

# **ERIC WICK**

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Welcome to this edition of the Silicon Valley Fraternal Order of Police Lodge 52 Resource Guides, a platform dedicated to addressing law enforcement issues and the health and well-being of our members and their families. In this episode, your host,

*Victoria Napolitano* will speak with Eric Wick from Swords to Plowshares. Founded in 1974, Swords to Plowshares is a community-based, not-for-profit organization that provides comprehensive services to all veterans and first responders in the San Francisco Bay Area. Swords to Plowshares promotes and protects the rights of veterans and first responders through advocacy, public education, and partnerships with local, state, and national entities. So let's join the conversation with your host, Victoria Napolitano, and her guest, *Eric Wick*.



Transcript:

Podcast Transcript: Addressing the Veteran and First Responder Suicide Epidemic\*\*

Victoria Napolitano: Well, thank you for joining me today, Eric Wick. I am excited to talk to you. How's it going?

Eric Wick: So far so good. I'm excited to be here. And thank you for — I know you're a busy man, and you have a lot going on, so I really appreciate your time. So we're gonna start off us learning about you. Well, back in the '80s, I served in the United States Marine Corps. The reasons I'm so excited to be here: My father was an FBI agent for 30 years and a San Jose police officer for five.

Victoria Napolitano: Oh, incredible.

**Eric Wick:** Growing up, all of my quote-unquote uncles, near as I could tell, I had like 300 of them. Every single one of them were like a badge or carried federal credentials or something like that. I almost didn't know any adults who weren't first responders of some sort. So, even though my life took a different trajectory, I've got a soft spot in my heart for the community. Since I got this job, there's just nothing I won't do to address the issues that are going unaddressed. A few years back, Congress broke off about \$140 million for the Staff Sergeant Gordon Parker Fox Suicide Prevention Grant. And basically, what they did is they said, "Look, what we're doing isn't working. Here's a big pile of money. Veterans Administration, you would administer it, but you let people in the community figure out how to do this."

My organization, Swords to Plowshares, which at the time I was working at as a peer specialist, they just said, "Okay, we're doing it." We're already doing it anyway. Swords to Plowshares has been around for 50 years. Essentially, we've encountered and addressed every veteran issue we've faced, and we're one of the best. We've got six supportive housing sites in San Francisco. We've got two drop-in centers. We've got mental health staff, plus all the case management and everything else we need to take care of whatever problem a veteran may have, whether it's with legal issues with the VA or Department of Defense or getting into permanent supportive housing or fiduciary services, say they can't take care of their own bills anymore. We're there for 'em. To me, it's something I could put my whole heart into. Taking care of my brothers and sisters, none of whom are doing very well. Frankly, if you're a Swords to Plowshares client, you're in trouble. It just gives me purpose every morning. So I get up and I can't wait to come to work.



**Victoria Napolitano:** And you know firsthand, because of your background, how many different things can happen to a veteran or an FBI or a police officer. You know the behind the scenes.

**Eric Wick:** Well, I speak both languages. Yeah, I never walked the beat and I don't claim to, but the fact is I've heard every story. You know, I used to sit there and when I was — of course, every little boy wants to be like his dad, but I realized when I was in the Corps that maybe this probably wouldn't be a good idea. My dad, awesome man, he never brought any of the job stress home with him. In that sense, it was really extraordinary. Had a great family, great family life, great childhood, loved every minute of it. You know, when other kids are throwing the baseball around in the backyard with dad, well, back in the seventies, the FBI didn't have the, you know, teams of forensic technicians that went out and took care of crime scenes. If you're an FBI agent, you did it yourself. My dad taught me how to process a crime scene when I was a little boy.

Victoria Napolitano: That would be fun.

**Eric Wick:** Oh, yeah. I mean, I loved it. But also, Dad was in the business to help other people. And that was honestly a main focus in his passion. I mean, yeah, putting away bad guys is basically the job, but he was there to help. I realized after my time in the Marine Corps that, "Hey, wait a minute, I'm basically a tame killer." I don't think I've got the reflexes "to really do this job, not do it properly." 'Cause I mean, Dad set the bar super high. I just didn't feel that that was a direction I could go even before I left the Corps.

