COMMONWEALTH OF MASSACHUSETTS

MPTC

Municipal Police Training Committee

In-Service Training

Unload Your Backpack

Version: A2025

INSTRUCTOR LESSON PLAN

The Municipal Police Training Committee (MPTC), an agency of the Executive Office of Public Safety and Security (EOPSS), serves the Commonwealth by establishing training standards, oversight, and policy guidance for policing professionals.

Title:	Unload Your Backpack
Version:	A2025
Course Purpose:	To provide law enforcement officers with the information and training needed to recognize maladaptive behaviors exhibited on and off the street and give them the tools they need to address them.
Length:	3 hours
Learning Objectives:	By the end of the lesson, participants will be able to: 1. Explain the effects of trauma and chronic stress on the officer's brain. 2. Examine maladaptive behaviors seen at roll call, on the street, and at home. 3. Assess key elements of your identity and self-assess the state of your well-being. 4. Appraise tangible wellness practices and tools to mitigate common pitfalls of the profession. 5. Formulate how to elicit meaningful discussion with officers and organizational leadership.
Instructional Methods:	Direct Instruction (Lecture) Individual Reflection Open Discussion
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INSTRUCTOR NOTES

1. MGL c. 6 § 116K requires the MPTC to provide 2 hours of annual training for police officers on mental wellness and suicide prevention. The course shall teach officers how to utilize healthy coping skills to manage the stress and trauma of policing, recognize the symptoms of post-traumatic stress disorder within themselves and other officers, and recognize the signs of suicidal behavior within themselves and other officers. The course shall also include information on the mental health resources available to help law enforcement officers and shall be designed to reduce and eliminate the stigma associated with law enforcement officers receiving mental health services.
2. Delivering instructor for this section must have an active MPTC [INSERT APPROPRIATE TOPIC] instructor certification. For lessons taught at MPTC-operated academies, instructors must also have an active state contract at the time of instruction. Instructors at operated academies without an active state contract at the time of instruction will not be paid.
3. Instructors must use the "Instructor" lesson plan and deliver the lesson in its entirety. Instructor NOTES are inserted throughout the lesson plan to choreograph delivery and ensure content is presented as intended and within the prescribed timeframe.
4. Opportunities for facilitated discussion are provided throughout the lesson. Key takeaways are included with these discussion questions to clarify the purpose of the facilitated discussion. The takeaways help instructors confirm that participants understand the key ideas presented.
5. Instructors are encouraged to share relevant personal work experiences to help illustrate concepts in the lesson. Instructors should be mindful of the time allocated to the lesson so that all material in the lesson plan is presented.
6. "Version" numbers are used to identify the most current In-Service lesson plans, visual aids, and handout materials. Instructors must confirm they have the most current materials for delivery by checking MPTCtraining.com.

ICONOGRAPHY

 **Corresponding Slide Title**

 **Video**

 **Instructor Note**

 **Facilitated Discussion**

INTRODUCTION

Video- The Backpack

Video – The Backpack

This video explains the weight that can build up on law enforcement officers shoulders as well as positive and negative tools officers can use to cope with these stressors.

QR Code to Share/Save Unload Your Backpack Video

Introductions

Instructors should introduce themselves, share their professional backgrounds, and explain and emphasize that the primary goal of this training is to help officers think about the things they carry from the job.

Instructors should remind officers that MGL c. 6 § 116K requires the MPTC to provide 2 hours of annual training for police officers on mental wellness and suicide prevention. The statute requires this course to teach officers how to utilize healthy coping skills to manage the stress and trauma of policing, recognize the symptoms of post-traumatic stress disorder within themselves and other officers, and recognize the signs of suicidal behavior within themselves and other officers.

This year the MPTC was fortunate to have Sgt. Sean Peterson of the Taunton Police Department agree to lend his experience and expertise in the development of this lesson plan.

Throughout the lesson officers will be introduced to different techniques and activities officers can try to help manage stress and enhance their mental wellness. There is no "one size fits all" answer to how to reduce stress and to be well. What works for one person may not work for another. Please keep this in mind throughout the lesson. Learn about these techniques and activities and try them out. If they aren't for you, that is fine. But please be respectful of the rest of the class. There might be a tip or an activity that resonates with one of your fellow officers, and it would not be fair to them for it to be denigrated by you, the instructor, or by class participants.

The course peels back layers of the job and exposes our population (law enforcement officers) to a more in-depth look at contributing factors toward negative behavior patterns in ourselves and others.

This training should help promote a better understanding of ourselves and give officers the tools needed to mitigate problems. The ultimate goal is to help officers become a better version of themselves so that they can be better partners, parents, and friends, and so that they can effect change among and between their co-workers and, ultimately, serve their communities better as well.



Learning Objectives & Learning Objectives cont'd

Review the course objectives with participants:

1. Explain the effects of trauma and chronic stress on the officer's brain
2. Examine maladaptive behaviors seen at roll call, on the street, and at home.
3. Assess key elements of your identity and self-assess the state of your well-being.
4. Appraise tangible wellness practices and tools to mitigate common pitfalls of the profession.
5. Formulate how to elicit meaningful discussion with officers and organizational leadership.

NEUROSCIENCE

OBJECTIVE # 1: Explain the effects of trauma and chronic stress on the officer's brain.

- *It is important for officers to understand it is not simply a matter of toughness; physiological responses, outside of their control, can be contributing to their struggles.*

OBJECTIVE # 2: Examine maladaptive behaviors seen at roll call, on the street, and at home.



