



Mobile Wellness Units

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Matt: Hello. Welcome to this SAFLEO Sessions podcast. I’m Matthew Garcia, Deputy Director of Officer Safety and Wellness Programs with the National Law Enforcement Officers Memorial Fund. Prior to joining the Memorial, I spent 26 years in law enforcement, 22 with the Connecticut State Police. After retiring, I joined the Memorial to spearhead their ambassador program. I’m also proud to be part of the SAFLEO team and honored to be talking to Danny Long today.

Danny, through lived experience, understands the importance of holistic wellness for first responders and, really through a calling, has come up with some innovative ideas to help officers on the front line wherever they are. Before we get started, first off, let me welcome you Danny, and if you could give us an introduction and a background on really what brought you into this world of officer safety and wellness.

Danny: Yeah, definitely honored to be here, Matt, with you and talking about a very important subject to me and to you. I started out—just real quick background, leading up to my law enforcement career. High school girlfriend, we were both mission-oriented people. She goes to college, I go to Fort Benning, Georgia—return, we get married. I’m working as I’m going to college, finish that up, and join the Oklahoma Highway Patrol. Shortly thereafter begin the problems.

I mean, I had a really good outlook on the whole mission as a law enforcement officer to help others, like we all have. And it quickly turned—I was recruited to our state tactical team, and during that process, we lost a member that was murdered in the line of duty. That’s one defining moment when I can go back and look and see myself going down a dark path. I mean, I started drinking heavily, isolation, withdrawal, cheating on my wife. We divorced. I mean, that was never ever in our consideration of things that could happen to us. I mean, we were that couple and—but guess what it did? I just thought something was wrong with me. So, I quit the highway patrol here, and I reached out to some friends that transitioned over from

the military service to some other government agencies. I was in Iraq, working for this agency and thinking I was going to find relief. Eventually ended up coming back to Oklahoma, and I got my job back with the highway patrol as soon as I got back. I mean, there was no mental health evaluation. They're just like, "Oh, Danny Long's back." And I mean, that was the extent of it. I was given my uniforms, car, guns, and I'm back on the road. Just a few weeks later, I'm in a running gun battle. That was the first of many that were to come, and those shootings continued to happen to me. I was recruited to the U.S. Marshals Service, Fugitive Task Force—more shootings and more isolation leading, ultimately, to a point where I had my gun in my mouth for about six to eight hours on my farm trying to end my life.

I felt like if I were to call someone—I mean, because we had a peer team at the time, but it was more of a place for people to go retire, not doing any proactive work, only being deployed basically when your house was on fire. There was no protection in place like we have now—and, again, no trusted vessel for me to call. I would've lost my job, lost my pride, which is about the only thing I had at the time, and it was just a no-win. And I thought that was my only way out. I thought my family, which I had destroyed, was better off without me. Ultimately, getting past that, coming to [the] realization at my farm that day, "You know what? This is on me. I caused all this destruction and fallout to everyone around me, to include myself." And it was up to me to dig my way out.

That's what I did for the next two and a half, three years was I made a promise when I took the gun out of my mouth that I was going to do everything necessary to get my life back. And two, once I got it back, I was going to do everything necessary to keep my life. And fast-forward to 2018, my wife and I reconnected. I mean, we were still divorced, but we reconnected somehow. I mean, that doesn't happen a whole lot, but we did. A few months later, I was in one of the most violent gunfights that I've ever been in with U.S. Marshals. One partner shot, severely injured, and I took shrapnel and glass all over me. But what came out of that day was something—that night, I realized all that work that I had done. I didn't want to go isolate. I didn't want to go drink. I wanted to be with my family. And I was off for about eight months during that time period recovering.

And that's when I came up with this idea of like, man, there's got to be a better way—a gap filler, if you will—to catch people like me because I'd lost a lot of friends to suicide and just attrition because they felt like they were burned out. I believe it's this cumulative trauma build-up over the years that we don't deal with.

Matt: Danny, what was offered by your agency at the time?

Danny: After every shooting, I mean, I'd been sent to—we had a doc on staff, on contract, and there was mandatory debriefs, fit-for-duty assessments after every shooting. I mean, our peer team would respond out to every shooting, but it was people that had no idea what it was like to take another human's life. And, like I said—and they were not bad people, but there was nothing I wanted to talk with them about. They could not relate to me on scene where I've just took a human life. I mean, you don't

come down out of that fight mode sometimes for hours or days. I think that's one of the seeds, which I'm glad it happened now because I would go home a lot after these shootings, and I'd take notes on what all happened, not really knowing why. I just felt like I needed to write this down.

