



Compartmentalization

Speaker 1: You are listening to a SAFLEO Sessions Podcast, a production of the National Suicide Awareness for Law Enforcement Officers Program. The SAFLEO Program is funded through grants from the Bureau of Justice Assistance, BJA, Office of Justice Programs, U.S. Department of Justice. The points of view and opinions expressed in this podcast are those of the podcast authors and do not necessarily represent the official positions or policies of the U.S. Department of Justice. Here's your host.

John B.: I'm John Bouthillette, a lead instructor with the National Suicide Awareness for Law Enforcement Officers Program and host for this edition of the SAFLEO Sessions Podcast. I'm joined today by captain Brandon Post from the Provo, Utah, Police Department. Brandon is also an instructor with our VALOR Program and covers the topic of wellness, and I'm happy to have him here today to join us with this podcast. How are you doing, Brandon?

Brandon P.: I'm doing great. How are you doing, John?

John B.: I'm doing fine. Thank you for taking time out of your busy day. I wanted to talk about something, Brandon—you and I have worked together for a long time now, and you tell a story about an incident that occurred in your career. And if you don't mind, I want to kind of dig into that a little bit and I'll let you talk about it—I don't want to give any information about it.

I want people to hear from you, but I want to talk about the concept of how you were involved in this really impactful, critical incident in your career, and how you were able to compartmentalize that event and how that ability to compartmentalize in the moment in the long-term can be kind of productive to you when this thing rears its ugly head again. Does that make sense to you?

Brandon P.: Yep.

John B.: Okay. So, Brandon, let's go—and please, I appreciate you sharing the story. Let's talk about this concept of how you suppressed some feelings in the call that you had and then how that ended up coming out in the long run.

Brandon P.: Yeah, absolutely. What I think my story can help maybe lend towards some explanation of compartmentalization and how it works—is it's not terribly unique. Everyone in law enforcement, if you've had the call where you've had to respond on a baby not breathing or tried to resuscitate a toddler or something and they've passed—we find ourselves struggling with things. We start to question our resiliency, we're bothered by—I've done this thing 20 times in my career, "Why is this bothering me so much now?" I think it's because there's really a cumulative impact of these things. And as we compartmentalize—which in the moment, compartmentalization is a skill, we have to continue to operate, we have to file away what we're looking at, what we're dealing with and solve the incident. But suppressing these things indefinitely can lead to bad—

John B.: And, Brandon, you made a great point in that. A lot of time in law enforcement, we think that the only things that are really going to impact us are those big events, those active shooter events, the times when we have to draw in for our weapon. We kind of tend to believe that those are the only things that are really going to cause us any undue psychological trauma in our careers.

But the point you're making is an important point—is that we don't realize how many times these events that we get involved in which might not be the largest events in our career, but they're extremely emotionally impactful. And we deal with more of those types of events—that repeated trip down that lane where we're faced with this very impactful, traumatic situation. But our brain is wired that we're mission driven and we have to come up with a solution and we drive through those because we have a job to do. But in the backside of the equation, we're still putting these memories in the back of our head that we've compartmentalized that we tried to push down so it doesn't bother us, right?

Brandon P.: Yep, absolutely.

John B.: So, let's go down that road. Let's talk about your event.

Brandon P.: Okay. And may you have some patience with me, I'm not used to telling this story in this kind of format.

John B.: I know.

Brandon P.: And again, there's nothing unique about me or this story. It's something that we've all in law enforcement dealt with. A call comes out, baby not breathing—I happen to be the closest unit, so I respond, lights and sirens. While on patrol, there's been four times where I've arrived on a call with a baby or toddler not breathing, worked on them, and then the child passed while I was working on them. And all four of them have been rough. I think it's pretty normal for all of us to be bothered when things happen to children. We sign up for this job to protect those who can't protect themselves and who personifies that better than children?

John B.: Well said.

