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Law Enforcement Chaplains: A Confidential Resource

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Photo by Detective Paul Olsen, Sheboygan, Wisconsin, Police Department.

Law enforcement is one of the nation's most satisfying yet stressful professions.¹ It provides ample opportunity for personal growth, meaningful contributions to society, the accomplishment of challenging goals, and a sense of comradery and esprit de corps. However, officers experience multiple stressors daily, including the varying risks of patrol operations, natural and man-made disasters, long shifts, court appearances, and cancelled days off. On top of the emotional strain inherent in dealing with criminal activity and witnessing the pain, suffering, and trauma of their fellow humans firsthand, officers must still juggle demands of their personal lives.²

Over time, the combined impact of these measures affects an officer's psychological and physiological health. Research shows there is an alarming discrepancy between law enforcement and the general population regarding post-traumatic stress, suicidality, and the perception of seeking help.³

To further complicate matters, some wounds are spiritual in nature and are therefore much more elusive and difficult to heal. These "moral injuries" may be just as harmful to the physical and mental health of an officer as a bodily injury.⁴ They cause officers to question their tactical decision-making and abilities, which leads to feelings of guilt, frustration, shame, or failure. Moral injuries often happen after enforcing a law that goes against officers' moral values.⁵ Officers involved in use-of-force incidents that result in great bodily injury or death to another person may also experience a moral injury.⁶

Additionally, and most tragically, research indicates that officers are more prone to suicide than the members of the public whom they protect and serve.⁷ Accordingly, to raise awareness for such a pressing concern, suicide prevention in law enforcement was addressed in a presidential executive order.⁸ Unfortunately, officers' stigma of mental health clinicians, fears of being labeled unfit for duty, and lack of importance given toward mental health may have prevented those suicidal officers from seeking the help they so desperately needed.⁹

Barriers

Given the risky nature of the job, officers must have access to wellness resources to help them manage the effects of stress, trauma, and moral injury. The U.S. Department of Homeland Security requires that employees are immediately advised of available wellness resources if they were involved in or witnessed an incident involving force.¹⁰ However, not all agencies have similar policies, and officers are left to seek help on their own.

This raises the question, What barriers do officers face when seeking help? It seems that in many instances, the issue is not a lack of wellness options but rather officers' perceptions of initially seeking these resources.¹¹

Studies have identified three main barriers for seeking help: stigma, concerns about confidentiality, and occupation-specific interactions with community members who have mental disorders. A careful assessment of these barriers reveals that stigma may be the root cause, primarily because the disclosure of an officer's intentions to get help could lead their peers to perceive them as weak, unfit for duty, and/or associated with community members who display the types of mental health issues that necessitate a police response.¹²

Therefore, wellness resources that ensure confidentiality and avoid negative mental health connotations may increase the likelihood that an officer will voluntarily seek the help needed.

Chaplains

The crisis of stress-induced health issues and suicide in the law enforcement population brings to light the benefits of a confidential resource always available to officers — chaplaincy.

In addition to confidentiality, chaplains have the training and experience to aid officers at every level of their wellness needs — mind, body, and, perhaps most important, their soul. Further, given the emerging nexus between psychospirituality, resiliency, and post-traumatic stress recovery, chaplains can be a suitable segue for furthering these modalities in the policing community.¹³



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History

The term *chaplain* traces its lineage to the legendary kindness of a fourth century Roman centurion, Martin de Tours, who was renowned for using his military cloak to aid homeless beggars. His *cappa*, meaning “a hooded cloak or cape” in Latin, was extended to *capallanis* (chaplains), or “keepers of the cloak.”¹⁴

In the United States, chaplains serve in all branches of the military and a host of government institutions, including police departments, federal law enforcement agencies, prisons, and hospitals.¹⁵

The confidentiality afforded to members of the clergy dates to the early 1960s, when most states had developed a statute recognizing clergy privilege in cases where an individual sought spiritual counsel with a priest, pastor, or chaplain acting in a professional capacity.¹⁶

Most important, this privilege was acknowledged by the U.S. Supreme Court in *Trammel v. United States*: “The priest-penitent privilege recognizes the human need to disclose to a spiritual counselor, in total and absolute confidence, what are believed to be flawed acts or thoughts and to receive priestly consolation and guidance in return.”¹⁷

Qualifications

Chaplains undergo specialized and professional clinical-academic training in addition to a rigorous qualification process, including ecclesiastical endorsement, an advanced degree from an accredited seminary, and, in some cases, ordination. Those who meet these federal guidelines are considered members of the clergy.¹⁸

Benefits

A survey asking officers to rate ten wellness initiatives determined that chaplaincy services are perceived as the second-most effective.¹⁹ Chaplains provide confidential services that are free of stigma, such as spiritual care and counseling to build resiliency and heal from moral injuries.

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Confidentiality

Officers who speak to chaplains do so with the assurance that their communication is privileged (i.e., confidential) and may not be disclosed to anyone.²⁰ In fact, chaplain-officer confidentiality, also referred to as clergy-communicant confidentiality, is as protected as attorney-client, spousal, and psychotherapist-patient privileged communications.²¹

In contrast, sessions with mental health workers may be included in an officer’s permanent record.²² There are five instances in which mental health providers are limited in maintaining confidentiality and private information.

- 1) To protect the client or others from harm
- 2) To report criminal conduct
- 3) To assist with military and local criminal investigations
- 4) To provide treatment or assessment information in civil or criminal cases
- 5) To provide fitness-for-duty and psychological appraisals regarding suitability for continued employment, assignments, or promotions²³

Within a culture where trust is central to the organization’s value system, the officer is faced with the moral dilemma of seeking help from a professional who may disclose their intentions to other members of the agency. If discovered, officers “fear censure, stigmatization, ridicule, impaired career advancement, and alienation from coworkers.”²⁴

Spiritual Care

In addition to the trust gleaned from constitutionally protected conversations, chaplains ensure that officers receive their right to religion and religious rites, including spiritual care. Chaplains cater to those experiencing concerns such as relationship challenges and divorce,

family stress, anxiety, guilt, work stress, spiritual and faith-based challenges, physical health problems, depression, anger, alcohol abuse, post-traumatic stress, and suicidal ideations.²⁵

Resilience

A resilient officer utilizes multiple pathways to maintain consistent, healthy levels of physical and psychological well-being after a traumatic event.²⁶ Spirituality is one method that helps build resilience proactively (i.e., *before* an incident takes place) to counter the negative effects of law enforcement's response to critical incidents.²⁷

Numerous studies reveal a positive association between chaplaincy, spirituality, and resilience building.²⁸ Chaplains are uniquely qualified to introduce spiritual resilience practices, including prayer and meditation, to Crisis Intervention Stress Management-trained first responders. Additionally, components of building spiritual wellness and resilience include praying, attending faith-based services, participating in religious study groups, exercising, and spending time outdoors.²⁹

Help with Moral Injury and Stigma

Studies also indicate that chaplains better minister to officers experiencing or recovering from a moral injury. Moreover, spiritual services avoid the negative connotations or perceived stigma typically associated with mental health care.³⁰

Conclusion

Agencies should strongly consider making chaplains available to their officers. The assurance of trust that chaplains provide officers may decrease stigma while increasing the likelihood of a positive and voluntary interaction. Given the unique stressors of policing and barriers to seeking help, law enforcement leaders must recognize that chaplains could be one of the most suitable wellness resources available to officers during difficult times.

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Endnotes

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