In 2018, after that last gun battle, I found this notebook of all these notes that I'd taken post-gunfight, and I started going through. And I just started making this list, "How we can do things better for our people, to keep them whole, to keep their family together throughout this whole crazy mess that all these encounters?" Because it's not just about gunfights.

And I tell the story a lot. People are like, "Well, I've never been in a gunfight, but I'm experiencing a lot of the same symptoms." I think we need to make sure that everybody understands: trauma is trauma. We're all biologically made the same. Trauma affects us a lot of the same way, and you don't have to be in a gunfight to experience a lot of these bad negative outcomes that I was going through. And so, I mean, those resources were there. They were just not there, and to me, the most productive way to get people to realize it's okay not to be okay.

So, I wrote this Oklahoma First Responder Wellness Division Plan. I had an eight-year plan laid out to build a true holistic program. I stacked the team deep with people for line-of-duty loss of partners, drug addiction, alcohol addiction, divorce—you name it. I mean, I really stacked the team in a way that we can send the right person to initially lay out a forward path for them.

Matt: How high up the chain did you get buy-in?

Danny: Right now, we're under DPS, Department of Public Safety, umbrella—to a sense, but we are detached. Our headquarters is in Oklahoma City. We're in a completely separate part of town and completely separate autonomous building that's very private.

Matt: But you don't serve just DPS. You're actually statewide, and you're going into some of those really rural areas that have absolutely no resources for something like this.

Danny: We serve all police, fire, and EMS here, so it's just not the LEOs that we're offering these treatment modalities to. It is all first responders as a whole, and I can't leave out communications, but yes, the majority of our work is in rural Oklahoma.

We're the state team, and our job is not to come in and take over anybody else that does have a current peer team. We're just a force multiplier of what we can bring in with—far as assets, training modalities, that sort of thing.

I pulled some information as I was putting this together in 18 and found that 90% of our rural agencies had zero peer support, zero support period for critical incidents for maintenance.

Matt: How does the team deploy? Is it a self-deployment? Are you waiting for that call from the agency or from a nearby agency that's maybe coming to assist?

Danny: Great question. This program is set up as preventative maintenance. We still do the critical incident debriefs, post-event. We're still going to respond after all these critical incidents, but I would say 75% of our work is spent doing holistic face time with our people, whether it be with our treatment options, REM sleep treatment beds, massage therapy chairs, hyperbaric chambers, neuro brain mapping components, visits with our trauma LPCs. We're doing that every day. We have set a network of this holistic program. For instance, I got teams out today. We have a statewide network of these functional fitness gyms. I think we have 16 scattered around the state, four mobile, that we host these events, and sometimes we do different types of workouts. I mean, everything from CrossFit to strength training, mobility, yoga—sometimes we put on a pack, and we walk, and that's the physical component. And the reason we're doing that—I started keeping track of a lot of these numbers during COVID where we collectively couldn't come together as a whole in a corporate setting. I would just bounce around to different agencies with some sandbags and kettlebells. I'd grab two or three guys, and we'd do a workout in a parking lot of a firehouse, police station, sheriff's office, state police headquarters.

And what started happening—and I wish I was smart enough to tell you this is why I was doing it, but I didn't figure it out until about six months later because people started asking me questions after these workouts like, "Hey, Danny, what's counseling about? Who do I even go to?" And just really asking a lot of deep question—I'm talking veteran guys that I knew personally, that would never ever speak of this, were asking some really detailed questions about, "How can I get healthy? I'm in a bad place." So, I knew right away, this is going to be a pillar in this holistic program. And, Matt, we do this weekly. I mean, we have events like that going on every day throughout the state. That's just one thing. The other preventative care is we push out—also, even when we're not doing a workout, we'll go in. We'll just meet and have face time with our people because we're working all over the state. We can't get in front of everyone right away.

But I told the team the first two years, "All I want you to do for this preventative piece is to build trust with our people. And you can't do that over the phone. I want you to go out, get in front of them, as many people as possible during the week, just to have conversations." So, when they do need us, we're not some foreign object coming in thinking, "Hey, trust us. We know what we're doing." But that takes time, that takes money. It takes resources. I understand that. But that has really started—I'm seeing the positive outcomes from the last two years of that effort of just running a trust-building campaign.