Trauma and the Police

Discuss the word 'trauma', its meaning, and how law enforcement culture perceives both the word and the existence/effects of trauma.

- From the Greek word meaning "wound"

- Cultural perceptions of ‘trauma’ as weakness

Explain that trauma is not a weakness and is a physiological response to a distressing event. It is not a matter of choice or toughness.

Address the reality that everyone reacts differently to trauma and unresolved trauma can result in maladaptive behavior patterns such as (SUD, infidelity, poor impulse control, poor work performance, etc.).

Finish this slide explaining this training is not an advocacy for a victimhood mentality but rather a post traumatic growth mindset and overall officer wellness. The things we experience DO NOT define us and we can use our experiences to become the best version of ourselves. It didn’t happen to you, it happened FOR you.



Safety and Salience

Explain our brains are wired for survival.

The first responder brain adapts to our environments through compartmentalization and as a result, some responders can process events faster than the civilian population. This is due largely in part to the nature of our profession going from call to call and making split second decisions without displays of emotion.

The brain wants us to remember positive events, but it NEEDS us to remember negative events.

Hunter-gather example: During hunter-gather times, if you were hungry and found a cluster of berries that were sweet and satiating; you’re going to remember that. Conversely, if those same berries made you violently ill and almost killed you, it becomes imperative your brain remembers that. The same goes for trauma and critical events on and off the job. [1]

If these events are not addressed and processed, the brain will hold on to them to ensure safety.

- Brain does not want trauma or responses to ween until its reassured we are safe
- Explains why trauma and traumatic stimuli are so salient and remain dominant in the unconscious mind



Unresolved Trauma

This slide is an important opportunity to address both unresolved/preexisting trauma.

[1] Conti, P. (2024, March 30). How to fix your negative inner thoughts [Video]. Youtube. https://www.youtube.com/watch?v=7LdehyHSryk

Instructors should familiarize themselves with epigenetics (how behaviors and environment change your genes) and adverse childhood experiences. Additionally, it is important to touch upon combat veteran experiences. Some officers never get the chance to "unload their backpack."

When trauma goes unresolved, it can lead to behavior patterns affecting job performance, home life, and actions on the street.[2]



Allostatic Load

Allostatic load is the price we pay for stress. It refers to the effects chronic stress has on our mental and physical health.

These cumulative effects from chronic stress can result in pathologies and chronic illnesses.[3]

This is a good place to address the sources of allostatic load like psychological stressors, critical incidents, financial strain, and inadequate coping mechanisms.



Impact of Allostatic Load

Consistent allostatic load can lead to cardiovascular disease, diabetes, cancer, mental health issues, depression, anxiety, and PTSD.[4]

Touch upon the fact our bodies and brains were not built to sustain chronic levels of stress. The fight or flight response was to evade threat/danger, seek asylum, and then regulate. Persistent release of stress hormone has deleterious effects on the entire system.



Two Brains

Briefly touch upon the brain being broken up into two hemispheres.

Left and right brain. The emotional and rational brain.

The emotional brain is centered in the amygdala as part of the limbic system.

The rational brain is part of the prefrontal cortex responsible for our executive functioning.

[2] Gupta, S. (2023, November 21). *What is unresolved trauma?* VeryWell Mind. https://www.verywellmind.com/unresolved-trauma-symptoms-causes-diagnosis-and-treatment-6753365
[3] Guidi J, Lucente M, Sonino N, & Fava GA. (2020). Allostatic Load and Its Impact on Health: A Systematic Review. Psychother Psychosom. 2021;90(1):11-27. doi: 10.1159/000510696.
[4] *Ibid.*

Emotional Brain

The emotional brain is fast and automatic. It is centered in the amygdala in the limbic system. Relate it to today's iteration of iPhone. The emotional brain is like an iPhone 15 where the rational brain is like a flip phone. Powerful in ability to respond to other's feelings, classify others as foes, tell false stories, and drain of its limited cognitive resources.

The emotional brain's primary function is survival. Danger initiates the fight or flight response here.

Rational Brain

The rational brain consists of the prefrontal cortex which is the CEO or conductor of the brain in terms of executive functioning. It's responsible for logic, analytics, and information processing.

The prefrontal cortex, i.e., the rational brain, is responsible for making decisions, setting goals, seeing, and predicting consequences of behavior. Instructors should relate this profession to poor decision-making and bad judgment due to emotional brain dominance.

Emotional Brain Dominance

When the emotional brain is dominant and exposed to trauma, it sets a course for safety so we don't get hurt again. Remember the salience example and the hypothesis that the brain wants to ensure it's safe before letting go of an event.

Address how first responders are "resilient" and programmed to "keep trucking" even in the face of adversity. Stress inoculation is used to teach this in the academy. Regardless of what's happening, we have a job to do.

When the emotional brain is at the helm, it prevents information from being processed properly in the thinking brain or prefrontal cortex. This can flood us with fear, limitation, and affect our trust. [5]

Reference the cultural norm of police not trusting anyone.

Autonomic Nervous System

The autonomic nervous system has two parts.

The parasympathetic nervous system is responsible for rest and digest.

[5] Hartikainen K. M. (2021). Emotion-Attention Interaction in the Right Hemisphere. *Brain sciences*, *11*(8), 1006. https://doi.org/10.3390/brainsci11081006.

The sympathetic nervous system is responsible for fight or flight response.



