

Functional disconnection and reconnection: an alternative strategy to stoicism in public safety personnel

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ABSTRACT

Background: North American public safety personnel (PSP; e.g., police, firefighters, paramedics) training programmes often focus on the importance of controlling emotional reactions (i.e. remaining stoic) to make sound decisions in high-stress environments. Many PSP carry avoidant coping strategies into their personal lives, however, resulting in disrupted relationships and deterioration of well-being.

Objective: We argue for an alternative perspective, *functional disconnection* and *functional reconnection* (FD/FR), that limits stoicism and avoidant coping in PSP work environments. FD/FR instead suggests that PSP can receive support and training focused on intentional and cognizant changes of the physical, emotional, mental, and spiritual aspects of their occupational roles; the same intention should be given to supporting reconnection when re-integrating into personal roles following the workday.

Conclusion: FD/FR strategies can be incorporated into clinical treatment, existing training programmes and embraced by organizational leadership to facilitate a necessary shift towards prioritizing PSP well-being.

Desconexión y reconexión funcional: Una estrategia alternativa al estoicismo en el personal de seguridad pública

Antecedentes: Los programas de capacitación del personal de seguridad pública de América del Norte (PSP, en sus siglas en inglés; por ejemplo, la policía, los bomberos, los paramédicos) a menudo se centran en la importancia de controlar las reacciones emocionales (es decir, permanecer estoico) para tomar decisiones acertadas en entornos de alto estrés. Sin embargo, muchos PSP llevan a sus vidas personales estrategias de afrontamiento evasivas, lo que da lugar a la interrupción de las relaciones y al deterioro del bienestar.

Objetivo: Sostenemos una perspectiva alternativa, la desconexión y reconexión funcional (FD/FR, en sus siglas en inglés), que limite el estoicismo y el afrontamiento evasivo en los entornos de trabajo del PSP. FD/FR sugiere, en cambio, que el PSP puede recibir apoyo y entrenamiento enfocado en cambios intencionales y conscientes de los aspectos físicos, emocionales, mentales y espirituales de sus roles ocupacionales; la misma intención debería darse al apoyo de la reconexión cuando se reintegran a los roles personales después de la jornada laboral.

Conclusión: Las estrategias de FD/FR pueden incorporarse al tratamiento clínico, a los programas de formación existentes y ser adoptadas por el liderazgo organizacional para facilitar un cambio necesario hacia la priorización del bienestar del PSP.

功能切断和重新连接：公共安全人员中坚忍的替代策略

背景: 北美公共安全人员 (PSP;例如警察, 消防员, 医护人员) 的培训计划通常侧重于控制情绪反应 (即保持坚忍) 以在高压环境中做出明智决定的重要性。但是, 许多PSP都会在个人生活中采用回避应对策略, 从而导致人际关系破坏和幸福感下降。

目的: 我们主张一种替代的观点, 即功能切断和功能重新连接 (FD/FR), 限制PSP工作环境中的坚忍和回避应对。FD/FR建议PSP可以接受职业角色身体, 情感, 心理和精神方面意图和认知改变的支持和培训;在工作日之后重新整合为个人角色时, 应该以相同的意图支持重新连接。

结论: FD/FR策略可以纳入临床治疗和现有培训计划中, 并得到组织领导的拥护, 以促进向优先考虑PSP幸福感的必要转变。

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关键词

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HIGHLIGHTS

- Functional disconnection and functional reconnection (FD/FR) is a novel way for clinicians working with PSP (e.g., police, firefighters, paramedics) to introduce intentional transition strategies between work roles and personal life, emphasizing personal connection and communication.

Exposure to disturbing, threatening, and often dangerous events is a common occurrence while working in high-risk public safety organizations (Carleton et al., 2019). Training programmes for public safety personnel in

North American settings (PSP; e.g. correctional workers, dispatchers, firefighters, paramedics, and police officers) (Oliphant, 2016) tend to focus on exposing recruits to high-stress simulated scenarios comparable to situations

encountered over the course of their occupation (Atkins & Norris, 2012). Understandably, PSP need to be able to respond quickly and accurately in high-stress circumstances and, as a result, PSP are trained in how to manage or control their physiological, emotional and cognitive reactions to stress (Adang, 2012). This ‘hardening’ encourages PSP to regulate reactions they might have when confronted with stressful circumstances, often through suppression or minimization of emotional reactions (e.g. shaking, crying, freezing).