I have a problem with the militarization of police as far as them dressing like soldiers. I mean, I understand tactically, you have to do what you have to do. I have zero problem with that. I joined the Marine Corps during the Cold War because I never wanted to see a government using military force, especially my government, using military force against my fellow citizen. I've got a serious problem with that.

Victoria Napolitano: I agree with you.

**Eric Wick:** So when I saw the direction things were going, especially in the late '80s when I was in the Marine Corps, it's like, "Wait a minute, they're dressing these guys up and basically, you know, surplus military gear with surplus light armored vehicles, the whole nine yards." I don't think the cop business is what it used to be.



Victoria Napolitano: You mean in the 1980s or now? 'Cause it's completely different.

**Eric Wick**: Oh yeah, absolutely. I mean, in the '80s it was different from when Dad started in the '60s. The cop was the poor guy who got sent out to the call, and he just had to deal with it, whatever it was. And usually it was by himself. You're out there in the community helping people. You have a certain level of respect. It's not universal, obviously. Back then, a police officer was a respectable thing. Nowadays, people talk about defunding the police and you are the problem. And their reflexive response is that, "Oh, you're a jack-booted thug, or you're profiling, or you're this, or you're that." What person in their right mind would want to pin on a badge in this environment where the presumption is you're guilty of being a racist thug? It breaks my heart, which is part of why I do this. You know, yeah, my company's a veterans service company as part of my suicide prevention program. Yes, we take care of veterans of the two highest risk subdemographics of veterans right now. And one of them, the risk is so high we don't even know for sure; although arguably, you could say it about all of — Uh, is first responders. At least 25% of first responders are veterans.

**Victoria Napolitano:** True. I remember working with a lot of retired military. I don't know if you're supposed to say retired or, um, it depends.

Eric Wick: Cause I know Marines always say a Marine, so you don't say retired. It's a Marine.

**Victoria Napolitano**: Because I worked with a lot of Marines. I worked with a lot of Army, tons of guys like that. And like you said, there's a difference because again if you're a military person, you're in there to fight. When you're an officer, you have to either fight or protect.

**Eric Wick**: Yes, and that's where I think you come in, where the stressors are, because as an officer myself before I retired, you go into a scene, and you already know people hate you, and you're trying to help at the same time.

**Victoria Napolitano**: Exactly. So what do you see as the reasons why people are stressed as suicidal when they come to you as a first responder?

**Eric Wick:** Fundamentally speaking, with veterans and first responders, you've got the exact same, frankly, called an epidemic of suicidal ideation. And of course, it crosses all demographics. When you look at the statistics, just general psychology for the general population at large, about 4% of the population actually has serious suicidal ideation. I mean, that's a small number.

Victoria Napolitano: It is very small.

**Eric Wick:** Well, one half of 1% will actually attempt suicide, and then 0.1% will succeed. Now, you think, okay, 0 .01%. Yeah, I mean, statistically speaking, that's not much, right? Well, it's 50 ,000 people a year. And what sets veterans and first responders apart is that we all know how to kill people. Even the guys that were in the Navy and the Air Force, they have familiarization training, they know which end of the gun, the bullet comes out. And when one of us decides to take our lives, we usually succeed. –

**Victoria Napolitano:** Understood. Now, is that because you have an out, let's just say you weren't in the military or anything and you're a citizen, you're less likely, and I'm asking you this, you're less likely to have a gun 'cause I don't know how many households have guns in America, but let's just say a low percentage, I don't know, but they don't have access and most people aren't going to jump off a building or slit their wrists. Is there anything so as a military person or officer, you have that right there in front of you? Do you think that's the difference?

Eric Wick: 75% of veteran suicides are by firearm.

Victoria Napolitano: Okay, terrible.

**Eric Wick:** Exactly. And when civilians shoot themselves, it's not—it's only about 70-80% lethal. With us, it's almost always lethal. We just don't miss if you understand what to do.

**Victoria Napolitano:** Exactly, you know, okay. Well, if I just put the gun under my chin and pull the trigger, I'll blow my eyeball out and knock out my teeth, but I won't kill myself. So it's got to be angled back a little bit more. That's a level of knowledge that sets us apart from the general population. And of course, none of us wants to make things worse by waking up in the hospital without a face later.