Brandon P.: So ideally, we're the protectors that are saving and succeeding in all these situations, but it's not the case every time obviously. But the first three incidents—I remember them, but they're not crystal clear. They're not as impactful. I think I even may get some facts misconstrued between one another—and I don't know why, but the fourth one is crystal clear in my mind. I remember everything about it. I remember driving up to the house. I remember the mother running out of the home with her child who was—and this wasn't, maybe this child is choking. This child was obviously dying and in severe distress. And as we all know, it's a hell of a thing to have a mother literally throw her child at you and beg you to save the child. And it sucks when you don't. But I remember neighbors running over. I remember word for word what they said. And I worked on the child, ambulance ends up arriving, we load the child in the ambulance. What had happened is, it was a little three-year-old boy who had aspirated a fruit snack. He was eating fruit snacks and just wrong pipe, and I could not get that thing out. Ambulance arrived—they couldn't get it out either. They ended up getting the child to the hospital, and even at the hospital they weren't able to remove the fruit snack. So, it happens early in my shift. I'm dealing with—obviously, we've got all the different things we've got to deal with after the fatality of a child.

John B.: The day goes on, right? The day goes on.

Brandon P.: Yeah, the day goes on, exactly. And you got to compartmentalize because you got a mission.

John B.: Got to maintain your focus, yep.

Brandon P.: Yep. So, I'm dealing with all that. I get all of my stuff done and it's time to go onto the next call. And obviously, there's still time left in my shift. So, I get on the radio and say to dispatch, "Hey dispatch. I've cleared this call, go ahead with the next." And as I said that, the sergeant gets on the air and says, "Hey, first off, before you take another call, meet with me at this park."

And I know what he's doing. He's being a good, dutiful sergeant. He's doing what he's supposed to be doing. One of his guys is on a hard call, he's checking with him to make sure he's okay before he goes out and takes more calls. That's exactly what he should do. And I knew that's what he was doing. So, I go meet with him at the park, and he's already there as I pull into the parking lot. And the passenger-side door opens and out of his vehicle steps our brand-new police chief. He's been our chief for maybe two weeks. I haven't even met the guy yet.

John B.: Okay.

Brandon P.: And our brand-new police chief walks up to me and says, "Hey, that's a rough call. How are you doing?" And what are we all going to say to the police chief the first time?

John B.: I'm okay.

Brandon P.: I'm okay. In fact, I have no doubt I said something stupid like, "It's not my first rodeo," or something like that.

John B.: Bravado, go ahead.

Brandon P.: And then he says, "Well, do you need to go home?" And again, new police chief, first time I've met him, what am I going to say here at this situation? So, "Of course not. No, they need help. We are down people." And I'm fine, and I thought I was. And I stayed and took calls. And as time kind of went by, I found myself thinking about the incident more than I thought about some other things, but right or wrong, I found myself just pushing it down and not dealing with it because I didn't want to feel those things. I didn't want to think about it. I mean, there's a certain degree of vulnerability that comes when you really unpack this stuff. I just didn't want to deal with that.

John B.: So, every time it popped up, you pushed it back down.

Brandon P.: Exactly. And so fast forward a couple of months, and the lieutenant calls me into his office. And I come in and sit down and the

lieutenant—I can't even remember what we talked about, but we finished talking about whatever it was. I get up to leave, and this part is really clear. He says to me, "Hey, close the door. I want to ask you a question." So, I close the door and I sit back down. And over the years, I've really tried to analyze and figure out what happened next, why it happened. And the only thing I can come up with is that—there's a couple of things. Number one is I was completely unprepared for the question he was about to ask. I had no wall up.

John B.: Okay.

Brandon P.: And part of the reason I had no wall up is I really trusted this lieutenant. This lieutenant—you knew that the people he led were more important to him than his career. And not that those two things are mutually exclusive, but you were confident that he was going to do what he felt the right thing to do was.

John B.: And you trusted him.

Brandon P.: I had a very, very high degree of trust with him. So I'm there with him, I've got no wall, and he says to me, "Hey, that was a tough call you were on a couple of months ago with that baby not breathing, how you've been doing?" And the question was like a punch in the face, and I started sobbing in the lieutenant's office. I mean, I'm able to speak and carry on a conversation, but the waterworks are flowing and they ain't stopping.