North American public safety organizations have historically emphasized strong stoic values in their cultures, influenced by paramilitary and hierarchical structure of most agencies. Additionally, public safety organizations tend to operate in a ‘tool and task orientation’; emergency protocols follow specific guidelines, emphasizing the importance of following protocol and the ‘right’ way to complete the job. In theory and in keeping with stoic expectations, a PSP who maintains composure and sets aside personal feelings to ‘get the job done’ will produce more favourable outcomes than the PSP who is not so oriented. While stoicism in this instance is valuable, many PSP maintain a stoic stance after the shift is over. Yet PSP across Canada specifically are experiencing remarkably high rates of mental disorders (Carleton et al., 2018), suggesting that stoicism in personal circumstances may be incompatible with the maintenance of mental health.

The purpose of this article is to introduce *functional disconnection* and *reconnection* (FD/FR) as an alternative perspective to the traditional stoicism found in North American PSP agencies, in light of recent research showing wide-spread mental health problems within PSP (Carleton, Afifi, & Turner et al., 2018; Carleton et al., 2018). FD/FR is a strategic model that can be implemented early in training programmes by professionals or non-professionals as a proactive approach to traumatic stress reduction. A brief overview of stoicism, its role in public safety, and current traumatic stress reduction approaches is offered. We then explain the FD/FR model, advocating for PSP training that includes setting aside personal reactions to stress (i.e. functional disconnection), while emphasizing improved ways to process emotional reactions (i.e. functional reconnection) in order to stay psychologically resilient and prevent burnout, compassion fatigue, and mental health deterioration.

1. Stoicism: the traditional view

The Stoics were a group of Ancient Grecian philosophers who espoused a lifestyle that emphasized personal control and agency, even in the face of chaos, stress, and change. According to the Stoics, the achievement of mastery over one’s thoughts,

attitudes, feelings, and interpretations could lead to control and invincibility (Sellars, 2006; Sherman, 2007). Demonstrating capacity to remain stoic and steadfast on the battlefield was identified as the prime manifestation of the values and ideals celebrated by the Stoics. Current PSP organizations emphasize the importance of remaining calm while dealing with emergent situations, reflective of traditional stoic values. It has been found that better outcomes are realized by the PSP who can maintain emotional calm, compared with those who are less well trained in this respect. For example, police are often provided training on how to defuse high conflict situations so that their internal emotional states do not interfere with information processing and decision-making (Atkins & Norris, 2012). This type of PSP experience illustrates the importance of stoicism; a stoic response blocks the emergence of interfering personal emotional reactions during times of crisis.

Most PSP report multiple exposures to sudden violent deaths, accidental deaths, transportation accidents, and physical assaults, significantly increasing their risk of developing operational stress injuries, including PTSD, depression, generalized anxiety disorder, and panic disorder (Carleton et al., 2019, 2018). A stoic approach theoretically should act as a protective factor against deterioration of mental health. For example, South African police officers described how avoidant coping behaviour was often utilized as a defence against intrusive symptoms, highlighting that denial of vulnerability was needed to maintain the ‘macho’ attitude permeating South African police culture (Kopel & Friedman, 1997). However, new data show that Canadian PSP are experiencing psychological injuries at higher rates than the general population (Carleton et al., 2018, 2018). Stoicism is adaptive and useful in some ways, but there may be costs to this approach. An alternative perspective may be necessary to manage the mental health crises among PSP.

2. Current approaches to mitigate traumatic stress

Few preventive programmes or individual techniques for PSP have been published or evaluated for efficacy, and reactive approaches to critical events are more widely used (Beshai & Carleton, 2016). Following a traumatic event, many PSP take part in psychological debriefing, a generic term for the reactive brief crisis intervention delivered shortly after the traumatic event (Raphael & Wilson, 2000). The focus of psychological debriefing is to prevent and/or mitigate traumatic stress symptoms (e.g. intrusive thoughts and images, avoidance, hyperarousal) (American Psychiatric Association, 2013), promote recovery,

