

Prioritizing Mental Health in Law Enforcement:

Tools and Insights for Officers, Instructors, and Leaders



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Why Prioritizing Mental Health Matters

Mental health is part of the job, whether it's acknowledged or not. Officers face cumulative stress, disrupted sleep, and high-stakes decisions that shape both performance and long-term wellbeing. This guide offers practical, informed guidance on maintaining readiness—physically, mentally, and emotionally—through the real demands of the work.



Note: This guide is not a diagnostic tool and is not a substitute for clinical care. It does not provide medical advice. Instead, it outlines what science and experience tell us about how stress functions, what recovery can look like, and how agencies and individuals can strengthen support at every level.

The recommendations in this guide are drawn from neuroscience, field observations, and conversations with professionals who understand both the demands of the work and its human cost. The goal is to provide tools that help law enforcement personnel—and those who train and support them—navigate this profession in a sustainable way.

Each section focuses on a specific factor that affects wellness, from sleep and resilience to agency culture and recovery after critical incidents. Every topic includes practical takeaways for officers, instructors, and agency leaders. We built this guide because we've seen the toll the job can take—and because we care about the people who carry it out every day.



Due to their overall responsibility to serve and protect the community, self-care is especially critical for law enforcement officers. The public cannot expect officers to perform at their best when facing their own personal challenges. We must eliminate the stigma associated with seeking and receiving behavioral healthcare within the law enforcement culture.

— **Kevin Fischer**, Executive Director of NAMI Michigan

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Just as ultimate preparedness is the goal of simulation training, so too should be the complete recovery of the first responder. In order to achieve this, equal value must be placed on both.

— **Yael Swerdlow**, CEO and Founder of Maestro Games, SPC

The Impact of Sleep Deprivation

Most officers are familiar with operating on limited rest. Long shifts, forced overtime, irregular schedules, and court obligations all interfere with recovery. Over time, the effects of sleep loss will affect reaction time, decision-making, emotional control, and memory.

A single disrupted night can make it harder to focus and increases the chance of making mistakes. Ongoing sleep disruption is associated with higher rates of physical and mental health issues, including increased risk of injury, cardiovascular strain, mood instability, and difficulty recovering from stress exposure. The following tips can help reduce the impact of sleep deprivation:



For Officers

- Make sleep a priority when off-duty. Use recovery time as part of your preparation for the next shift.
- Limit caffeine and screen time close to rest periods, especially after night shifts.
- Stick to a consistent routine when possible. Irregular sleep patterns disrupt the body's ability to reset.
- Watch for signs of impaired focus—repeating instructions, slow recall, or poor emotional control.

For Instructors

- Pay attention to how fatigue shows up during training: slower responses, short tempers, repeated mistakes.
- If a student is clearly operating while sleep-deprived, adjust expectations and scenario intensity when possible.
- Use debriefs to reinforce the connection between recovery and performance.
- Include fatigue awareness in scenario-based feedback, especially when reaction time or judgment is impacted.

For Leaders

- Build schedules that reduce short turnarounds between shifts
- When possible, offer protected rest time during extended operations.
- Make rest and recovery part of your operational language—not a side note.
- Include education on fatigue as part of wellness efforts or early-career training.



Sleep loss and fatigue aren't always avoidable, but they're some of the most preventable contributors to performance breakdown. Addressing them early helps protect both safety and long-term health.

— **Lois James, PhD**, Director of Washington State University's Sleep and Performance Research Center



The Neuroscience of Resilience

Resilience is the capacity to stay focused, recover after stress, and adjust to changing conditions without losing effectiveness. It plays a critical role in how officers perform during and after high-pressure events. This capacity to adapt after activating our nervous system is part of our brain's neuroplasticity, and can be built over time through reflection and recovery.

When the brain registers a threat, it initiates a set of automatic physical and cognitive responses: narrowed attention, increased heart rate, faster breathing, muscle tension. These are survival responses, useful in immediate danger. But when the system stays activated too long, or when it's triggered too easily, it becomes harder to make decisions, remember key information, or stay emotionally steady.

Building resilience means shaping how the nervous system responds to pressure—training it to return to baseline after activation. That process requires awareness, and willingness to address the stress of the moment.

