

Recognizing Substance Abuse and Embracing Treatment

By Rachel Korenblit



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.

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.



**WE'VE GOT
6 YOUR SIX**

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 25-75% 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.

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.

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.)

It is a failure of the system when an officer says, “I wish I never asked for help.” Departments should create a protocol that encourages officers to reach out for help and protects their rights.