and return to normal functioning as soon as possible (Everly, Flannery, & Mitchell, 2000); however, it has not shown to be effective in preventing the onset of posttraumatic stress disorder (PTSD), depression, anxiety or other forms of psychological distress (Rose, Bisson, Churchill, & Wessely, 2002; Tuckey & Scott, 2014). Debriefing is often provided too early, is too time-limited and conducted by inexperienced debriefers following a traumatic event (Hawker, Durkin, & Hawker, 2011). Such factors may contribute to adverse outcomes (e.g. reliving trauma without appropriate clinical support (Tuckey & Scott, 2014)) and lead to disruption of natural coping strategies (Bisson, Jenkins, Alexander, & Bannister, 1997; Hobbs, Mayou, Harrison, & Worlock, 1996).

Therapeutic approaches have been developed containing components that facilitate stress management (e.g. acceptance and commitment therapy [ACT] (Hayes, Strosahl, & Wilson, 1999) and mindfulness-based stress reduction [MBSR] (Kabat-Zinn, 1982)). With ACT, an individual is guided over 11 to 17 sessions to use acceptance and mindfulness strategies to commit to specific behavioural changes that enhance psychological flexibility and sustain behaviour that matches one's values (Hayes et al., 1999; Walser & Westrup, 2007). MBSR requires a combination of weekly workshops, mindfulness practice, daily homework, body scanning, and simple yoga postures (Kabat-Zinn, 1982). Following a single-session ACT intervention, a small sample of volunteer firefighters showed reduced symptoms of exhaustion, but the intervention resulted in no other meaningful changes (Newman, 2016). These interventions have traditionally focused on treating already existing PTSD symptoms, rather than utilizing a proactive approach (i.e. by introducing stress management techniques) that may prevent the development of PTSD symptoms early on. For example, MBSR has showed moderate decreases in PTSD symptoms among veteran populations (Ziemann, 2019); however, the time commitments involved in full ACT and MBSR protocols are not conducive to the PSP lifestyle and work schedule, limiting their utility as a preventative approach. As neither ACT nor mindfulness interventions are endorsed by the USA Veterans Administration or the International Society for Traumatic Stress Studies as effective interventions for treating PTSD (Bisson et al., 2019; Department of Veteran Affairs, Department of Defense, 2017), the usefulness for stress mitigation in populations with a high risk of developing PTSD symptoms should be questioned.

Exposure to potentially psychologically traumatic events (PPTs) is an inescapable part of the job for the duration of PSP employment. Debriefing, full therapeutic protocols and other reactive approaches (e.g. trauma-focused cognitive behavioural therapy,

eye movement desensitization and reprocessing) may not be appropriate for PSP. Instead, stress prevention and management techniques may contribute to better long-term psychological well-being (Tuckey & Scott, 2014).

3. Functional disconnection and reconnection: an alternative to stoicism

Exposure to PPTs is not limited to PSP. Whitehead described physicians oscillating between *action* mode and *presence* mode (Whitehead, 2014). In action mode, physicians reported entering a state of mind in which they suppressed emotional reactions to focus on what was needed to prevent the patient's death (Whitehead, 2014). Action mode requires a shutdown of personal experience to focus entirely on the task, with one participant describing it as a 'functional disconnect' (p. 273) (Whitehead, 2014). Once medical interventions were completed, physicians (particularly those from palliative care) felt able to be present and relationally available for patients. Physicians must functionally disconnect to perform professional duties, but the 'balancing process of reconnection needs to become as integral a part of physician training and role expectation as the functional disconnect,' (p. 274) (Whitehead, 2014). Thus, while functional disconnection is necessary, a process of *reconnection* can address the suppressed emotional needs.

PSP are required to jump into 'action mode' during an emergency call like physicians. Prioritizing of stoic values has historically limited PSP in learning ways to cope with vulnerable or difficult thoughts, physical agitation, and painful emotions, and little (if any) emphasis is placed on reconnection following the day's work. Rather than being limited to stoicism, FD/FR asserts that PSP can be supported to be intentional and cognizant of the physical, emotional, mental, and spiritual changes they need to make when they assume their occupational roles and when they re-integrate into personal lives.