John: The emotions are going.

Brandon P.: Yeah. And I am absolutely livid with myself beyond degree that I am in the lieutenant's office and I'm crying.

John B.: There's no crying in law enforcement, Brandon.

Brandon P.: And I don't deal well with adults crying. Crying is not my thing. And here I am in the lieutenant's office, and I'm sobbing.

John B.: Uncontrollably.

Brandon P.: Yeah. So, he ends up talking to me. But it was a real epiphany moment for me that I had that and other things during my career that I'd seen and experienced—I just packed away and never dealt with them. And they were impacting me at a much higher degree than I was aware of.

John B.: So, he asked the question and now that little compartment where you kept that memory smashes open, right?

Brandon P.: Yes.

John B.: And out it comes. So, all the time you spent pushing this thing down, which you thought is the right thing to do, ends up coming out anyway. But unfortunately, it comes out in a time where you weren't prepared to deal with it.

Brandon P.: Yeah, in the lieutenant's office.

John B.: Yeah, exactly. So, it caught you by surprise. So, when we talk about this whole concept of being able to compartmentalize what we see, what we experience—there is a need to do that. But what I want to talk about today and with you, Brandon, is the fact that, that's good, that's a good coping mechanism in the short-term, but in the long-term—if we don't unpack that and we don't try to understand how that impacted us, the long-term effect could be catastrophic. Now, it wasn't catastrophic for you, was it?

Brandon P.: No.

John B.: How did you deal with that after that conversation with the lieutenant?

Brandon P.: Well, like I said, first off is the realization. I think it's important to recognize that we're human beings. It is normal to have the death of a child impact you. It's normal to have that really bother you. And to recognize that we are human—it is going to impact us. And now, how do we deal with it? And this is where we're all unique.

I'll tell you kind of what I did to unpack this for myself. I had been reading a book, it was right at the same time—it's called *Man's Search for Meaning* by Viktor Frankl. And if you haven't read it, I highly recommend the book. It was rated one of the ten most influential books ever written. Viktor Frankl was a Jewish man—Nazi Germany, put into a concentration camp.

There's a lot of well-written inspiring books about prisoner of war camps, concentration camps, how to deal with adversity and how to keep moving on. This book's unique because Viktor Frankl's a certified genius. And he goes into that suffering ceases to be suffering as soon as you form a clear and concise picture of it—as soon as you give your suffering meaning and purpose.

John B.: Okay.

Brandon P.: So, this is the book I'm reading when I'm at home, trying to figure out why the heck I was bawling at the lieutenant's office. I thought, "Okay, you've got a three-year-old, eating a fruit snack, and died. How can I give meaning and purpose to this?" The more I thought about it, I was thinking, I cannot imagine—maybe just a little bit of detail but help the mother of the child. She was really young. This was her only child. They hadn't been married that long, husband's at work. So, you've got this really young mom who is home alone with this three-year-old. And like I said, when she brought him to me, he was dying. There was no maybe about it, he was obviously in distress.

And I cannot imagine how desperate that moment was when this kid started to choke, started to deal with this, and mom had to act and was all alone. And as I thought, she could pick up the phone, call 9-1-1, and someone came lights and sirens, someone tried to help—meaning she didn't have to go through it all alone.

John B.: Exactly.

Brandon P.: And as I thought about that, I thought, "I wouldn't want to go through that situation alone."

John B.: No.

Brandon P.: So, I thought, "I think there's value there." I think there's value in maybe like a pain shared is pain divided kind of thing. And if there's value there, then that helps me better. And that kind of helped me unpack it. Like, even though I didn't save the child, I did perform service that day, and I helped.

John B.: You're mission driven. It's interesting too, Brandon, because we do a lot of work on the wellness side and you are one of our wellness instructors. And we always talk about the concept of resiliency. So, how do we enhance resiliency? And I'm in the camp of positive psychology. One of the things that I learned is that resiliency, the actual concept of resiliency is a combination of optimism and control, okay? You have to be somewhat optimistic about your future, but also with controls to understand that things will turn out as well as could be reasonably expected. In other words, you have to set that bar. Now, what I mean by that is that we can't control everything, but we have to have an understanding that things will turn out as well as reasonably it can be expected, which is what you're talking about right now—that we're not going to save the world.

