.

What about the stigma?

Many officers are afraid of the judgment they might face if they go to therapy. One of the only ways to change the stigma is to defy it. We need to smash the stigma from the top down and the bottom up. Try therapy for yourself and normalize it. If you're in leadership and in therapy, consider being open about it.

Mental Health Resources for Law Enforcement

SAMHSA – Substance Abuse and Mental Health Services Administration
<https://www.samhsa.gov/dtac/disaster-responders>

Blue Help
<https://bluehelp.org/about-us/v>

Reps for Responders
<https://repsforresponders.org/>

Live Another Day
<https://liveanotherday.org/resources/first-responders/>

NAMI - National Alliance of Mental Illness
<https://www.nami.org/Your-Journey/Frontline-Professionals/Public-Safety-Professionals>

First Responders Wellness Center
<https://www.firstresponderswellnesscenter.com/resources/>

(AZ) Freedom Care Military and First Responder Program
<https://valleyhospital-phoenix.com/programs/military/>

(CO) Badge2Badge Support Group Meetings
<https://www.badge2badge.com/>





WE'VE GOT
6 YOUR SIX

Part Four: Substance Abuse





Recognizing Substance Abuse and Embracing Treatment

By Rachel Korenblit

Addiction is nondiscriminatory; it can happen to anyone. There are many people in your very organization who are suffering from the weight of abuse and addiction. They look just like you and work among you. Some appear to be functional, and some are hardly holding it together. Some of them are aware of their condition, and some are still unaware of its depths.

It is important to note that officers who abuse substances or develop addictions are not doing so out of moral failings or weakness of character. The law enforcement community is exposed to an exorbitant amount of stress and are not provided with adequate tools and resources to properly process it. Officers are taught to be on guard, but not how to wind down before going home; how to deal with a crisis, but not how to process the traumatic residue; and how to help a person in crisis, but not where to find help for themselves. Statistically, police officers are three times as likely to develop an addiction than the average person.¹ From my experience working

with this population, I dare say this number is an underestimation. Too many officers I have worked with during their recovery from substance abuse have been told by colleagues, “I was certain it would be me before you.”

Substances provide relief in a seemingly effortless way. Some substances, like alcohol, have a sedating effect, which slows the messaging between your brain and body. It diminishes the body’s ability to communicate tension, pain, and other discomfort to the brain and the brain’s ability to communicate discomfort and stored stress to the body. Due to this, alcohol gives the impression of quieting the mind and calming the body, but really it is just masking the stress. Other substances, like opiates, block pain and cause feelings of euphoria while others, like amphetamines, lead to feelings of pleasure and energy.

There are many reasons an officer will use substances and subsequently develop a substance use disorder. One of the most significant reasons is self-medication. Law enforcement officers frequently turn to alcohol and drugs to deal with insomnia, stress, hypervigilance, exposure to trauma, and feelings of anxiety or depression. There are also biological factors that make

some predetermined to substance abuse and addiction more than others. This can cause substance use to quickly spiral out of control into abuse. Additionally, social factors, such as police culture, can lead to an increase in substance use.

In policing, drinking is an honorable pastime and way of bonding with co-workers. Union and police association meetings are hosted at bars and alcohol is used as an incentive to encourage attendance at department functions. Many officers enter the academy while their brains are still developing, join the force after discharging from the military, or apply straight out of college. They enter a culture, modeled by peers and leadership alike, that endorses a specific “work hard, play hard” lifestyle. In a 2007 study, 37.6% of the surveyed officers reported at least one problem drinking behavior, and one of the leading factors identified was drinking to “fit in” with their peers.² Law enforcement is an insular community by design and default. Most officers spend 25% to 75% of their time with other officers outside of work. This perpetuates the culture and also limits accessed resources.

The way in which a department treats individuals who receive treatment sends a significant message to the individual and the rest of the organization. They may shame those who seek treatment, treat them with distrust, forbid others from reaching out to them, or attempt to terminate them, which sends a discouraging message to anyone else considering seeking help. It is a failure of the system when an officer says, “I wish I never asked for help.” Departments should consult with mental health professionals, fit-for-duty experts, and attorneys to create a protocol that encourages officers to reach out for help and protects their rights.