Brake Pedal vs. Gas Pedal

This is a good opportunity to create a better understanding of the autonomic nervous system by relating it to a brake pedal and gas pedal.

Parasympathetic: Brake pedal

Sympathetic: Gas pedal



Impact of Trauma of Stress

Use this slide to point to the location of the three key areas of the brain affected by trauma and chronic stress:

1. The prefrontal cortex,
2. the amygdala, and
3. the hippocampus.



The Cycle of Fight or Flight

The goal of this slide is to help the audience understand the body's fight or flight response and what that response looks like in the first responder, both physiologically and behaviorally.

It starts with a stimulus that can be acute or chronic. Acute examples are a car chase, assault, officer involved shooting, etc. Chronic examples are marital issues or financial troubles.

This stimulus activates the amygdala which is the brain's alarm system. This activates the body's fight/flight/freeze/fawn response.

Activation of the fight or flight response is accompanied by physiological responses in the body. Heart rate increases, blood pressure increases, blood flow increases to our large muscle groups, the endocrine system releases cortisol, adrenaline, and glucose, and we get a narrowing of vision better known as "tunnel vision".

Stress hormones can have an inhibitory effect on the hippocampus which is responsible for emotional regulation and memory. We see this with flash backs or blank spots after a particularly stressing event.

Activation of the amygdala also affects our prefrontal cortex which is responsible for executive functioning. Remember the PFC is the CEO of the brain. Altered PFC functioning can be seen in officers displaying poor decision making, poor impulse control, irritability, risk seeking behavior, lack of emotion, impatience, and short-term memory issues.

In addition to the hippocampus and PFC, there is a broader central nervous system dysfunction. This leads to hyperarousal and hypervigilance. This puts officers in a chronic sympathetic state equated to the throttle being stuck. This makes officers feel awful, on edge, and high strung.

Stuck in a state of hyperarousal contributes to feelings of despair. Responders begin looking for something/anything that feels good. The inhibited PFC can result in maladaptive pursuits and culturally accepted responses like purchasing boats, motorcycles, and RV's to add excitement or make us feel good. These purchases further stress us financially, forcing us to work more. Responders can also fall prey to negative behaviors like gambling and infidelity. This dopamine hunt can be exacerbated with caffeine, nicotine, and alcohol.

Alcohol has long been a culturally acceptable solution to most law enforcement problems. This is clearly problematic and often just exacerbates the presenting issues. Alcohol consumption can lead to increased anxiety (hyperarousal) better known as "hangxiety" the following day.

Officers then start their shift in an elevated state, get exposed to a new stimulus right out of roll call and the cop's cycle continues…



The Struggling Cop

This slide reinforces the Cop Cycle by providing a real-world, extreme example.

Officer stuck in the cycle can look like this:

1. Goes to bed late, intoxicated and gets fragmented sleep.
2. Wakes up late, swollen, dehydrated, anxious, and angry.
3. Stumbles out of bed and puts on a dirty uniform that was in a ball on the floor.
4. Shows up late to roll call disheveled, unprepared, bags under eyes, duty belt in hand.
5. Sits around after roll call complaining about everything and everyone in the profession.
6. Hits the road looking for a pick-me-up and grabs an energy drink and chewing tobacco. These substances release dopamine while increasing anxiety/hyperarousal.
7. Then a dangerous domestic disturbance call comes in followed by a fatal car accident.
8. After finishing your reports, the supervisor informs officer he/she is being forced to the next shift with an hour's notice. Evening plans canceled and the spouse is upset.
9. Officer arrives home after 16 hours and isolates. Ignores spouse and snaps on the kids. Trying to feel better, the dopamine hunt continues with alcohol, food, drugs, etc.
10. Officer goes to bed late, intoxicated and gets fragmented sleep…. Cycle continues.



A Belief and a Search

First responders sometimes may believe they are not good enough, stemming from persistent negativity, high demands, policy, administration, media, politicians, and the societal climate. They also just want something that feels good in their lives (altered PFC leads to bad pursuits). These negative beliefs can contribute to a negative self-image. Negative self-image can contribute to substance use disorder and poor decision-making from feelings of worthlessness.



The Deviance Effect

Police officers see and hear an overwhelming amount of the world's problems. This is an often-underappreciated aspect of the career. Officers see death, abuse, tragedy, addiction, poverty, mental illness, etc. daily.

This is NOT a normal human existence, and these factors can contribute to desensitization and a warped perception of the world. This can appear as apathy and indifference, leading to complaints. In the medical profession, these traits may seem cold or detached to others, but they are necessary to get the job done while protecting oneself. Like surgeons, officers cannot get emotionally too invested, or they cannot work.

Society gives ample leeway to disenfranchised civilians by stating, "Imagine what they have been exposed to" or "Imagine the things they've seen." This is followed by "it's no wonder they perceive the world that way" or "cut them some slack." The same ideologies and leeway are often not afforded to law enforcement with the same vigor or level of understanding.



Shame and Guilt

Shame and guilt are not the same. Guilt is "I made a mistake," and shame is "I AM the mistake."

These emotions serve a primitive human function and, at times, help us reflect on our behavior and grow. But shame can also sometimes become problematic when it begins to affect our perceptions of self and lead to other risky behaviors. It can cause us to become stuck inside ourselves and forget who we are.[6]

Review and brainstorm the different sources of shame and guilt in the law enforcement profession.