For Officers

- Notice your physical signs of stress—clenched jaw, shallow breathing, fatigue, chest pain, upset stomach, racing thoughts—and use them as a cue to reset.
- Practice recovery as part of endurance training. View rest as a sign of strength, not weakness.
- Repetition can help. Running similar situations multiple times in a controlled setting, and including methods to reset the nervous system can help the brain build patterns.
- Talk through tough calls with someone you trust. Processing the experience in healthy ways can help reduce the long-term impact.

For Instructors

- Use scenario training with biometric feedback to help students learn how their bodies respond under pressure, not just how to complete the scenario.
- Allow time for short recoveries between runs if intensity is high. Even brief pauses to control breathing can help students reset an active nervous system.
- Include questions that target internal awareness, like “What changed in your body when things escalated?” or “What helped you stay focused?”
- Reinforce the idea that adaptability is a skill, not a fixed trait.

For Leaders

- Offer time and space for recovery after high-stress incidents—even brief to regroup.
- Normalize conversations about stress during shift briefings or after-action reviews.
- Support training that includes regulation strategies alongside tactics.
- Set a tone that prioritizes long-term wellness as part of performance.

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There's an opportunity for growth embedded within every challenge, beyond simply pushing through it. When you can shift your mindset in moments of stress to focus on the potential for improvement, you transform resilience from simple recovery into a foundation for lasting growth.

—**Ryan Curl, PhD**, Cognitive and Behavioral Scientist

What Good Support Looks Like

In many cases, support shows up not through clinical settings but how people talk to each other after a hard call, how leaders respond to stress in their teams, or how instructors handle debriefs. The quality of that support can significantly affect how officers recover from stress—and whether small problems grow into larger ones.

Some officers avoid talking about their stress because they don't want to appear weak or risk being sidelined. Others have tried to speak up and were dismissed. Over time, those experiences shape how people carry stress, and whether they believe asking for help is even an option. Sometimes all it takes is presence, consistency, and knowing when to bring in an expert.



For Officers

- Identify one trusted person you can call when you need help. Let them know you might need to reach out sometime, so they'll know to expect it.
- Learn to recognize when you or someone else is showing signs of stress, like withdrawing, becoming short-tempered, or carrying more than they're saying.
- Check in with teammates after high-stress calls, even briefly. A simple "You good?" or "Need a minute?" can go a long way.

For Instructors

- Use debriefs to create space for honest reflection.
- Watch for patterns that suggest a student is carrying stress across multiple sessions.
- Set the tone that struggling with stress is a normal part of the job that can be managed.
- When appropriate, connect students with peer support, mentors, or wellness resources.

For Leaders

- Talk about wellness the same way you talk about safety or readiness—consistently and without stigma.
- Create space for private check-ins.
- Model what support looks like in practice: with active listening and follow up.
- Avoid language that minimizes stress or labels officers as problems for struggling. What gets said at the leadership level shapes how the entire team responds to stress.



We dedicate countless hours to tactical training yet often overlook the most crucial tactic of all—mental well-being.

— **Brian Uridge**, Senior Director of Michigan Medicine Safety and Security at the University of Michigan

Mental Health in General Terms

Most officers will face mental health challenges at some point—whether in themselves, in a teammate, or in the communities they serve. This section breaks down common signals of deteriorating mental health to help people recognize patterns, reduce stigma, and understand when to take something seriously. Again, this is not to replace a professional diagnosis.



For Officers

- If something feels off for more than a few days, pay attention.
- Talk to someone you trust, even informally. Sometimes saying something out loud helps you hear it more clearly.
- Use your resources—EAP, peer support, chaplains, clinicians who understand the job. You will not be the first or only one using them; you cannot bother them enough, they exist to serve you.
- If someone else seems off, bring it up quietly. Just check in. “Are you okay?” goes a long way.

For Instructors

- If a student shows signs of withdrawal, heightened reactivity, or unusual changes across multiple training sessions, make space to check in.
- Be careful with humor or commentary that could shut down conversation. Some people test the waters before they say what they really need to.
- Know what resources are available in your agency or academy and how to refer someone without escalating it unnecessarily.
- Be the steady person in the room—not the fixer, not the counselor, but someone who’s paying attention.