If you are in a leadership position, do not turn a blind eye and wait for someone to fall on their face. If you see someone clearly struggling, see if they are open to help. Try to educate yourself on possible resources in case there is an opening. If you must remove an officer’s gun and badge, do it in private and have the process completed by a compassionate worker. Remember all officers will face challenges and have their own issues. When you have officers who have attended treatment and are aware of their challenges, you have healthy workers. Officers in recovery can become some of the best in the department because healthy, self-aware officers make effective and compassionate employees.

Prevention Methods

- Check in with your coworkers and employees and show genuine interest when asking how they are. You would be surprised at how much people reveal to us if we actually listen.
- It is a good idea to have regular trainings on selfcare and resiliency. Be sure the trainings and workshops are presented in a way that engages the staff to attend.
- Shift away from the drinking culture. You do not have to host only dry events but ensure events do not revolve around drinking. If you are hosting a gathering, branch out and purchase some interesting non-alcoholic beverages as well. If you notice someone is not drinking at a gathering, respect their boundaries by not pushing them to drink or questioning why they are not drinking. If you have the urge to, maybe ask yourself why it makes you so uncomfortable to see them without a drink.

Resources:

1. Police On-Duty Drug Use: A Theoretical and Descriptive Examination, 1988
2. (Lindsay, V., & Shelley, K. (2009). Social and stress-related influences of police officers’ alcohol consumption. *Journal of Police and Criminal Psychology*, 24, 8–92.)

About the Author: Rachel Korenblit, LCSW is a trauma therapist for first responders in New Jersey. She leads a team of clinicians treating NJ first responders in recovery from substance and alcohol use and facilitates Warrior Talk, a national virtual support group for military and first responders. In her spare time, Rachel attends Seton Hall University School of Law with the hopes of enhancing policy to promote and protect first responders seeking mental health treatment. As an advocate for improving and maintaining mental wellness, Rachel herself is in therapy.





WE'VE GOT
6 YOUR SIX

Part Five: Financial Wellness





Wellness and Your Wallet

By Tech Tan

Mental, physical, and spiritual health are all commonly discussed aspects of wellness, but one aspect that is often overlooked is financial wellness. This may be because talking about one's finances is considered taboo, especially in the workplace. Financial wellness is defined as a person's overall financial health and the absence of money-related stress.

While on duty in my patrol vehicle one night, I stumbled upon a famous radio talk show host and financial expert that has written multiple books on how to be financially free. At this point in my life, I was young in my career, a newlywed with a child on the way, and had no financial plan. I would pay my bills and have nothing left. While we were never in dire straits financially, my wife and I would often find ourselves asking, "Where did all our money go?" (Now with multiple children, we often ask, "Where did all our time go?" But that is a different topic altogether.) Many think this is just how it has always been. While that may be true, it does not have to be.

There are many different financial "gurus" out there and I have listened to enough of them to know that they all agree on one thing: debt is bad. It is the one determinate factor in whether or not you can achieve financial wellness, as it negates the sole wealth-building tool that all working Americans have – our income.

All too often, people tend to get a little loose with their money and end up getting themselves into serious debt. Our urge to spend money on things we do not need seems to be innate and is fueled by television and the internet. Advertisers tell us success is measured through possessions like a better-than-average car or a fancy boat. We work overtime and second jobs to supplement our incomes and lifestyles all because we over-extend our finances on things we feel are necessities. A phrase that is often thrown around to justify bad spending habits is "You only live once." This is true, but it is also true that growing old is a fact of life, and we should give credence to the idea of living our best lives now without creating stress on our finances later.

Getting into debt is no fault of our own. It is not as if financial wellness is a required course in school – although it should be. Dealing with finances is usually learned through observing others make financial mistakes, making our own mistakes, and/or taught to us by our parents. It is important to learn how to control your money early in life, as life is finite and so is your income. How we choose to use the money we make in the present becomes crucial in our future.