[6] Conti, P. (2024, March 30). *How to fix your negative inner thoughts* [Video]. Youtube. https://www.youtube.com/watch?v=7LdehyHSryk

INTERVENTIONS FOR SUCCESS

OBJECTIVE # 3: Appraise tangible wellness practices and tools to mitigate common pitfalls of the profession.

OBJECTIVE # 4: Assess key elements of your identity and self-assess the state of your well-being.

- *The goal of this section is to introduce viable interventions officers can use to mitigate the pitfalls of the law enforcement profession. Participants will leave with tangible strategies they can implement immediately to establish clarity, wellness, and longevity.*



Disclaimer

The information you receive in this training does not take the place of professional medical advice. Before starting any new diet and exercise program, please check with your doctor and discuss any exercise and/or diet changes with them before beginning. We are not doctors, nutritionists, or registered dietitians. We do not claim to help cure any condition or disease. We do not provide medical aid or nutrition advice for the purpose of health or disease, nor do we claim to be doctors or dietitians.

Any product recommendation in this presentation is not intended to diagnose, treat, cure, or prevent any disease. Our statements and information have not necessarily been evaluated by the Food and Drug Administration.

We expressly disclaim responsibility to any person or entity for any liability, loss, or damage caused or alleged to be caused directly or indirectly as a result of the use, application or interpretation of any information provided to you.



Professional Mental Health Therapy Options

In this section, we talk about different therapy options (beyond traditional talk therapy) that could be of benefit to officers. The MPTC is not advocating that officers participate in any of the therapy options described. This information is provided to try to educate officers about some of the various professional therapy options available to them.

Officers who are interested in learning more about any of these therapies should consult with their medical provider to discuss all of the potential mental health therapies that are available. The medical provider can provide information and advice to the officer and help them make an informed decision that is in the officer's best interest.

At the end of the day, a thorough biopsychosocial assessment by a licensed professional is the starting point to determine what is needed.



Cognitive Behavioral Therapy (CBT)

Examines the relationship between thoughts, feelings, and behaviors.

It can be effective for depression, anxiety, Substance Use Disorder, PTSD, severe mental illness[7]

Recognize one's distortions in thinking.

Gain a better understanding of the behavior and motivations of others.

Use problem-solving skills to cope with difficult situations.

Develop greater sense of confidence in one's own abilities.

Significant improvement in functioning and quality of life.

Demonstrated to be as effective or more effective than other psychological therapy or psychiatric medications.



Brain Mapping and Electroencephalogram (EEG)

Computer-generated analysis of brain's electrical activity.

Pinpoints brain activity outside of the norm.

Measure and monitor neuron oscillations.

Identifies dysregulation in brain function and activity.[8]

Targeted therapy to process information correctly.



Eye Movement Desensitization and Reprocessing (EMDR)

EMDR is a psychotherapy treatment that enables people to heal from the symptoms and emotional distress that are the result of disturbing life experiences.

[7] Society of Clinical Psychology. (2017). *What is cognitive behavioral therapy?* American Psychological Association. https://www.apa.org/ptsd-guideline/patients-and-families/cognitive-behavioral.

[8] Butt, M., Espinal, E., Aupperle, R. L., Nikulina, V., & Stewart, J. L. (2019). The Electrical Aftermath: Brain Signals of Posttraumatic Stress Disorder Filtered Through a Clinical Lens. *Frontiers in psychiatry*, *10*, 368. https://doi.org/10.3389/fpsyt.2019.00368.

Adaptive Information Processing Model: predicts dysfunctionally stored or not fully processed memories are the cause of a number of mental disorders like PTSD, affective disorders, pain, addiction.

EMDR may provide:

- Stress relief
- Reformulate negative beliefs
- Reduce physiological arousal[9]

Think of EMDR therapy as the 3D glasses you wear at a 3D theater. EMDR serves as the lens in the glasses. It provides clarity to an occurrence the brain has difficult processing and putting into focus. EMDR increases the neural communication between the two hemispheres of the brain and assists in transitioning short term memories to long term memories.

72 hours/3 sleep cycles post incident (REM sleep and alcohol avoidance): Brain needs 72 hours or 3 sleep cycles involving rapid eye movement (REM) to process traumatic events. This is why it is important to avoid alcohol for 3 days after traumatic experiences.



Post-Traumatic Growth

Post-Traumatic Growth (PTG) is a positive psychological change that some individuals experience after life crisis or traumatic event.

Adversity can unintentionally yield changes in understanding oneself, others, and the world.

PTG cultivates inner strength through the knowledge that they have overcome tremendous hardship. People grow because they learn that they are resilient, they allow themselves the opportunity to go through a range of emotions and normalize that this is a human condition/experience.

PTG happens when someone experiences a traumatic event that challenges their core beliefs, endures psychological struggle, and then ultimately finds a sense of personal growth.[10]

PTG relates to CBT as it is a form of reframing the events that occurred and using them as a tail wind and not a headwind.

Kintsugi is the Japanese art of repairing broken pottery with gold. In essence, it tells us the piece is more valuable and more beautiful because it broke. “The world breaks everyone and afterward many are strong at the broken places.” -Ernest Hemingway

[9] EMDR Institute, Inc. What is EMDR Therapy. https://www.emdr.com/what-is-emdr/
[10] Collier, L. (2016). Growth after trauma. *Monitor on Psychology* 47(1), p. 48. https://www.apa.org/monitor/2016/11/growth-trauma



Self-Assessment

Use this opportunity to discuss the role and importance of self-assessment in developing a better understanding of who you are.