Eric Wick: No, we're going to do it right the first time.

Victoria Napolitano: You're right. You're not going to make any mistakes because it's almost, I hate to say, you'd be embarrassed too.

Eric Wick: Yes, because once you take that leap, it's all games over, right?

Victoria Napolitano: Exactly. And, you know, with some of them, there's a lot of interesting sub-statistics. We could literally be here for days talking about some of this stuff. But especially where you've got service members exposed to extremely high levels of noise, repeated almost like mini concussions from exposure to gunfire, cannon fire, main guns on tanks, jet noise, big guns on Navy ships, that sort of thing. There's cumulative damage in your brain. And one of the symptoms of that is suicidal ideation. And this is a thing I hate to point it out, but I also love to point it out because it's the thing that especially first responders and veterans need to hear. Yeah, the damage is cumulative, yet it takes a decade or better to show up from the data that we have at the moment. But once you get that suicidal ideation, it never actually goes away. What only ever changes is your ability to cope.

**Eric Wick:** There was one particular case, a career Navy SEAL. He had actually kind of retired at that point. He had a wife, he had kids, severe suicidal ideation, severe PTSD, basically the whole complex suite of traumas that, you know, veterans with repeated combat deployments get. And in the end, he wound up taking his own life. The thing is, he pointed his pistol at his heart and left his wife a note saying, "Make sure the VA gets my brain."

Victoria Napolitano: Oh, so research?

**Eric Wick:** Yes. And this guy, he could not take it. Now, this is a career Navy SEAL, literally one of the top tier special operations guys. He wasn't just in and out; he did it for his career. Anybody who thinks they're tougher than him or more disciplined than him is just freaking delusional. You know, it's like, oh, okay, so you think that you're tougher than a Navy SEAL.

Victoria Napolitano: Right.



**Eric Wick:** No, you're not. If this guy can succumb to suicidal ideation, guess what? You're vulnerable too. Either have it or you don't; most of us don't. The thing is, with this, this isn't like the cold where we have a little thing and then we get over it. If this plays out the way it could, we're gonna die to the scars on you forever. That's how I look at scars.

**Victoria Napolitano:** So your opinion is, so we could look at this way and I'm just gonna be kind of blunt about it, if he knew he was going to do it, and then the back of his mind, he thought, "I'm doing it either way," would it have been interesting to have him talk to a psychologist or a therapist to get as much information while he was alive? And I know that sounds kind of bleak, but maybe he could have given them insight before he did it. Do you think that would have helped any, or would he be able to put that in words? Because it's ingrained into his body somehow.

**Eric Wick:** That's actually an excellent question. He was receiving care. A lot of veterans are; they're engaging with mental health. I mean, when you get right down to it, about a third of people who die by suicide are actually engaging with mental health within a year of the act. Twenty percent of them— a little bit less, 19-something percent—actually engaged with mental health in the month prior to their death by suicide. And what that indicates is that number one, they are in the system; number two, even if the question is being asked, they're not taking it seriously, or they're asking it wrong.

# Victoria Napolitano: Correct.

**Eric Wick:** And it actually goes to things we can talk about a little later when going over exactly what I do. If you ask the question wrong, they're just going to either one answer you in a way that doesn't answer the question because they're telling you what they think you want to hear, or they're just going to flat out lie. Like they've said before in interviews, you're asking the wrong question, and I think they would—they have the wrong paradigm. They're thinking of saving the person when in the mind of the person, it's already too late—so the question should be different than trying to save them; it should be why.

Victoria Napolitano: Well, it's people who are in a suicidal crisis. I mean, just to back it up a bit, suicidal ideation isn't another self-lethal.

**Eric Wick:** Right. Looking at the statistics I mentioned earlier, only 0.01% of the population actually dies by suicide. And while 4% actually have serious suicidal ideation, the difference is in the coping skills that they learn. Most of it usually evens itself out. And luckily, most people lack the skill or the knowledge to



actually successfully kill themselves. Ninety percent of the people who attempt suicide don't go on to die by suicide.