It's not going to happen, okay? As much as we're told, the concepts we have before we get to the job and when we get to the academy, then we get to the street—we'll have these, these concepts that we are going to save the world, and we don't go out and save the world every day. But then there are moments when what you do matters, right?

Brandon P.: Yes.

John B.: And you had that moment.

Brandon P.: Yes.

John B.: And the outcome was not positive, but at the end of the day, like you said, this poor woman all by herself in one of the most traumatic, catastrophic, events of her life, when she dialed 9-1-1, she was hoping someone would come and you went there.

But again, from the standpoint of compartmentalizing this, we have to understand that it's not always going to be a happy outcome, right? It's just not going to happen. So, how do we get into that box and push and push it down? How about this, how do we avoid allowing that event to happen? How do we avoid pushing that box down, pushing that box down, pushing that box down? And for you, the situation occurred in lieutenant's office. For other people, it could happen at home, it could happen on the street, it could happen on another call. How do we avoid pushing down those boxes to the point where they explode?

Brandon P.: I think number one is there needs to be a measure of courage to face these things. I can speak for myself—I did not want to feel those things. I did not want to feel vulnerable. I didn't want to face it, and I didn't have the courage to do it until I got punched in the face with it. And the lieutenant's office—maybe not the most ideal location, but there could be worse. The courage to face it and then the emotional maturity to let yourself feel vulnerable and deal with it—talking about it is extremely helpful, but we're not all talkers. There are different things that we can do. Peer support teams are becoming ubiquitous in law enforcement, and what a great resource they are.

John B.: They are.

Brandon P.: But sometimes we don't want to talk to somebody in our department. So perhaps there's somebody in another department, if you're on a multiagency SWAT team or something, you've got someone you trust

talking about it. Or mindfulness practices, meditation, yoga—just small steps, one at a time. And I wouldn't do Pandora's box and let it all come out at once, but maybe start thinking about individual boxes that we have stuffed on the shelf back there and start dealing with them.

John B.: Start addressing that ones that are definitely bothering you the most. And I think one of the other things too, I've heard officer's doing is they journal it. They put their emotions down on paper.

Brandon P.: That's a great idea.

John B.: Yeah. And I think there's something you said. I always talk about the concept of unpacking to let it out. By swallowing it and holding it down, it's just choking you. And that's the problem—if you have one box, that's one thing, Brandon. And I'll challenge any law enforcement officer in the country and say—some of us have freight trains of boxes, right? But we all have multiple boxes that are sitting inside of us, these little compartmentalizations of events that we are trying to not think about, but our subconscious mind won't let us forget them, right? And it comes out. So, I think the important lesson here is that in facing the crisis and WIN, the what's important now concept matters, right? Because when faced with a crisis, it's mission driven. You have to drive through, right? You have to push through. But I also want people to understand that if you come out of that and something just doesn't feel right, it's okay to not be okay, correct?

Brandon P.: Yes. I love that message. And we are doing way better in law enforcement with that. We're human beings. We're seeing things that are outside the bounds of normal human experience. It's going to impact us.

John B.: And my suggestion to every one of our listeners is to—number one, they should be well aware of the fact of what their agency has to offer. And I'm not saying that every agency has the perfect solution. So, let's drop that for a second. And even if you have an agency that does not have that perfect solution, you need to look outside your agency and find those resources. There are a certain amount of accountability and responsibility that you have to take for your own emotional health, right? And your own physical health to fix yourself—the agency has a part to play and there's no doubt, I'm a firm believer in that, but also you have some responsibility to say, "Hey, I'm a little off," and find the ways to get back. Homeostasis is a term used a lot, right Brandon?

Brandon P.: Yes.