"A problem approached comprehensively is an opportunity."
-Dr. Jordan Peterson

"When you look in the mirror, that's the one person you cannot lie to."
-David Goggins



Measurement and Improvement

"*That which is measured improves. That which is measured and reported improves exponentially*," is attributed to the mathematician Karl Pearson.



Who are You?

When was the last time you took a moment to ask yourself who you truly are?

Requires honesty and humility.

The first step in addressing the elephant in the room is to acknowledge its presence.

Like the Karl Pearson quote, measurement results in improvements. You cannot improve upon something if you do not know where you even stand or measure.

Take physical, financial, spiritual, measurements of yourself.

- Physically (weight, ability, appearance)
- Mentally (anxious, depressed, manic, ADHD)
- Financially (bills, debt, budget)
- Spiritually (are you connected, social circle, gratitude)

It is also important for individuals to assess their daily consumption of media, negativity, and substances.

- Consumption (drugs, pornography, negativity, media)



Assessments



Refer to Handouts

Briefly describe and explain the handouts.

1. *Anxiety Assessment: GAD-7*
2. *Depression: PHQ-9*
3. *PTSD: PCL-5*
4. *Addiction: DAST-10 or AUDIT*

These handouts are NOT to be completed at training or turned in. They are to be completed in private and serve only to enlighten participants. Participants should consult their primary care provider with any results.

It is important to also discuss other forms of assessment like blood work and heart scans.

This is also a good opportunity to touch upon the wealth of information we have at our disposal from modern technology like wearables and other monitors.



Heart Rate Variability (HRV)

Measures the variation in time between each heartbeat.

Noninvasive way to signal imbalances in the autonomic nervous system.

Provides insight on daily stressors and deleterious factors/behaviors.

Most people already have this information available to them (Apple Watch, Oura, Fitbit, Garmin). These devices allow individuals to track how their nervous system reacts to their environment, thoughts, feelings, and consumption.[11]



HeartMath and HRV



Video – HeartMath

Video explains the HeartMath device and HRV.

[11] Harvard Health Publishing. (2024, 3 April). Heart rate variability: How it might indicate well-being. https://www.health.harvard.edu/blog/heart-rate-variability-new-way-track-well-2017112212789

Understandmyself.com

The Understand Myself assessment and report is based on the Big Five Aspects Scale, the scientific model that describes your personality through the "Big Five" factors and each of their two aspects.

You will, for example, learn how agreeable you are relative to others, and how your *Agreeableness* breaks down into the aspects of *Compassion* and *Politeness* (deference to authority and social norms). You will also learn how these aspects of your personality influence how you act towards and react against the various people and situations you find yourself dealing with every day.

Assessment Breakdown

Knowledge is power and this activity helps participants understand the lens through which they view life. It also promotes self-exploration, honesty, and accountability.

Instructors are invited to complete the VIA Institute on Character assessment themselves and talk about their findings and what they learned about themselves. This displays vulnerability and authenticity, which will increase buy-in.



If you're unwilling to do so, an actual example is provided for you here: Nice, avoid conflict, compassionate, respectful, procrastinate, easily distracted, messy, self-disclosing, impulsive, require stimulation, person of action, anxious, worry, doubt, low self-esteem, high avoidance and withdrawal, mood swings, easy stirred up, interested in abstract ideas, creative.

The results are the author's actual findings from taking the assessment.

VIA Character Strength Survey

Researchers, including psychologists and medical doctors, at the VIA Institute on Character identified 24-character strengths that individuals have the capacity to express.

Discover your personal character strengths and areas for improvement. The survey is found here: https://www.viacharacter.org/survey/account/register.

Discover your true self and how you interact with the world.

It's FREE!

Author top 5: Humility, Perspective, Kindness, Judgement, Humor

Author bottom 5: Forgiveness, Self-regulation, Zest, Hope, Gratitude



Instructors are highly encouraged to complete this assessment themselves and talk about their findings and what they learned about themselves. This displays vulnerability and authenticity which will increase buy in.

If you're unwilling to do so, an actual example has been provided for you. The results are the author's actual findings from taking the assessment.



Modern Wellness Practices

Transition from self-assessments to tangible wellness practices to mitigate stressors of the profession.



Take a Deep Breath



Talk about the origins of this well-known phrase and what it means. We often say it, but it has a real scientific purpose. Deep breaths have also been shown to slow the heartbeat, lower or stabilize blood pressure, and lower stress.[12]



Vagus Nerve

Cranial nerve connecting brain and body.

Vagal activity is regulated by respiration.

Activates the parasympathetic nervous system.

Controls mood, immune response, digestion, breathing, and heart rate.

Counterbalances the fight or flight system.



Vagus Nerve Graphic

The vagus nerve is intricately connected to our heart, regulating heart rate and blood pressure. When the vagus nerve is stimulated, it releases a substance called acetylcholine which essentially acts as a 'brake' for our heart rate.

[12] Cunningham, S. (2018, September 19). *Understanding breathing and importance of taking a deep breath.* UC Health. https://www.uchealth.org/today/understanding-breathing-and-the-importance-of-taking-a-deep-breath

By slowing the heart rate, the vagus nerve stimulation can help maintain balance in our cardiovascular system, promoting overall better health.[13]



Nasal Breathing[14]

Mouth breathing makes us susceptible to respiratory ailments and denies our body oxygen.