**Victoria Napolitano:** Yes, the risk is low as a general statistical proposition. Again, we're talking about veterans and first responders; in this population, the risk is far higher than it is above the general population, and it's, to a certain extent, unknown. The statistics that we do have come from the Veterans Administration, but they only engage with about half of veterans. So it's an incomplete data set. We only know compared to the general population with the ones that the VA has eyes on. We have no idea how many other veterans have taken their lives that we don't know about because they're not accounted for by the VA. With the first responders, it's even worse. And this is what got me into this gig and going at it full throttle the way I do.

**Eric Wick:** With first responders, data collection is haphazard at best. It's department by department, organization by organization, state by state. There's an institutional interest in not really wanting to share that data for a variety of reasons. You don't want the rank and file to think you don't care, but at the same time, you know, is this something, an image of the department that we want out there? Is this going to make it worse? You know, that's one of the enduring myths about suicide is that if you talk about it, they'll do it. That's not true.

# Victoria Napolitano: No.

**Eric Wick:** And you should always ask. That's because I've worked eight years in suicide and crisis. And one of the things is sometimes asking will break that mindset, get them back to reality just by you saying it and acknowledging it.

Victoria Napolitano: So we're going to get into what you're doing that your job now is to you're including first responders with veterans.

**Victoria Napolitano:** Yes, correct. So let's divide up how you approach a veteran as opposed to a first responder if someone's going to come into your office or talk to you. Is there a different approach or do you handle it differently?



**Eric Wick:** Well, usually they don't engage with me in the office. We've got the two drop-in centers and we got outreach teams. They'll engage with one of my colleagues out in the field. I teach them to deal with it. That said, I've passed out over 2,500 business cards of mine. Veterans see the Eagle Globe and anchor on my business card. They know I'm a Marine, so they call me. And in the last calendar year, I've had 14 crisis calls where I talked to a veteran down out of a suicidal crisis. I know your average first responder probably saves 14 lives before his first coffee break, but to me, I'm absurdly proud of that.

Victoria Napolitano: I would be very proud of that and that they felt safe to call you.

**Eric Wick:** Exactly, you know, that's why I led every veteran and every first responder. And by the way, when it comes to asking for help, if you think veterans are bad, they got nothing on first responders.

Victoria Napolitano: We're pretty secretive.

**Eric Wick:** Well, yeah, and also psychologically speaking, this goes to the difference between military service and first responder service. We all wear the uniform. We all serve our country. As far as I'm concerned, if you wear a police uniform, you are my brother because you're serving my country right here, right now, where people need it most. The thing is, when you join the military and anybody who says they're thinking of this differently is either stupid or they don't really understand what they're doing. You don't join the military to help people. Humanitarian missions are the exception, not the rule. The function of the Department of Defense and every sub-department within is to kill people and break things to preserve our nation. We don't have a secondary function. Anything else, it may be incidental to the mission, but we're really bad at it. So we try not to do that sort of thing. Find the enemy, destroy the enemy, impose United States policy, and everybody goes home.

# Victoria Napolitano: One job!

**Eric Wick:** Exactly. Somebody who puts on a police uniform or the fire department uniform or becomes an EMT, those people are there, they take that job just like my dad. And that's why this hits me so hard and why I go so hard after, you know, the first responder community as well as other sub-demographics. You took that job to help people, not to kick ass, not to do artillery or big guns or anything else like that. You're there to help people. You're taking these cumulative traumas that pile up just like they do on us in the military. When it happens to us in the military, it happens on the other side of the world. What



happened to you happened down the street. You get to see it, you know, twice a week when you drive to yoga or, you know, whatever.

**Victoria Napolitano:** Interesting. Because almost like you're on foreign soil, that's not your home. So you won't have to think of, well, you think about what happened, but you could come back and that's not where you live. But a first responder, that's where you live or you associate with.

**Eric Wick:** Well, with veterans, especially the ones, you know, who did extensive tours in Iraq and Afghanistan with, you know, the roadside bombs and the new age military experience, none of that happened to me while I was in the Marine Corps. The thing is they came back with a different set of reflexes that they just can't turn off and that's just plain old battlemind. And so of course sometimes they freak out when they see a cardboard box on the side of the road or you know things like that. The thing is eventually you can kind of downshift from that. The DOD does make some mistakes. I understand why they do. They've got a different focus. Organizationally, it goes anything that may be traumatic that a veteran may need to deal with once they separate from the services, the VA's problem, not ours. I get that.

