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FAMILY SUPPORT FOR POLICE OFFICERS

Critical information for
Members and their families



**WA POLICE
UNION**

President's Message



Our police officers do a difficult and dangerous job every single day, putting their physical and mental wellbeing on the line to protect the community. But sometimes, police officers need to be protected and their health and wellbeing needs to be put first.

The families of our police officers can play a very important role to ensure that their loved one, who has been physically or psychologically injured on duty, can recover and ultimately return to work.

This booklet has been produced in conjunction with other police unions around the country and outlines the way in which family members can assist in the police officer's recovery.

Family Support for Police Officers is designed to help families recognise the signs and symptoms of psychological distress, ways in which you can help and how you can be part of their recovery.

This information is neither medical nor legal and should not be relied on as such. It is a guide only and not intended to diagnose your police officer family member with a medical condition.

The WA Police Union has taken great care to ensure that the information contained herein is accurate but changes in circumstances since publication might impact on that accuracy.

Do not underestimate the positive influence that you can have on our Members.

Your love, support and understanding is vital.

A handwritten signature in blue ink, appearing to read 'George Tilbury'. The signature is stylized and cursive.

George Tilbury
President
WA Police Union

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SIGNS AND SYMPTOMS

Your police officer family member might have had involvement in a traumatic, life-threatening incident at work or home. If so, they could be affected emotionally and unable to make sense of what has happened.

Early intervention is the key in any recovery process.

It is perfectly normal in these circumstances for officers to process and compartmentalise what they have experienced.

This is a survival response, a healthy part of the healing process. As a family member, you play a key role in talking to and supporting your police officer spouse, child or sibling through this period.

Post-trauma symptoms might include:

- Anger
- Increased irritability
- Recurring nightmares
- Poor concentration
- A tendency to be easily startled by noises or sudden changes
- Feeling numb or detached, disconnected, withdrawn
- Undue concern about their safety and excessive paranoia
- Excessive emotion and tearfulness
- Being fearful

If you notice your police officer family member to be suffering some or all of these acute distress symptoms, encourage them to seek medical and psychological assistance.

Early intervention is the key in any recovery process. See your general practitioner to arrange further specialist assistance.

If you hear talk of suicide or the expression of other dark thoughts, or you notice your police officer family member withdrawing from loved ones, seek urgent medical help.



ADVOCATING WELLNESS

An injured police officer might undergo changes to their health during recovery. Your knowledge of these changes is likely to help you cope with the pressure associated with them.

To be informed is to avoid a sense of helplessness and isolation. Information will help you understand the plight of your police officer family member, any changes in family dynamics, and the injury management process.

Evidence indicates that, insofar as injury management is concerned, certain factors are critical in improving recovery and clinical outcomes. They are:

- Good communication
- Cooperation among those involved in the healing process
- Establishing agreed goals among the injured officer, health providers and police management is also an important step in the process.

The less time off work the better the quality of life for the injured officer. Understanding this will enable you to play a key role in the injury management and recovery process.

Encourage your police officer family member to:

- Stay active. Encourage them to participate in the injury management process and recovery.
- Continue usual activities and routines. Where changes are needed, incorporate them into the family lifestyle. But, one way to promote wellness is to maintain a sense of normality. Keeping your usual activities and routines in place, within the limits of the injury, promotes better recovery than simply resting.

- Stay connected as a family. A supportive family helps build your own personal resilience as well as that of your police officer family member. Maintain personal relationships, outside interests and social connections in your own life during the recovery. Encourage your police officer family member to do the same. Staying connected assists in the healing process and reduces the risk of damage to the family unit.

Maintaining key police relationships with, for example, a work colleague, police supervisor or officer-in-charge, or a WAPU Director, Branch Official or staff member can also help.

But, with some people, your police officer family member might prefer to avoid contact; and some aspects of the job are probably best avoided too. Establish what workplace news your police officer family member wants to hear about – and from whom they want to hear it.

Encourage them to inform the rehabilitation providers and police co-ordinators what will help.

To be informed is to avoid a sense of helplessness and isolation.



HELPING YOUR POLICE OFFICER FAMILY MEMBER

TROUBLE AT HOME

Police work often spills over into family life. You might, at times, become the sounding board for your police officer family member when they talk about difficulties at work. But, at other times, when they are ill and continuing to work, they might not even inform you of what transpires in the workplace.

Your family should act as a team in order to manage the “spill-over” of policing into your private life.

When a police officer goes off work injured, family dynamics will likely change. Some officers become angered or distressed by, or even complacent about, their physical or psychological limitations.