Breathing through the nose has several benefits:

- Increased oxygen. We inhale 20% more oxygen when breathing through the nose.
- Filters out foreign particles.
- Humidifies inhaled air.
- Aids immune function.
- Lowers risk of allergies.
- Helps diaphragm work properly (vagus nerve and parasympathetic nervous system.)
- Increases oxygen uptake and circulation.
- Produces nitric oxide (blood vessel dilation).



Physiological Sigh[15]



Explain using the graphic and then demonstrate for the audience

The physiological sigh is a simple technique to reduce stress and arousal.

1. Inhale through the nose (regular breath)
2. Inhale through the nose again (shorter breath)
3. Exhale through the mouth (long breath)



Practical Exercise



Take the audience through 3-4 successive breaths using the physiological sigh. Encourage them to focus on how they feel before and after. You can also encourage them to use their wearable device to monitor heart rate decline.

[13] Capilupi, M, Kerath, S., & Becker, L. (2020). Vagas nerve stimulation and the cardiovascular system. *Cold Spring Harbor Perspectives in Medicine*. https://doi.org/10.1101/cshperspect.a034173.
[14] Nestor, J. (2020). *Breath*. Penguin Life.
[15] PyschSolutions. (2023, October 2). The science of physiological sigh: Insights from Huberman Lab. https://psychsolutions.ca/the-science-of-physiological-sigh-insights-from-huberman-lab/.

This is also a good opportunity to discuss using this breathing method en route to a hot call, after a car chase, or before bed. It's a tool officers can have with them at every moment.



Heat Exposure



Transition explaining the application and benefits of heat exposure.



Sauna

"Sauna bathing, a passive heat therapy and an activity that has been a tradition in Finland for thousands of years, has mainly been used for the purposes of pleasure and relaxation."[16]

Several studies have been done looking into the potential benefits of saunas. There is some evidence that exposure to sauna may reduce the risk of catching the common cold and have beneficial effects on cardiovascular health.[17]

Saunas appear safe for most people. However, people with uncontrolled high blood pressure and heart disease should check with their doctors before taking a sauna.[18]

Here are some general precautions:

- Avoid alcohol and medications that may impair sweating and produce overheating before and after your sauna.
- Stay in no more than 15–20 minutes.
- Cool down gradually afterward.
- Drink two to four glasses of cool water after each sauna.
- Don't take a sauna when you are ill, and if you feel unwell during your sauna, head for the door.

[16] Kunutsor, S., et al. (2022). Inflammation, sauna bathing, and all-cause mortality in middle-aged and older Finnish men: a cohort study. *Eur J Epidemiol*. 37(12): 1225–1231. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9792415/

[17] Kunutsor, S., K., et al. (2017). Frequent sauna bathing may reduce the risk of pneumonia in middle-aged Caucasian men: the KIHD prospective cohort study. *Respir Med.* 132:161–163.

[18] Sauna Health Benefits: Are saunas healthy or harmful? https://www.health.harvard.edu/staying-healthy/saunas-and-your-health May 14, 2020

Power of the Pen

Transition from heat and cold exposure to discussing how writing can be a powerful tool for processing stress and critical incidents.

Pennebaker Writing Protocol[19]

15 minutes, once per week, four weeks.[20]

Write about same event each time.

Cathartic, transitions emotional upheavals into language, diminishing their power.

Unpacking issues and laying them out for deep examination.

Creates order, organization, and control around event. Akin to cleaning your room.

Honesty and depth are key.

Participants experienced physical health improvements.

Doodling (Yes, doodling)[21]

Activates reward pathways in the brain (dopamine).

Boosts mental health, creativity, and focus.

Calming effect, reducing stress and anxiety.

Enhance problem-solving skills and communication in the workplace.

Gratitude[22]

The Greater Good Science Center at UC Berkeley compiled empirical research on gratitude.

Some of the highlights include:

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[19] UW Integrative Health. (n.d.). *Therapeutic journaling.* University of Wisconsin-Madison School of Medicine and Public Health. https://www.fammed.wisc.edu/files/webfm-uploads/documents/outreach/im/tool-therapeutic-journaling.pdf.

[20] Pennebaker, J. W. (2018). Expressive Writing in Psychological Science. *Perspectives on Psychological Science*, *13*(2), 226-229. https://doi.org/10.1177/1745691617707315

[21] Pillay, S. (2016, December 15). *The "thinking" benefits of doodling.* Harvard Health Publishing. https://www.health.harvard.edu/blog/the-thinking-benefits-of-doodling-2016121510844

[22] Allen, S. (2018). *The science of gratitude*. Greater Good Science Center at UC Berkeley. https://ggsc.berkeley.edu/images/uploads/GGSC-JTF_White_Paper-Gratitude-FINAL.pdf

- Increased levels of dopamine, oxytocin, and serotonin.
- Increased feelings of connection, closeness, and happiness.
- Reframing the world (CBT).
- People who express gratitude experience fewer aches and pains and report feeling healthier than those who don't.
- Linked to lower rates of depression and anxiety.
- Builds resiliency to adversity and assists in building strong relationships.
- Lowers blood pressure and increases vagal tone.



Gratitude Statistics[23]

70% of employees would feel better about themselves if their boss were more grateful, and 81% would work harder.

Employees who experience more gratitude at work report fewer depressive symptoms and stress.

95% of employees agree that a grateful boss is more likely to be successful at their job.

Regular gratitude journaling has been shown to result in 5% to 15% increases in optimism and 25% increased sleep quality.