# Victoria Napolitano: Oh, terrible.

**Eric Wick:** Yeah. Well, the thing is, there's a difference. Back up until Vietnam, you've got to understand that when we went to war, it took us six months to get there in the first six months. Thereabouts, depending on where it was, we fight here, we fought other places. Right. And even in the old days, you had to walk there. So yeah, probably going to take you a few months to get wherever it was in the first place, even if it was on the, you know, the continental United States. The thing is, once you see action, you go see all the horrific things, do the horrific things you and your guys are alive at the end of it okay wars over we're good everybody's here everybody's more or less in one piece good it takes so long to get home that because you're just awaiting redeployment back to the states you're sitting in the barracks with your guys passing around some hooch and talking about what you went through with the people you went through it with you have it makes It's like a long debrief.

**Victoria Napolitano:** Exactly, it was a, yeah, maybe it's probably non-optimal, you know, from a clinical standpoint, but it works. You had a chance to decompress. And if you've got like smaller groups, like in the special operations community, they deliberately do the same thing. And it's partly 'cause the older guys know that that's exactly what you need as an operator, but also so, a lot of their function is data-driven, so instead of just having your squad leader do an after-action report, they all have to do one, so



they all sit down and they talk about it. And it keeps your head screwed on straight and allows them to do the crazy stuff they do over and over again without it taking a terrible toll.

Victoria Napolitano: I like that idea, actually.

**Eric Wick:** Well, you know, we're social creatures and we need to talk through this stuff. That's just the way it is. We can tell ourselves, "Okay, well, I'll just be stoic and suck it up." The thing is, that misses the point of stoicism. Yeah, sometimes you got to suck it up, but it also doesn't mean we can't express ourselves, that we can't help each other to get through and process the things that happen to us, that you aren't mutually exclusive. You know, in this community, and especially with first responders, because, again, they're home already. The things that happen to them happen to them here. Of course, you've also got the added psychological baggage of, well, I'm the guy who's supposed to help people. I'm not the guy who gets helped.

**Victoria Napolitano:** Right. And again, a confidentiality we spoke about before. You can't trust people. And I hate to say it, sometimes people don't know when to keep their mouth shut. So officers have learned, if I tell my sergeant or lieutenant or captain, they're going to tell someone else and then you'll be humiliated or and that's what makes people not want to talk.

**Eric Wick:** Well, absolutely. You know, source to class shares, like they said, we cover everything. If a veteran's got a problem, we cover it. The thing with the first responder community is just getting them to ask for help to begin with. They're not gonna come into our drop-in center for the simple reason that our drop-in center is full of homeless pets. So it's like, wait a minute, I'm the guy who helps these guys, I'm not the guy who needs help. So even if they are gonna walk in, they're probably not gonna stay for more than a few minutes before they walk out again. It's like, I can't do this. That's why I pass out the cards and the brochures and just say, hey, like call me, man. Just call me. We'll figure this out. We'll get whatever you need. No problem.

**Victoria Napolitano:** I like that idea. You know, if this has got to be person to person, human being to human being. I very quickly found out in my first outreach efforts, basically walking into HQ and saying, "Hey, I want to talk to the chief about suicide prevention." That's a waste of time. Number one, well, the chief's a busy man, number one, or woman, and when you get right down to it, usually I'll talk to an assistant or one of the, you know, the officer of the day. And they've got an institutional interest, and number one, not really admitting there's a problem, even when they do. But also, is the guy on patrol really going to talk to top command?



Eric Wick: Well, and also it's different, so you have to tell the employer.

**Victoria Napolitano:** Let's just say I come to you and I say, "Hey Eric, I really don't want my police department to know this. I want to talk to you about my thoughts and what's going on." How would that work?

**Eric Wick:** If you need to talk to me on the spot, then whatever you say is confidential. One of the beautiful things about working at Swords to Plowshares, we are a health care provider. Whether or not I'm a clinician doesn't make a lick of difference. I'm an employee of Swords to Plowshares, so all of your information is protected by HIPAA and I mean nobody finds out if you're a client, much less what you may or may not have said as a client.