To demonstrate the implementation of FD/FR, Figure 1 provides an overview of strategies to transition between FD and FR. During FD/FR training, PSP are supported to learn 'softer skills' that can be employed as they reconnect with what they personally value, while encouraging the use of 'harder skills' that facilitate disconnection while at work. Teaching PSP to distinguish between how they function in their operational lives compared to their personal lives is a key component. PSP are taught how to self-monitor and enhance *awareness* of the physical, mental, and emotional state as they reconnect or disconnect. A language is provided (*naming*) to identify what the PSP is feeling and thinking, and if they are being burdened by distorted thought patterns. PSP

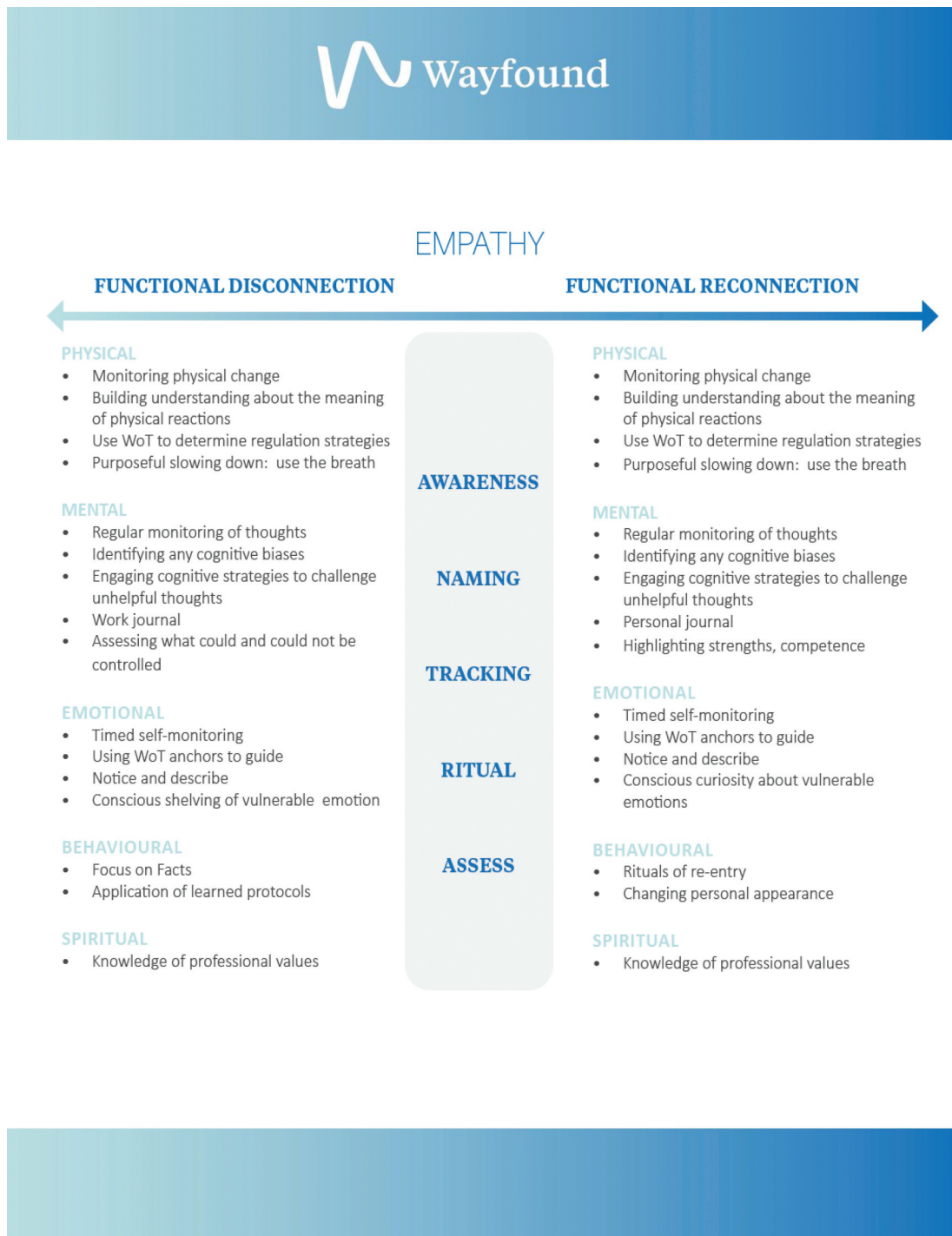


Figure 1. Functional disconnection and functional reconnection (FD/FR) strategies.

learn *tracking* techniques to monitor different states of arousal, and experiment decreasing states of arousal. PSP can then engage in purposeful activities (*ritual*) to get ready for duty or decompress once operational service is complete. Over time the ritual becomes a cue to shift the mind and body into a state of disconnection or reconnection.