Lack of gratitude is a major factor in driving job dissatisfaction, turnover, absenteeism, and burnout.

53% of employees would stay at their company longer if they felt more appreciation from their boss.

Gratitude reduces toxic aggression, frustration, and regret even after receiving negative feedback.

In a study of 800 descriptive trait words, "grateful" was rated in the top 4% in terms of likeability.

Over 90% of American teens and adults indicated that expressing gratitude made them "extremely happy" or "somewhat happy".

A five-minute daily gratitude journal can increase long-term well-being by 10%.

[23] Penn State PRO Wellness. (2022, October 17). *10 amazing statistics to celebrate national gratitude month.* https://prowellness.childrens.pennstatehealth.org/10-amazing-statistics-to-celebrate-national-gratitude-month/



Daydreaming[24]

Activates right brain for more innovative thoughts and creative breakthroughs.

Improves learning and memory.

Activation of the hippocampus (memory).

Increased problem-solving skills.

Higher pain tolerance and lowered anxiety.

Aqua Notes pad is a waterproof pad and writing utensil that attaches to shower wall. It's a great tool for remembering ideas and logging daydream thoughts.



Self-exploration: 6 Questions



Encourage the audience to take a picture of this slide. These are 6 deep thought-provoking questions participants can use to start writing when they leave the training.

1. If you were in a room with everyone you have ever met, who would be the one you look for?
2. If someone gave you a box of everything you have ever lost, what is the first thing you would look for?
3. If you had the chance to relive one day of your life, which day would it be and why?
4. If you could receive a letter from your future self, what advice or insight would you hope to find in it?
5. Imagine you have a chance to revisit a moment from your past, which moment would you choose and what would you do differently?
6. If you had to define your purpose in one sentence, what would it be and how does it influence the choices you make in your daily life?

[24] Schwantes, M. (2024, January 17). *Neuroscience says 1 brainless habit improves memory, boost creativity, and reduces stress.* Inc. https://www.inc.com/marcel-schwantes/neuroscience-says-1-brainless-habit-improves-memory-boosts-creativity-reduces-stress.html



Other Introspective Exercises

These are additional exercises to provoke thought and examination:

- Challenge the audience to think about the last time they took a minute to sit in silence and just think about their current existence. Where they are in life versus where they want to be. The last time they unplugged from everything and just sat with themselves.
- When examining any issues they may be experiencing, have them imagine they're in the middle of the ocean and they're treading water. What is the anchor strapped to their leg? What is weighing them down the most?
- Lastly, the control vs can't control exercise. This is a simple exercise where you write your problem at the top of the page. Then write down all the things bothering you around the issue. Now, cross out all the things you can't control. You're now left with a list of things you can address to help mitigate the issue.



Music[25]

Beneficial effect on stress related outcomes.

Can help address serious mental health and SUD.

Can assist healing trauma and build resilience.

Decreases anxiety and improves functioning in depressed individuals.

Facilitates emotional release.

Promotes self-reflection.

Creates a sense of community.

Improves and maintain cognition, communication, and physicality.



Quick Strategies for Success

- 321 Sleep method (food, drink, screens)
- Three daily wins (physical, mental, spiritual)
- 7 Pillars of health: morning sunlight, daily movement, quality nutrition, stress control, healthy relationships, deep sleep, microbiome (oral and gut)

[25] American Psychiatric Association. (2023, August 1). *The transformative power of music in mental well-being.* https://www.psychiatry.org/news-room/apa-blogs/power-of-music-in-mental-well-being

BEING A PEER

OBJECTIVE #5: Formulate how to elicit meaningful discussion with officers and organizational leadership.

- *This segment is to serve as a reminder that officers need to embody the change they want to see within the profession.*



Check on Those Around You



Video – Check on Those Around You

This is a powerful video that speaks for itself. It reminds the audience things may not always be what they seem and the importance of checking on those around you.



A Good Peer…

Massachusetts is fortunate to have regionalized CISM/peer support teams full of dedicated individuals trained in being "peers". Do not hesitate to utilize these invaluable resources as they can often provide a wealth of services to officers in need.

Part of being a good friend and peer requires you to lose your ego and embrace vulnerability. First responders are experts in hiding emotion and this often spills over into our personal lives. By embracing vulnerability, we remove barriers to communication and healing.

Poorly timed "toughness" prevents us from offloading our burdens and prevents us from offering genuine assistance. There is no greater honor or responsibility in this world than being a good friend to someone. It is a necessity for human progression and our entire existence depends on it.

Further, helping others boosts your own happiness, health, and sense of well-being. When we make a conscious effort to be a good peer, our entire environment improves. We find ourselves as part of the solution and not the problem.

It's no secret the law enforcement profession suffers from immoral temptations and a persistent culture of negativity. These are long-standing and outdated norms. It is important to realize these pessimistic ideologies will continue until we face them head-on and display the courage necessary for change.

Listening[26]

Listening is a skillset that must be practiced, appreciated, and understood.

When someone chooses you to listen, particularly if they're unloading something, you must give them your undivided attention. This means sitting up straight, maintaining **eye contact**, and **putting your phone away** until the conversation is over.

Practice **active listening** by nodding your head, maintaining eye contact, and offering periodic "ok" and "mmhmm" affirmations. This lets your peer know you're following along.

Paraphrasing is another effective tool when listening intently. Allow your peer to finish speaking and paraphrase what they just said to you with something like "so what I am hearing you say is…". This shows your peer you're truly listening and gives them an opportunity to clarify anything you may have misconstrued.