Becoming financially well takes time and patience. You will have to budget strategically and forgo wants to achieve your financial goals. Uncertainty around finances and a lack of security for the future can cause stress that impacts your physical, mental, and emotional health. Putting in the work to become financially well will impact much more than just your wallet; it can give you peace of mind knowing that you are financially ready for whatever life throws at you.

As the financial guru says, "Financial wellness is when you take control of your money so that it doesn't take control of you."

SUGGESTED STEPS FOR FINANCIAL WELLNESS

1

Save \$1000 for an Emergency Fund

Create an emergency fund that maintains a balance of \$1000. It may not seem like a whole lot, but when an unexpected emergency occurs, it will really come in handy. If an emergency occurs and you must use the money, be sure to replenish the funds as soon as you are able.

3

Save Three to Six Months of Expenses

Calculate the total of your monthly expenses, including rent or mortgage, car payments, utilities, food, etc. and set aside enough money to cover three to six months' worth of these expenses. This will provide you with a robust safety net in case of an emergency or unexpected job loss. These savings will be your new emergency fund.

5

Start a College Fund

Start a college fund for your children, if applicable. A college fund, such as a 529 college savings plan, is similar to a retirement account and allows you to invest for your child's tuition costs. In the United States, the average student loan debt totals \$37,172 and takes approximately 19-and-a-half years to pay off. Student loans place individuals in debt before they even have a chance to start their career. Starting a college fund as soon as a child is born can help them enter their adulthood financially well.

7

Give

The last step to achieving financial wellness is giving. This is possibly the most rewarding of all the steps because once you've reached this point, it allows you the ability to give more to yourself and those around you. By this point, you should be completely debt free and have extra money to use as you see fit. Giving back financially to those around you can be a rewarding experience.

2

Pay Off Debts from Lowest to Highest

List all your debts in order from lowest to highest dollar amount (disregard the interest rates). This includes credit cards, vehicle loans, student loans, personal loans, etc. – everything except your mortgage, if applicable. Then, begin to pay off the lowest dollar amount, while making minimum payments on the other debts. As each debt gets paid, the extra money should be used to pay off the next highest bill until all debts are paid. When you pay off a debt, you may feel a sense of achievement, which incentivizes you to keep going until you are completely debt free.

4

Invest 15% of Your Income for Retirement

Invest in yourself and in your future by placing 15% of your income into a retirement savings account and allow the magic of compound interest to help you build wealth. Retirement accounts, which invest your money into a diversified portfolio, allow you to build wealth quickly and, hopefully, provide you with enough funds when it comes time to retire.