Police officers are highly active. They respond to crises, work the range of shifts and commit to overtime, but relish the variety and spontaneity of the job.

Frontline officers also value their physical capacity to perform their work. Any injury or illness which lessens that capacity frustrates them, as does their absence from the high-energy police environment.

Some officers think that, through their injury or illness and absence from work, they have let their colleagues down. They might also think they are missing out on job opportunities or become frustrated with consulting numerous health professionals.

You might, at times, find your police officer family member’s frustration directed at you. Try to discuss these issues and help them to acknowledge where the source of their frustration and anger lies. Do not take on their frustrations. You have likely done nothing wrong.

It is possible for disruptive attitudes and behaviours or negative coping strategies to develop. They might include alcohol misuse, gambling or seeking to exercise excessive control.

The injury or illness might also come with an emotional impact on you and other family members. If you feel unable to solve these issues, and they continue for long periods, seek help from external sources, particularly if any behaviour seems to be harmful to you or your family. Your local GP can refer you to the relevant services.

Not all injured-officer scenarios play out negatively for families. Many families might only have to make minor adjustments.

Nonetheless, you and your family can serve as a critical support base for your injured police officer family member. You are the ones most likely to notice changes in them away from work. Your observations of the effectiveness of treatment will help the professionals understand what does, and does not, work.



SHARING INFORMATION ABOUT YOUR POLICE OFFICER FAMILY MEMBER

Injured police officers might not always want their family members to share information about their circumstances. Undertaking sensitive conversations with your police officer family member might help them to see the benefit of information-sharing. It can also allow you to share your experiences as another aid to recovery.

Take these steps before you approach your police officer family member's practitioner/s:

- Obtain your police officer family member's informed consent in writing (a letter or e-mail).
- Notify the treating practitioner at the beginning of your discussion that you have informed, written consent to speak with him or her.
- Attend a session with your police officer family member and have them indicate their support for you to discuss the family's observations.
- If you hold concerns for yourself or other family members, seek your own counselling from a practitioner not connected with your police officer family member. This is for reasons of confidentiality and to avoid any conflict of interest a practitioner might have in treating both of you. Your GP might also be equipped to support you.

WATCH OUT FOR THE "SICK ROLE"

Research has shown that those with the strongest coping skills and minimal resentment toward their illness are best able to reject the sick role and gain strength.

Undertaking sensitive conversations with your police officer family member might help them to see the benefit of information-sharing. It can also allow you to share your experiences with them as another aid to recovery.

WHAT IS THE SICK ROLE?

- It is an over-identification with being injured and sick and has a negative impact on the long-term recovery process.
- It is generally attitude rather than physically-based.
- It usually involves excessive negative self-talk and dependent behaviour – which inhibits the recovering person from attempting either regular or new tasks – and prompts the avoidance of things that are known to improve one’s condition. You might notice an overuse of language such as: “I will always be like this”, “I am broken”, “I can’t do anything anymore because I’m sick”, “I’m no good to anyone anymore” despite evidence to the contrary from practitioners and visible actions.
- Those who feel unmotivated might become overly dependent on you or another family member and withdraw from usual routines and other social supports. You might soon see the person become comfortable in this scenario and difficult to shift.
- Being seen as sick might be filling a psychological need.
- It is not necessarily a case of faking it. Often the person is unaware of how they are presenting.

The cluster of negative thoughts and actions is a sign that something is wrong. It requires a professional assessment to know exactly how to help remove some of the emotional, behavioural and/or physical blocks your police officer family member might be experiencing.

If you notice these signs, seek professional assistance in order to put your police officer family member back in control of the recovery process.

Professionals can also help remove external barriers that impact on motivation to recover. This could involve the provision of greater accessibility to and satisfaction with health-care services and managing treatment expectations.



HELPING YOURSELF

Individuals who take a positive approach to recovery are most likely to achieve wellness and enjoy maximum functionality.

Be prepared to seek professional help for yourself.

COPING STRATEGIES

Learn as much as you can about the illness and/or injury. Knowledge is power. It can assist you to:

- Understand the changes in your family situation.
- Avoid unrealistic expectations of progress and recovery outcomes.
- Recognise signs and symptoms and identify counterproductive behaviours in your police officer family member.

Keep detailed records of consultations with and referrals to professionals. You might need to refer to this history later.

Use your treating GP as the key co-ordinator of all reports and assessments your police officer family member might have undertaken.

With the consent of your police officer family member, your GP can share this information with other professionals to whom they might be referred.