Self-disclosure can be an effective means of building rapport with your peers. By disclosing something about yourself, you can aid in developing trust and portraying a relative understanding of what they may going through at that time.

Reflection of feeling is an additional skill that is intended to highlight the feelings or attitudes expressed in a peer's communication. You can exhibit this by saying something like "wow, you sound **overwhelmed** right now". This helps your peer associate a feeling with their disclosure and opens the door for further discussion.

Summarization is a good way to close out a fruitful discussion with your peer. This can easily be done by providing a brief synopsis of everything discussed to show you heard everything they said.

Giving Space

Video – Giving Space

Comedian Theo Von and UFC fighter Sean Strickland share a difficult moment together. Theo Von is a well-known comedian known for his goofy antics and inappropriate responses while Sean Strickland is a talented MMA fighter known for his toughness and hostility. Here, we see them both abandon their personas and just be human. Theo utilizes silence fantastically here

[26] Edith Cowan University. (2023, September 11). *Top 10 micro-skills you need to advance as a counselor.* https://studyonline.ecu.edu.au/blog/top-micro-skills-you-need-advance-counsellor

and just opens space for Sean to be vulnerable, free of judgment, so he can process the emotion around his childhood.



Confidentiality

Confidentiality is the cornerstone of peer support, friendship, counseling, and overall proper human communicatory practice.

Keeping intimate conversations confidential is the single most important tenant of being a good peer and listener. Never discuss or share your peers' trials and tribulations without their consent.

Provide an example, either real or made up displaying what a good use of confidentiality looks like.

Anything disclosed during a one-on-one peer interaction with a Massachusetts-trained CISM Peers who is part of the state network is protected.[27] Additionally, discussions with mental health clinicians are always protected.[28]

It is important to remind participants that CISM personnel and clinicians are still mandated reporters.



Refer to Handout: Man in the Hole



Refer to Handout – Man in the Hole

This is a self-explanatory short story highlighting the power of being a good peer and using your own personal experiences to help others.



Take a quick moment to read this aloud and let them sit with it for a moment.



Culture of Negativity

Police agencies are often riddled with infectious negativity.

This negativity can set the tone for a shift in the culture of the entire patrol line.

[27] MGL c 112 sec. 135B; *Bernard v. Commonwealth*, 424 Mass. 32 (1996).
[28] MGL c 233 sec 20B.

Are you contributing?

Stand up for those who need standing up for.

Be the change you want to see in your agency.

A police department is a community. All are dependent upon one another for success and survival. Act like it.



Discussion/Ideas



Facilitated Discussion Question

1. **How do we decrease negativity within our profession? Our agencies? Ourselves?**

   Takeaways:

   - *Answers will vary. There is no one right answer; the goal is for participants to brainstorm.*
   - *It is important for instructors to prevent this from becoming a full-on complaint session that runs away from the point.*
   - *This discussion is to get tangible solutions through thought-provoking discussion on how to reduce persistent negativity within the profession. Examine the sources and how to address them.*



Fear of Other People's Opinions (FOPO)[29]

FOPO is a real element of social interaction consisting of fear and anxiety arising from what other people may think or say about us. **There is not one position in the police department immune from this.**

FOPO is part of our primitive nature to ensure acceptance as part of a group, but we sometimes take it too far in modern society. It can cause hesitation, seek validation, avoid action, and stifle growth and pursuits outside of our comfort zone. The reality is that no one is thinking about you nearly as much as you are.

FOPO can erode confidence, authenticity, and decision-making abilities and impede leadership.

[29] Gervais, M. (2019). *How to stop worrying about what other people think of you.* Harvard Business Review. https://hbr.org/2019/05/how-to-stop-worrying-about-what-other-people-think-of-you.

With self-reflection and awareness, we can overcome FOPO. We must cultivate a growth mindset, surround ourselves with supportive networks, practice vulnerability, and focus on our purpose and values.



Be Selfish

Your entire profession is dedicated to the existence of others at a minimum of 40 hours per week for 30+ years.

You MUST prioritize your own health and wellness.

You must learn to say "no" when obligations are spreading you too thin.

You must prioritize sleep. This is not an easy task, but it can be done and is essential to living a healthy and fruitful life.

You can't be an effective officer, spouse, coach, parent, friend, or family member if you're spread too thin or overwhelmed.

The average life expectancy for a law enforcement officer is 66 years old.[30] Relate this in terms of retirement. If an officer doesn't get on until age 30 and must put in 30+ years before retiring, this doesn't leave any time to enjoy life post-retirement. You need to take care of yourself and make your own health and wellness priority number one.

Make sure you're also paying attention to the "I used to…

- I used to workout.
- I used to be in shape.
- I used to fish.
- I used to spend time with my family.
- I used to read.



Conclusion - CS Lewis Quote

"The doors of hell are locked on the inside."[31]



Ask the participants, based on everything they just learned, what does this quote mean to them? How does it apply to the profession and UNLOADING YOUR BACKPACK?

[30] Violanti, J., et a. (2013). Life expectancy in police officers : A comparison with the U.S. general population. *International Journal of Emergency Mental Health 15*(4), 217-228.

[31] Lewis. C.S. (2002). *The Problem of Pain*, in *The Complete C. S. Lewis Signature Classics*. Harper.

Thank You

This presentation is an abbreviated version of the *Unload Your Backpack* course created by Sgt. Sean Peterson. For more information, contact:

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