Even our counselors, they'll go out with us in the field doing the same thing. I mean, one of my team members is certified financial planner, and that's all he does. He's got a really good program, digging into all these problematic areas that we find

ourselves in early/mid-career that we're digging our financial hole that takes decades to get out of.

We've got the spiritual piece as well. We have a full-time chaplain that does a really good job for us, but we're also promoting identity outside of the badge and what that looks like.

Matt: Now you have a mobile command that goes out to the impacted areas, so you can bring a lot of equipment and resources out to a scene.

Danny: So, our headquarters is Oklahoma City and all of our treatment options, like I discussed earlier, the treatment modalities, the REM sleep treatment beds, the massage chair therapy, the neuro terminals, hyperbaric chamber—all that's in our headquarters. And by the end of '21, early '22, I realized that this is doing no good to our first responders who live three hours away, that's constantly having these critical incidents occur. So, I was driving home one day, and this bus passed me and had this idea of—I'm like, "You know what? I wonder if I can put some of this equipment in a mobile platform to be able to go take it to where people were serving and working versus them having to drive [to] Oklahoma City every time they have a critical incident."

That's what we did. We have mobile wellness buses that are equipped with this equipment that I discussed—about two thirds of it that we can roll out and bring Oklahoma City headquarters to them. I'm probably more excited about that than anything else because it's removed a huge barrier for our people to say, "Well, I don't have time to go to Oklahoma City." Well, guess what? We can come to you and bring the house.

Matt: You've gone through really an impressive list of different services. What are the most requested when you respond out to the scene?

Danny: Well, for instance, this past April, we had a large-scale tornado period for about three to four weeks here in Oklahoma. I mean, in multiple places from southern Oklahoma to northeast Oklahoma, some large end tornadoes made some direct hits to some communities here in rural, and we didn't immediately respond because our first responders were still doing rescue and recovery. We gave them a few days before I started sending team members out. And at first, we just rolled peer team and counselors—started doing the normal debrief. But this is something I didn't expect. I had one of the fire chiefs at one of these communities that was really affected—I mean, direct hit to their community. I mean, they were beat down after about four or five days. They were appreciative of everything that was going on that we were doing, providing them, giving them a reset before they went back out.

But he came up to me one night, and he said, "Danny, I follow you on Facebook, and I noticed you have these mobile workout gyms." I said, "Yeah." He said, "Why don't we have them here?" And I just looked at him, had this dumb look on my face. I said, "Chief, do you think your guys really want to work out after 8-, 10-, 12-hour

days of digging through rubble?" And he said, "I'm more interested about bringing my team back together at some type of team event." And I'm like—I felt stupid. I'm like, "I didn't think about that." So, we brought in two or three of our mobile trailers, and every evening moving forward, we hosted a team-building event. It wasn't just a smoke session or anything, but we focused, we programmed—I mean, we're all CFL ones. And so, we wrote this program to really enhance that team concept, and I got to be honest, I mean, we had about a 15-minute workout at the trailer.

Then they wanted to do a ruck, putting weight in a bag and moving from A to B, and they wanted to walk directly through a lot of this tornado debris. When we got back to the trailer, to the firehouse, I mean, I was bringing up the rear with one of their teammates, and I looked down, they were in a circle at the trailer hugging each other, high-fiving. Some people were crying. I started crying. I mean, I'm like, "Man, I missed it almost." I can't believe I didn't think about even offering this. I was so focused on the debriefs and that part—it was a good lesson for me for these long-term events. My takeaway was if we're working a long-term event, our first responders need a break away from what they're doing.

I mean, it turned into—that was the evening thing that we were doing, that it created such an environment of just team and community within our community together. And man, I was emotional almost every night moving forward.

Matt: Do you think the physical activity the chief was talking about—do you think that brings out conversations that would never have happened otherwise?

Danny: Well, I can tell you this. Here's a very good success story that came out of this, and for privacy reasons, leave out the department. I get a phone call from another chief that had people there. He is like, "Danny, I need you over here." And one of their guys was battling a really dark time in their life. Then the tornado happened and just opened the doors to what else had been going on with this officer. And so, this guy was planning suicide that night, and he was standoffish even before we got there. But that community setting that we did, and it wasn't just me: it was my team, the counselors.