**Victoria Napolitano:** So if I talk to you, let's just say I'm on a beach and we strike up a conversation, I get your card, but I connect with you because as you know, there has to be a connection for someone to talk to you. No matter how much you know, if you don't have a connection, there's nothing you're gonna get. What if they want to talk to you though? And I know you have to send them off to the clinicians or therapists or so forth, but what if someone said that brother talked to you? Is that possible or are you out of the barrier?

Eric Wick: Oh, I never, I never turn away a veteran. No matter what.

Victoria Napolitano: Oh, I'm so happy to hear that.

**Eric Wick:** I mean, I may not hear your phone call if it's the middle of the night. I get tired too. (laughing)

Victoria Napolitano: Come on, Superman.

Eric Wick: Yep. Well, the thing is I'm in this for my brothers and sisters.



Victoria Napolitano: I love that.

**Eric Wick:** And I don't do this for the money. I wish they paid me a whole lot more. I'll be honest about that. But the fact of the matter is I'm doing this because it's something I need to do for my brothers and sisters. And I'll keep doing it as long as I'm able.

**Victoria Napolitano:** And can you give the information for the people listening, the name of the organization, the location that possible and the website?

**Eric Wick:** Oh sure. We're Swords to Plowshares. We have a drop-in center in San Francisco at 1060 Howard Street. We have one in Oakland at 330 Franklin Street. The website is swords-2-plowshares.org. It's easy to find with a Google search. If you want to just get ahold of me, it's E-R-I-C www.spt-sf.org and we'll also have that information on sbfop52.org yes I there's nothing I won't do for my brothers if you don't want to go through the regular contact page on the website just reach out to me.

**Victoria Napolitano:** That's perfect. Because you're so easy to talk to, from the moment we met, you're just easy to talk to and I feel like that's what first responders and veterans need. They don't need someone to preach to them. They don't need someone to tell them how terrible it is to think that way. I don't need to hear that. I just need someone to listen and understand.

**Eric Wick:** Exactly, you know, been pulling together this network, you know, of veteran and first responder centric service providers around the Bay Area. If you need that extra level of care or you actually should, I'll keep it honest, I don't, don't pretend to be a clinician.

**Victoria Napolitano:** No, you've made that very clear. So, anyone listening, you've made that clear. You're a live or mentor, correct?

**Eric Wick:** Exactly. And the thing is, you might hear me in some of my lectures say things that make you think I don't think a whole lot of clinicians. And for some clinicians, that's absolutely true. But in the main, no. And there are some stellar clinicians around the Bay Area who take care of first responders and veterans specifically. Gentlemen and ladies are the best at what they do. If they're on my list of providers, it's because I not only vetted their organization to make sure they're not a scam targeting vets or first responders, but also I go and talk to their clinicians personally to make sure that, you know, the level of



care is acceptable to me for my brothers and sisters. I won't send them to you just because you got a license. That doesn't, that license means nothing to me.

**Victoria Napolitano:** I'm so glad to hear that. For substance abuse, just by way of example, a fortitude recovery down in Saratoga, it's a substance abuse place. Number one, they are literally top tier. They, nobody is better than them that I'm aware of. And I'm talking about just walking in and seeing this. I don't, I think they've got like a number two rating or something like that, but I went in and actually checked out their veteran center. They've got one inpatient facility and they have intensive outpatient facilities. And then they have a separate one for first responders. Do you happen to know that address or the name or that company? I don't know if that's confidential or not.

Eric Wick: Oh, sure. Um, what's the name and address? They're in Saratoga.

Victoria Napolitano: Oh, it's Fortitude Recovery.

**Eric Wick:** Okay. And these people care deeply about what they do. I can't say enough about it. I mean, I tell you what, just go into their inpatient facility. I wish my diet coke addiction qualified me for, you know, a short stay there. Apparently it doesn't.

Victoria Napolitano: That's funny.

Eric Wick: It's just something I got to live with.

**Victoria Napolitano:** No, I'm glad that you know firsthand. You can tell us what is good instead of, you know how sometimes you'll get a referral just because a person's friends with the, oh yeah, you can go to this place. But there's no quality or anything.