6

Pay Off Your Home

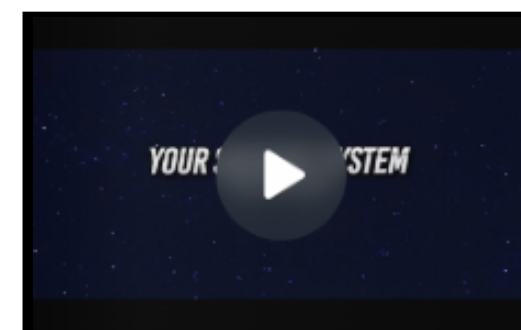
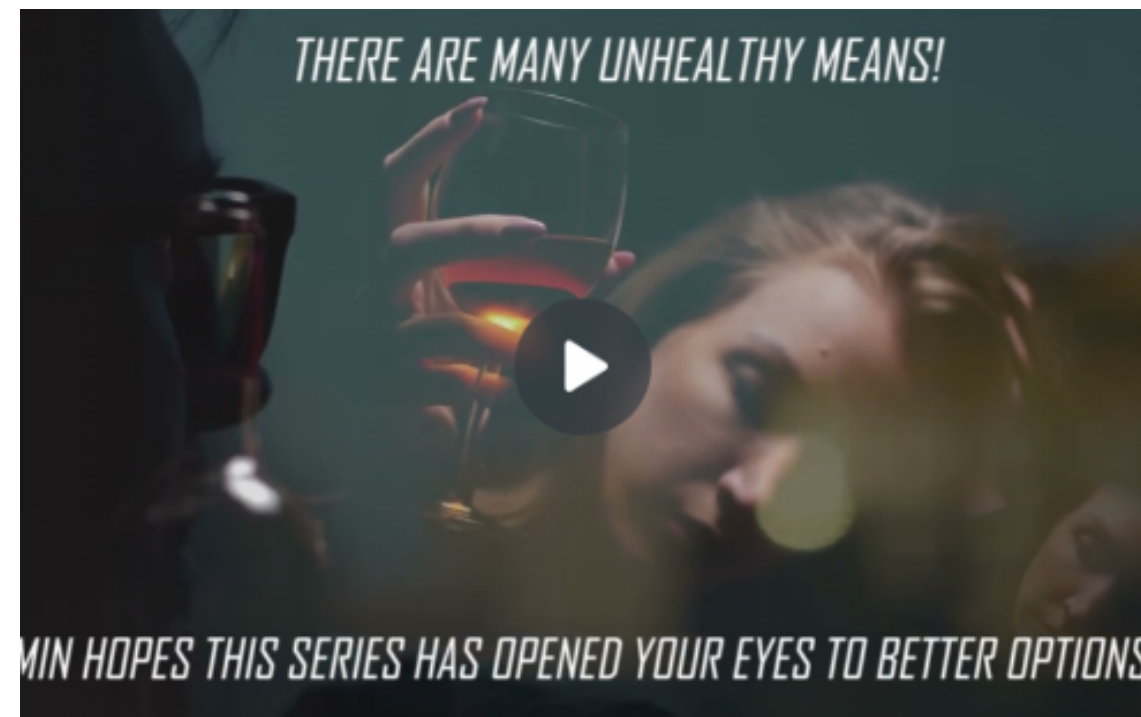
A mortgage is typically the biggest debt a person has. Now that you have an emergency fund, all your debt paid off, and a plan in place for your retirement and your children's futures, it is time to start paying off the mortgage. Apply your available funds towards the principal of your home loan to pay it down faster. Paying off your mortgage early can help you avoid foreclosure and the repercussions of a financial recession or collapse (remember the 2008 housing market crash?).



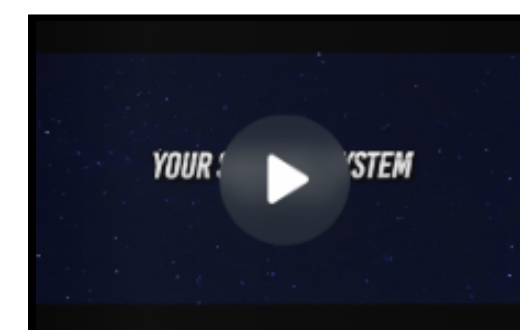


WE'VE GOT
6 YOUR SIX

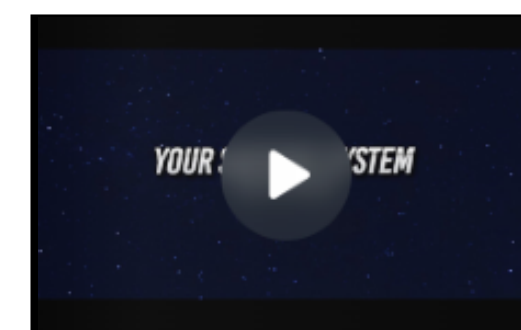
Part Six: Support Systems



Former Officer Reflects on Surviving Gunshot



Retired Trooper Thrives After Major Accident



Officer Overcomes Depression and Addiction



Your Support System Matters

Taking care of your physical, mental, and financial health does not have to be a solo journey. In fact, it is more beneficial to have a strong support system to help you reach your wellness goals. Due to the stressful nature of the job, law enforcement officers are encouraged to have a support system both at work and at home.

At work, agencies can provide support to officers through programs and policies such as wellness programs, peer support programs, and critical incident debriefings. When an officer encounters trauma on the job or is injured in the line of duty, the support they receive from their department can be invaluable to their recovery. At home, the love and support from friends and family can help influence and motivate an officer to prioritize their wellbeing.