Understand that you and your police officer family member might have to tell the injury story numerous times to different health professionals. Remember that they are trying to get the best outcome.

Refer all the details of other written professional reports to your GP for co-ordination, and request that these reports be provided to the allied health professionals.

Maintain your own health. Do not underestimate the impact that managing a person with a psychological illness, such as anxiety or depression, can have on you and your family. Be prepared to seek professional help for yourself. A qualified professional will be quite willing to offer you effective coping strategies. Address these issues sooner rather than later.

If you find the reactions of your police officer family member hard to deal with, ask for professional help. Their reactions or behaviour could be a symptom that needs further professional input.

If your police officer family member is willing to include you, attend a session with them. Alternatively, leave a phone or e-mail message with the treating practitioner. Your information is important for professionals who might see some of the actions as a sign of ongoing distress or the development of another illness. Intervention might be necessary to deal with the impact of negative behaviour on the family.



If you feel unsafe at any time, take steps to make yourself safe rather than trying to change the person with whom you are dealing. You might need to move yourself to a safe location. Stay with other family members or supportive friends. Call for professional assistance. Keep handy the office and after-hours contact numbers for the professionals who are treating your police officer family member.

If you are unsure of the processes affecting your police officer family member, seek assistance from WAPU. WAPU can refer you to external services.

If you are limited geographically or prefer to use online services, there are several good websites with supporting information. (See pages 15-17 for details.)



NOTE TO THE INJURED POLICE OFFICER: Show your family members your appreciation for their help. Do not assume they already know. Receiving your gratitude is important. It gives your family members a sense of security and shows your love for them.

STRATEGIES FOR THE FAMILY

Although the recovery period can prove a difficult time, try to reconnect as a family unit. Talk about more than just police work in the family setting. Police can become over-involved in their work and in themselves and end up alienated from the family unit. Over-investing in the job can lead to disappointment when injured.

Communicate openly with each other. Include your police officer family member in decisions about your family while they are off work to avoid them slipping into the sick role. But, if they become too controlling, address this with direct communication.

You can allocate an aspect of family responsibility to them and be clear about what are still your responsibilities.

Recognise that the injury limits them physically and therefore prevents their active participation in policing. This causes frustration, even grief.

Try to live your life as normally as possible. Do not be drawn into a cycle of hopelessness or the sick-person role. This is a potential trap with mental illness.

Be sure to focus on other family members and relationships. Maintaining family ties and outside support helps protect you. So as not to lose your own identity, do not become too involved in your police officer family member's work identity.

Do not expect too little (not asking for anything and doing it all yourself) or too much (pushing too hard) from your police officer family member. Let them adapt to the injury but encourage them to rise to the challenge bit-by-bit.

Get a grasp of the treatment and return-to-work plans so that you understand the professionals' expectations. If you notice that your police officer family member is comfortable taking on more, inform the relevant professionals. They can then ensure that the recovery process is appropriate for them and they can return to work successfully. Equally, report what isn't working.

Resist the urge to take over or speak on behalf of your police officer family member as a means of protection. It is far better to encourage them to take an active role in their recovery by scheduling appointments and participating in routine family activities, no matter how big or small but within the limits of their physical or psychological condition.

If they are engaging in contact with work colleagues, consider talking to them about setting some boundaries. Work out who the key contact is and let him or her know what matters might be off limits.

If the injury is psychological, talking about the last death a colleague dealt with is probably inappropriate.

Find out from your police officer family member who they have a good rapport with in their district/division. Through the district/division Superintendent, you might be able to arrange for this person to be your police officer family member's contact.

Conversely, find out who is least suited to this role to ensure that they are not used as a contact.

Avoid the presence of large amounts of liquor in the house. It is a depressant and can easily change attitudes from positive to negative.

If your police officer family member talks of suicide, discuss it with them. If there is any threat of self-harm or suicide, act swiftly and report it immediately to your GP or other health professional. If urgent intervention is required, dial 000.



Maintaining family ties
and outside support
helps protect you.

YOUR RELATIONSHIP

- Make sure that you and your police officer family member share time which is not focussed on the injury.
- Take time out for yourself without feeling guilty. Managing your own stress is important. Find a recreational activity to schedule regularly into your week. If necessary, explain the need for this with your police officer family member to gain their support.
- Encourage them to do the same. Attending a weekly sport or even a coffee club with other injured officers might prove helpful.
- If they are your partner, make a point of going on regular dates. Share a dinner or meal together and talk about subjects other than the injury or the changes to your situation.
- You now have more time with them than you did when they were at work – take steps to grow your relationship.
- Sexual intimacy might change during recovery so touch and words might be more important means of showing affection.
- Reflect on what you have achieved together through the recovery, despite times when tension has arisen.