**Eric Wick:** Exactly. And part of the problem with first responders, especially it was the same thing for active-duty military. Literally the same thing you got you live in the same live work eat sleep P in the same exact community same exact small space. So if you're already having issues, you're not number one. You're not thinking clearly. But number two the psychologist's office is in plain sight, right? Oh, you're thinking well if I go in people are going to see. It doesn't matter whether you're peers because most of



them are thinking, "Oh, good. He's getting help. That's a good thing." They're not thinking, "Oh, he's weak or he's going to let us down," or whatever. Unfortunately, they can't see it that way. The way it's going on in their brain is they're going to think I'm weak. They're going to think they can't rely on me. They're going to think I'm letting them down. They're not even capable of making the rational decision about it because their brain is like in a low level crisis state. And of course, everybody can see the shrinks off. Think about it about what the first responders is actually worse. Not only are you thinking, "Okay, the guys are going to think I'm weak or they can't rely on me or that I'm this or that," this is all playing out in their head, not everybody else's, but they can't tell. And then they've got the added burden. Yeah, but you could walk in and out of places on base. And, you know, yeah, usually somebody's going to see. But when you're a first responder, you're a trained observer. All of them are trained observers. You notice everything that's out of the ordinary. Exactly. So in your head, everybody's just okay, well, I drove by the, the, the shrink's office and there was this car. So you can't go into your own community and ask for help any more than you can ask from your sergeant.

**Victoria Napolitano:** Right, I truly, with my experience, I hate to be negative. I think the biggest problem before being seen is the fact that people cannot keep a secret. That is, even though they're close-knit, there's people that are commanders that I have zero respect for because they feel like they can tell their close friends things and it's okay and you're not supposed to tell anyone if you're a commander it's supposed to be confidential so to me the fear is that person's going to tell this and I'll never go to that unit. I'll never go to you know merge or swat because they'll know that I went and got help and I think that is a downfall and I think they should end up getting in trouble. Honestly, I feel like you should be in trouble if you break someone's confidentiality.

**Eric Wick:** Yeah. And it's the same, same. It just plays out writ large in the first responder community and they're right. There is no such thing as, you know, a paramilitary or military unit that doesn't have the stigma number one. And then number two, there's, you can change all the rules you want. You can issue all the directives you want. There is going to be repercussions to your career.

# Victoria Napolitano: Yes.

**Eric Wick:** So, you know, that has to be taken into consideration, which actually kind of leads me to another point. The providers in our network, especially those who deal with first responders, just to make sure that everybody is clear on this, most of these providers are veterans or former first responders or both themselves. That's why they're so good at what they do, or at very least a significant number of their staff are. They get it and with some of them, they will even, I mean, this is America, things cost money, we all know that. But when it comes to like first responders, some of these providers have actually gone and



figured out how to bill it to something else. So command nobody within the department, even through the regular, or the department's regular insurance could possibly find out that they were getting care. That's the level of attention to detail that providers in our network give so one way or the other we're trying to get our first responders back into action number one and number two do it in a way that Doesn't torpedo their career whether in their own mind or in reality and it's usually in their mind.

Victoria Napolitano: Do you have any closing words?

**Eric Wick**: Everybody goes through it. I mean trauma is a thing. It creates physiological reactions in your brain. Hey, if you got shot in the leg, you would not hesitate to yell for the corpsman. These things that are taking place in your head are rooted in your brain. There is no shame in going to the doctor to get help. None whatsoever. And okay, I understand there are considerations with careers, the whole nine yards, I get all that, but it doesn't have to go that way. We can do this in a way that, you know, respects your confidentiality, isn't going to cost you anything, and we can get you back into action at 100%. That's all we ever wanted.

Victoria Napolitano: Well, thank you, Eric Wick. I really appreciate you taking time today. Are you open to talking again?

Eric Wick: Absolutely.

**Victoria Napolitano:** Well, this is Victoria Napolitano with Silicon Valley Fraternal Order of Police Lodge 52, and until next time.

If you or a loved one is in crisis, call the Veterans Crisis Line Dial 988, then press 1.

We're here to help.