John B.: How do you find that leveling point that you can operate where this no longer tugs at you constantly? In Provo—how can I handle that in Provo when I have an issue? Say now I am the officer coming into you and you're the lieutenant. What's the process?

Brandon P.: I'm excited about the program we've got going. We did something a little unique where we were able to partner with the local university and get a baseline assessment. So, it was an anonymous survey. We got a baseline of where we're at so we could then begin to try and take measures to improve our officer health and wellness and then go back and remeasure afterward to see if we are effective. Some of the programs we've got available—obviously we have a peer support team. We've partnered with a local mental health professional, who—their emphasis is on law enforcement. And so, they've provided all the training. They're a constant resource to our peer support team. We've got a large peer support team, so hopefully people who want to talk to someone can find someone on that team that they're confident in, that they can trust and deal with.

Obviously, wellness is not a single aspect. True wellness is holistic, meaning whole person—emotional, mental, physical, spiritual. So, we have different health reimbursement programs. We have a program where individuals—it's capped at \$150 a year, but individuals can spend money on their own wellness. So, if they don't want to use our EAP or they don't want to use a support team, if they want to get some counseling, then at least \$150 of that's going to be reimbursed by the department. No questions asked as long as they can show a receipt and prove purchase. But then, it's not boiler plate. If another individual wants to buy a rowing machine to put in their home, that's also—because obviously fitness is an absolutely measurable—

John B.: Coping mechanism.

Brandon P.: Yes. So, there's all different kinds of things that they can do to try and encourage their own wellness in that aspect. We have a point system that people get points and can actually earn up to 20 hours a year in employee recognition time to add to their employee bank. And there's all different kinds—I mean, reading, mental pursuits, taking lessons. I do jujitsu lessons. If somebody's doing music lessons or something like that, you can gain points. Exercise, activity, going to your doctor—there's just different things and some attempt to encourage overall wellness.

John B.: So, you're pushing wellness to the forefront?

Brandon P.: Yes.

John B.: And not this thing that hangs out in the employee assistance program—that in case of emergency break glass, right? You are doing prevent the maintenance?

Brandon P.: Correct.

John B.: And I think that's fantastic. And I also want to make sure that those who are listening understand that we're not preaching. We get the need to compartmentalize what you're doing—I get that. I've done it. Brandon, you've done it. We have to do that. What we're trying to say with today's program is, "Please don't suffer in silence. We're trying to smash the stigma." And I know that sounds like a catchphrase or a bumper sticker phrase, but we mean that. We're looking for a paradigm shift in law enforcement, where we look at the holistic officer—every aspect of the officer. Not only on how they perform in the street, but their physical health, their emotional health, their family's health. So, I think in order to have that happen, we have to understand that we have to be part of the process and we need to raise our hands, right?

Brandon P.: Yes, absolutely.

John B.: And I think that's where we want to end with this. Compartmentalize in the moment that is a tactic, right? That is a tactical advantage that you're able to give yourself in order to get through some of the most horrific events that you've experienced. But at the end of the day, when it starts bubbling, address it. Address it when you can before it becomes a bigger problem.

Brandon P.: Excellent said.

John B.: Yeah. And I think that's what we're talking about here. So, compartmentalization is a good tactic, but in the long-term, you have to find a way to unpack it, and you have to make—I used to call it making friends with the memory, as hard as that can be sometimes. You basically said that yourself. You have to make friends with the memory.

Brandon P.: Yep.

John B.: It might not be the perfect friend, but you have to do something because it can haunt you.

Hey, Brandon, thank you for joining me today and providing such detail about that event you were involved in and sharing that with our listeners.

Brandon P.: Thank you for the opportunity, John.

John B.: No, I appreciate it. I know you're a busy guy and I know time's precious, so thank you. I will also encourage our listeners to visit the SAFLEO website, that's www.S-A-F-L-E-O.org for more information, not only about this topic, but other officer safety and wellness topics that we cover as part of our SAFLEO Program. So, for all our listeners, be well and stay safe out there.

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 visit safleo.org, that's S-A-F-L-E-O.org. Follow us on Facebook and Twitter.

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