YOUR WELLBEING

The way you perceive your situation will impact on the way you cope with it. Practical strategies are important, and it helps to adopt certain perspectives.

- Acknowledge that you might have difficult days but think of them as only days rather than never-ending, hopeless and overwhelming.
- Focus not on what has failed to work but on what you have achieved. Keep a diary of those achievements. Each day in the process is a step closer to recovery.
- Set realistic goals with your police officer family member and for your family. Despite changes in the family, you can still plan for the future. Be prepared to make changes depending on the progress of the injury. Reviewing and changing your family's goals is perfectly acceptable.
- Do not take part in negative talk. It is natural to feel disillusioned or negative toward the situation, WA Police or others during recovery. But continuous negative talk will draw your police officer family member into a downward spiral.
- Acknowledge their personal achievements during recovery. Name at least two things, big or small, that they have achieved in a week.
- Acknowledge yourself for the support you have given. Treat yourself to a reward.



USEFUL REFERENCES

If your police officer family member experiences any symptoms outlined in this document, they should be strongly encouraged to contact their GP for a referral to a mental-health practitioner.

PSYCHOLOGICAL AND COUNSELLING ASSISTANCE

Professional counselling can be sought and coordinated through your treating GP.

To make treatment more affordable, some psychologists are registered in line with Medicare arrangements under the Federal Government's Better Access to Mental Health Care Initiative.

To be eligible for a rebate, certain conditions need to be met. If eligible, you might qualify for up to 10 individual sessions in a calendar year with a review taken after six sessions.

Fees vary – some psychologists might bulk-bill or you might have to pay a small difference between the rebate and the fees. Your GP will be able to assist you with this information.

Information is also available on the Australian Psychological Society website (www.psychology.org.au).

EMPLOYEE ASSISTANCE PROGRAM

The EAP is an external, confidential counselling service for all WA Police employees and their immediate family members (dependents living under the same roof), who can self-refer for counselling without having to contact Health and Welfare Services.

The provider is PPC Worldwide.

Phone: 1300 361 008

AUSTRALIAN PSYCHOLOGICAL SOCIETY (APS)

To find the name of a psychologist in your area, contact the referral line at the Australian Psychological Society (APS) which will put you in contact with a qualified psychologist close to your work or home.

Website: www.psychology.org.au

Phone: 1800 333 497

BEYOND BLUE

Beyond Blue is a Federal Government initiative established to increase the capacity to deal with anxiety and depression. It has a number of online e-learning programs to look at symptoms for diagnosis and contains a register of clinical psychologists matched to an area of your interest.

Website: www.beyondblue.org.au

Phone: 1300 224 636

E-mail: infoline@beyondblue.org.au

BLACK DOG INSTITUTE

The Black Dog Institute offers educational and research information as well as a number of online computer-based assessment and treatment tools. This institute also has a Medicare rebated treatment clinic for depression.

Website: www.blackdoginstitute.org.au

SANE AUSTRALIA

This website offers facts sheets and podcasts on mental-health conditions. For crisis assistance, phone the helpline.

Website: www.sane.org

Helpline: 1800 18 SANE (7263)

RELATIONSHIPS AUSTRALIA

Relationships Australia is a not-for-profit organisation which offers counselling and education services for couples and individuals. Telephone and online counselling is available. This is a fee-paying service.

Website: www.rasa.org.au

Phone: 1300 364 277

FAMILY AND RELATIONSHIPS SERVICES AUSTRALIA

Family and Relationships Services Australia is the national peak body for family relationship and support services.

Website: www.frsa.org.au

Phone: 1800 050 321

DOMESTIC VIOLENCE CRISIS SERVICE

In an emergency, call 000 or 131 444 for police attendance. For support, phone the Domestic Violence Crisis Service on 1 300 782 200 or Crisis Care on 131 611.

There are also phone-based crisis counselling services such as Lifeline (13 11 14).

For any emergencies or threats of self-harm, call emergency 000

WA POLICE UNION

Ph: (08) 9321 2155

Fax: (08) 9321 2177

Emergency 24/7 Director: 0438 080 930

E-mail: admin@wapu.org.au

Web: www.wapu.org.au

USEFUL READING

I Love a Cop. What Police Families Need to Know by Ellen Kirschman, 2007 (www.ellenkirschman.com).

Emotional Survival for Law Enforcement by Kevin M Gilmartin, PhD, 2002 (www.emotionalsurvival.com).



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