A beneficial support system may include:

- A social circle to ease feelings of loneliness and isolation and provide healthy distractions
- A network of people you can turn to when you need help
- Knowing others will check on your wellbeing
- Having positive influences who encourage you to pursue healthy behaviors
- An advocate to provide you with resources and help you connect with a professional

Having a solid support system as a spouse or family member of a law enforcement officer is also important, as the stress of the job reverberates beyond just the officer. Tammy Cain and Miriam Murphy are the wives of former law enforcement officers whose lives were nearly lost in the line of duty. Below, read their firsthand accounts of how they were impacted by the critical incidents.

Facing Trauma Together

April 17, 2022 was the 17-year anniversary of the day Phil almost lost his life while responding to a domestic violence call in Orem.

At the beginning of our marriage, I decided the only way I could stay sane would be to never allow myself to think about the dangers Phil faced when he walked out the door to go to work. I can't tell you how many times I watched as he strapped on his bullet proof vest, donned his uniform, and attached his duty belt—equipped with his gun and all the standard police equipment; never once imagining that very weapon would be the gun the offender would use to shoot my husband.

I always told myself, "Nothing will ever happen to him..."

I consider myself a "peripheral victim" of Phil's shooting. By that, I mean I wasn't personally at the crime scene, and I obviously wasn't the person who was shot, but my family and I (and now others) continue to experience the aftereffects from that day. It is all due to the poor choices and actions of the man who shot my husband.

When the offender was released from prison in November 2018, my biggest fear was that he hadn't learned to control his anger. If he lost his temper, would he get into an altercation and hurt or murder innocent people? Would the police be called? If so, would he resist and fight with officers? Would he injure or try to kill them just as he did with Phil? By doing so, would he end up losing his own life in the process?

When you're the recipient, or "peripheral victim," of a violent crime, you feel some semblance of peace knowing that the perpetrator is locked up and can't hurt you anymore. However, when that person gets released from prison, you no longer have the peace of mind in knowing where they are and what they are doing. Unless you or a loved one have experienced an act of violence, you have no idea how helpless and terrifying it can be. I refuse to live my life in fear. I have chosen to love and cherish every moment of the 17 additional years I've been blessed to be with Phil.

I honor, respect, and salute our men and women in Blue. Thank you for your service. Thank you for your sacrifices. Thank you for being willing to work 365 days per year, 24/7, early mornings, swings, and graveyard shifts. Thank you for doing a job that doesn't pay well and requires many of you to work part time jobs to survive. Thank you for being first responders to some of the most horrific and tragic situations that no one should have to witness. Thank you for doing a job that sometimes doesn't earn you the respect and gratitude you deserve; where you are scrutinized and critiqued repeatedly for having to make split-second, life or death decisions. Until those who criticize and condemn you walk a mile in your shoes, they will never know what it's like to be a cop. May God bless and keep you safe!





The Trooper's Wife

I met Roger in May of 1994 on a blind date. He lived in Payson, working as a police officer, and I lived in Phoenix. We fell head over heels in love and were completely enamored with each other. Later that same year, I moved to Payson, and we got married.

I was so in love that I was still oblivious to the danger that our law enforcement officers take on. Much of the time that Roger was working on the road, he was working alone in areas where help could take 15 to 45 minutes to arrive. In some places, he would have little to no radio reception to call for help. I secretly began to worry. I never brought it up or talked about it because this was his career. He was out there helping people. How could I be so selfish as to mention my worried and concerned thoughts?

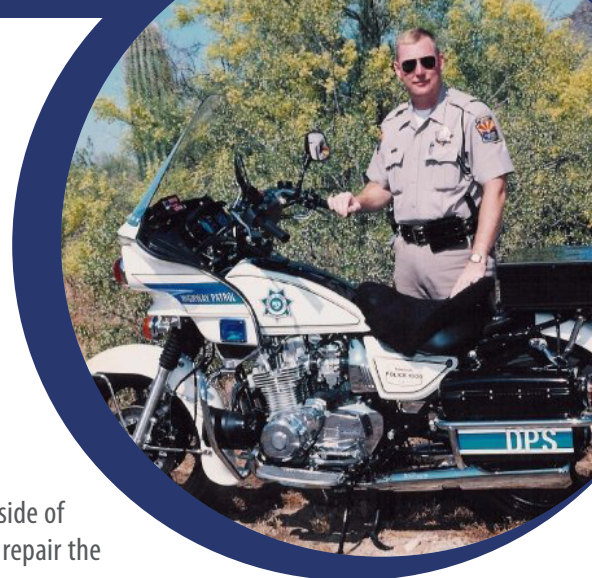
We moved to Phoenix in 1998 and Roger became a motor officer. I have to say I was somewhat relieved that he would be working in the Metro area and would never be alone. His motor squad worked the same hours, so he always had other troopers around him. I thought this was the relief I was looking for and just didn't know it.