Signs of Trouble

Stress That Doesn’t Go Away

After a critical incident or high-stress stretch, most people need time to settle. If someone is still feeling on edge weeks later, it may not be temporary anymore. Irritability, hyper-awareness, difficulty sleeping, or avoiding reminders of the event can be signs of unresolved stress.

Withdrawal or Numbness

If someone who’s usually engaged becomes detached or emotionally flat, it might be more than burnout. Some people shut down rather than escalate. It can look like they’re fine, even when they’re not.

Sleep and Appetite Changes

Lack of sleep is common in this work, but it’s worth noting if someone’s pattern shifts suddenly, or they’re not eating, or eating way more than usual. These changes often show up before the person is aware of what’s going on.

Low Mood That Sticks

Everyone has bad days. But if someone seems stuck in a low or negative mindset for a week or more—especially if they’ve lost interest in things they usually care about—it could signal depression.

Increased Risk-Taking or Short Temper

Sudden changes in behavior, like speeding, impulsive decisions, or unusually aggressive reactions, can point to internal strain even when the person insists they’re fine.

When we stop making people hide their hurt, we start giving them a real chance to heal.

—Joe Smarro, author, speaker, and CEO of SolutionPoint+

For Leaders

- Make wellness conversations a routine part of supervision, not something reserved for when someone is struggling.
- Train supervisors to recognize common signs of stress-related conditions and how to refer without judgment.
- Build relationships with culturally competent mental health providers—people who understand law enforcement culture and language.
- Ensure policies support early engagement with help—not punishment, forced leave, or stigma.

Resources and Action Steps

Mental readiness develops over time and needs regular attention to stay strong. Like any professional skill, preserving your health benefits from reinforcement, reflection, and support from the people around you. This section offers practical tools, questions, and resource options for officers, instructors, and leaders—whether you're supporting someone else, shaping a program, or checking in with yourself.

These tools are designed as starting points. They don't replace formal care or agency policy, but they can help you recognize when something needs attention and show where to go next.



For Officers

Self-Check Questions

- Am I sleeping, eating, and functioning in a way that feels steady?
- Have I been withdrawing from people or avoiding things I usually care about?
- Has someone close to me mentioned a change in how I'm acting?

When to Reach Out

- You don't need to wait until something becomes a crisis. If it's on your mind more than once, talk to someone.
- Most agencies have peer support, chaplains, wellness coordinators, or EAP access. Ask what's available.

Trusted National Resources

- **Copline** – 1-800-COPLINE (267-5463): 24/7 confidential peer support from retired law enforcement officers.
- **National Suicide Prevention Lifeline** – 988
- **ResponderStrong** – resources for first responder wellness
- **Safe Call Now** – 1-206-459-3020: confidential, 24/7 help line for public safety professionals
- **24/7 Crisis Text Line** – text the word “BLUE” to 741741.

For Instructors

- Build in small moments for reflection after intense scenarios—two minutes of quiet, or one question that invites a non-tactical response.
- Encourage students to pay attention to their own recovery patterns: how long it takes to refocus, how they handle feedback, what lingers after a hard run.
- Maintain a list of referral options—both formal (EAP, clinicians) and informal (peer mentors, trusted officers).
- Normalize mental readiness language during training.

For Leaders**Agency-Level Actions**

- Audit your post-incident protocols. Do they include wellness checks, time for recovery, and a path to return without stigma?
- Review what supervisors are trained to look for—and how they're expected to respond.

Policy Questions to Consider

- Are officers clear on how to access help without triggering unnecessary review?
- Is there a formal peer support network? If so, is it being used?
- Do wellness-related issues show up in retention, sick time, or complaints?

Culture and Communication

- Keep messaging steady. Talk about mental health the way you talk about safety, readiness, or training: with clarity and without judgment.
- Model the balance you want others to maintain—especially during high-pressure periods.



When wellness becomes part of our everyday conversations, not just something we talk about after a crisis, we begin to shift the culture. Officers stop feeling like they have to earn the right to hurt and start seeing mental health as part of readiness, not a weakness to hide. Staying healthy, mentally and physically, isn't just about survival; it's about being able to give our best to the communities that count on us every day.

—**Andrew Domzalski**, CIT Instructor, Current Law Enforcement



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