I stayed with him that night. We got him into a program, and he even told me later, he is like, "I was never going to ask anybody for help. I had it all planned out." The kids and wife were going to go to an event that night, and he was going to do it that night. And he said, "But you guys show me a different way and that it's okay. And I share my story very openly about my suicide attempt and what I did after to get healthy, and that if I can do this, anybody on this planet can get their life back in order."

Matt: What's the long game plan for you and for the Oklahoma First Responder Wellness division?

Danny: So, we're a state-funded program. What makes this interesting is when we wrote this bill that became law in September of '22, we also attached the ability to be a 501C3

component also just for sustainability, survivability with the program and for future growth, and I mean—you know, Matt, as well as anybody. I mean, a lot of these programs get cut when there's a downturn in state revenue. And so, that's why we introduced that piece, and it's data driven. We found out two months ago—we are about to build my dream, and I didn't think this would happen until around year seven or eight. Just like everything else, these doors started flying open.

We're going to build a stand-alone wellness center in a retreat setting. It's on 640 acres, wooded, very private. Even with additional treatment modalities, I'm going to be able to add additional trauma counselors and about probably two thirds more of these offerings that people can come in, do preventative work, come in post-event, but also stay for the day. We're going to build about a 10- to 15-acre lake right in front of the wellness center, running trails, walking trails, barbecue pits, firepits everywhere. So, come in, do your treatment modality, bring your family, and just hang out for the day, fish, barbecue—whatever you want to do.

Matt: I've gone through all the different services that you offer for officers out there, and it is an absolutely impressive list. If you could leave our audience with one takeaway that you feel is so critical in today's day and age of policing, what would that be?

Danny: I think I got to go back again to my story. If I can do this, if I can find a way, no matter how dark it is right now, no matter where you are—divorced, burned out, not being able to see a future, I'm telling you: there's hope, that there's a way out of this. It takes some intentional work, but there is hope. And I would've told you—15 years ago to me talking to you now, Matt, I didn't see that because I had nobody speaking this into me. But I just want our officers to know, from east to west coast, this is possible—to get your life back in order.

I don't know what the outcomes are going to be, but I know you don't have to stay where you're at. And I know, Matt, what you're doing, what we're doing at SAFLEO, what we're doing here in Oklahoma—I mean, we're all in this together, and I know we're just starting this true campaign, and I know we're getting a lot further in the way of making it better than it was even last year, year before, five years ago, but we got so much more work to do. I'm so hopeful. I mean, if I was not, I would not do this. And I don't do anything unless I believe in it. And I absolutely believe we can cut down on our suicide numbers. We can reduce them by doing what we're doing here, Matt—showing people that there is hope. There's a better way. Your family's not better without you. Your family's better with you. You've got to reach out for help. Find somebody you trust. Pour into them. I'm just hopeful for the future now.

Matt: I thank you for what you're doing out there in Oklahoma. I thank you for what you're doing for the law enforcement community. Thank you for sharing your story. It's a hard story to share. It's your story, but you've put it out there in a way that is going to connect, and hopefully, it's connecting with people who really need to hear that. Danny, I want to thank you today for everything that you shared with us, and our hope is that everybody listening can take away some of that information and get

help if they need it, or direct somebody, direct a friend, direct a peer to get the help that's needed. Because it is, it's critically important.

Danny: Absolutely. And, Matt, I'm honored to be here with you. I hope we can do it more.

Matt: Absolutely. I'm looking forward to it. If I had more time, I would have you go through every single thing that you mentioned, all your services that you've mentioned on there, because a lot of it is cutting edge. I'm not seeing a lot of it out there, and I've talked to officers from around the country, but you have so many resources out there for them. You got to connect with something. There's something out there.

So, for more information on this topic and other officer wellness topics, please visit our website, SAFLEO.org. Remember: a healthy officer is a better and safer officer. Until next time, stay safe and be well.

Speaker 1: The SAFLEO Program is dedicated to providing training, technical assistance, and resources to law enforcement agencies, staff, and families to raise awareness, smash the stigma, and reduce and prevent law enforcement suicide. For additional information regarding the SAFLEO Program, please find us on social media and visit SAFLEO.org. That's S-A-F-L-E-O.org. The Bureau of Justice Assistance, BJA, Office of Justice Programs, U.S. Department of Justice is committed to making our nation's communities safer through resources, developing programs, and providing grant funding opportunities to support state, local, and tribal criminal justice efforts.

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