In FD, it is imperative to recognize when occupational circumstances have activated an emotional response (*awareness*). While traditional stoicism and suppressing emotional reactions is helpful in emergency situations, FD goes beyond suppression. When an unhelpful emotional response for the circumstance

emerges, we suggest it is important to acknowledge what has been activated and intentionally employ cognitive and physical strategies to facilitate distance from that emotional response. Paramedics have reported a similar ‘turning off’ of emotional responses; they described intentional use of cognitive strategies during the emergency event (e.g. shutting out emotional reactions of bystanders and themselves, and visualizing the next technical step) and following the event (e.g. reviewing the technical aspects of the event and identifying learning opportunities) (Regehr, Goldberg, & Hughes, 2002). Other examples of disconnection emerging from our clinical work include a firefighter who developed

a strategy in which he avoided looking at faces and clothes of victims to depersonalize them. He broadened his peripheral field of vision to remain grounded and maintain distance from the person he was attending to. Disconnection strategies must be deliberate and intentional to work properly. The utility of stoicism in the PSP workplace is recognized; however, clearly outlined parameters should constrain stoicism.

Different physical, cognitive, emotional, and spiritual skills could be employed as PSP return to their personal circumstances (FR). We consider the space between disconnection and reconnection an essential feature of this model. Re-engaging with personal values and pursuits at the time of transition from the occupational context to the personal context now becomes the focus. For many PSP, this may involve a *ritual* of taking off the uniform before leaving for home (e.g. a police officer changing out of her uniform, letting her hair down, and putting makeup before driving home). Developing a ritual of transition can make re-entry into personal or home circumstances easier (Geller, 2017). For example, a paramedic chooses a demarcation point about halfway through his commute. When he leaves work, he allows himself to think about the events of the day up until that point; he then changes the radio station and leaves the day behind. He allows himself to pick up any unresolved thoughts and emotions from the previous shift when he next drives back to work. Another example is providing a metric rating to one's spouse about the level of nervous system arousal at the time of leaving work (e.g. a Window of Tolerance rating (Siegel, 2007)). If in a state of hyper- or hypo-arousal, it is recommended coping skills be applied prior to re-engaging with family members. Engaging in communication with loved ones about needs is crucial to elicit support and understanding. Other FD/FR strategies to address the burden of empathy are provided in Figure 1.

4. Conclusion

PSP training programmes have focused on the importance of controlling emotional reactions to make sound decisions in high-stress environments, akin to traditional stoicism. Given the prevalence of OSIs and suicidal behaviour among PSPs (Carleton et al., 2018, 2018), it is imperative that a different approach to coping be encouraged and made available. FD/FR acknowledges that many aspects of stoicism are necessary to accomplish PSP occupational duties; however, equal focus must be given to reconnection strategies as PSP transition back into their personal lives. Further research is necessary to better understand currently used coping mechanisms (both at work and in personal lives), and mental health outcomes related to coping mechanisms. Specific research related to the FD/FR model would be beneficial to understand what components are most important and what strategies are best received by PSP.

Implementing FD/FR strategies does not require substantial commitment to programming and can be adopted immediately. The FD/FR model can easily be incorporated into PSP training programmes and accompany regular critical incident debriefing. Skills can be developed across physical, cognitive, emotional, and spiritual domains to create distance from work-related events (Figure 1). A different set of physical, cognitive, emotional, and spiritual skills can be employed as PSP return to their personal functioning. Skills will be individual to each member and can be facilitated through proactive psychological training (e.g. Before Operational Stress [BOS] (McElheran, Stelnicki, & Carleton, 2020)), individual therapy, or peer support and consultation. It is equally important that organizational leadership embraces a shift in perspective to protect the longevity and effectiveness of their PSP members, and prioritize PSP well-being.

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