By this time, I was working a normal 8 to 5 kind of job while Roger worked nights. I took the kids to daycare every morning and they were in bed before he got off work. I was functioning as a single parent. I still did not share my thoughts or feelings with anyone, and I did not realize how much emotion I was holding in or the level of exhaustion I was going through. This was our life – I signed up for this. He is helping people. Right?

Then September 23, 1999 happened. It seemed like a normal day – I took the kids to the sitter and went to work. After, I went to pick the kids back up, but as I was loading them into the car, the sitter and her husband told me to come back inside and call Roger's sergeant. I did not think much of it, as they were telling me to call his sergeant from back in Payson. I figured word had spread that Roger had been in an accident a few days before (his motor was tapped by another driver) and that his old sergeant was just calling to check in on him.

Instead of calling his old sergeant, I decided to call dispatch. To my surprise, when I told them that I was Trooper Cain's wife, they put me on hold! When someone finally came back on the line, they told me Roger had been in an accident, and they were flying his parents down from Payson.

My world stopped. Everything started to move slowly. I was put on hold again. A different person came on the line and told me they were sending someone to pick me up. I was still not grasping the entire situation, and I just wanted to know where he was!



The Trooper

Officer down! Or, in my case, motor down! No one wants to hear either.

I had it easy, so to speak, as I do not remember being struck by a van on the Phoenix freeway during the evening rush. I was in the middle of performing a traffic stop when I was struck by another driver who had suffered an epileptic seizure and lost consciousness with their foot still on the gas. I was hit by the right side of the van, went through the windshield, flew approximately 100 ft, and fell back down into traffic.

I sustained a large avulsion on the left side of my head, my ear was partially torn off, I had multiple breaks and fractures throughout the left side of my body. I was on a ventilator for two days in the ICU and spent four weeks in the hospital. I've had approximately 25 surgical procedures to repair the damage. I spent three months in a wheelchair and 18+ months in physical therapy. Due to my injuries, I had to medically retire.

My goal was to make it back to the road and get back on the motor! It was not until the last month or so that I realized I had to retire. The realization hit hardest when my wife and I sat before the retirement board and heard the words "We thank you for your service - go down to HR and turn in your gear." Even though we had mentally prepared for this day over the past few months, the words still hit you in your gut.



Early on in my relationship with my wife, I told her that if anything were to happen to me the agency would send someone to our door to pick her up. They will not call on the phone or, if they do, they will not provide much detail. By telling her this, I hoped I would help her prepare for that day. Being prepared is extremely critical. Discussing the "what if's" with your family and having a financial plan will help them sustain and will greatly reduce the stress involved. Many of us, me included, never think about or expect to be involved in a critical incident, let alone be killed in the line of duty. I sure wish we had prepared better.

During my recovery, many asked how I kept a smile on my face. My response was always that it could have been much worse. I was not going to let the situation beat me! Even now, when the physical pain sneaks in, I do not dwell on the past. I just keep driving on and I remind myself: things could always be worse.

About the Authors:

Tammy Cain has 24 years of experience working as a law enforcement dispatcher. She joined the Gilbert Police Department in 2002 and previously worked with the Payson Police Department. Before getting into the law enforcement field, she worked in technology as a Computer Network Engineer.

Roger Cain is the Operations Manager and a Certified Forensic Video Analyst with the Rocky Mountain Information Network (RMIN). He is a retired trooper with the Arizona Department of Public Safety and a critical incident survivor. During his career he was a DRE instructor, FTO, Motor Officer, Peer Support Team Manager, and has been involved with law enforcement as a sworn officer or civilian for more than 37 years.

