

What Keeps the Highest-Risk Officers from Getting Help? Research on Wellness Program Use in Law Enforcement

Key Takeaways

- Officers and staff with the most severe psychological and physical health challenges use mental health and mentorship wellness programs at the same rates as the healthiest personnel, despite having the greatest need.
- Civilian staff use wellness programs at significantly lower rates than sworn personnel across nearly every program type.
- Survey responses from personnel across nine agencies found high overall wellness program use (76 percent), but participation patterns reveal that those who need help most are not the primary users of targeted services.

Why This Matters

Law enforcement agencies have invested heavily in wellness programs to address high rates of stress, trauma, and poor health among officers and staff. Many agencies offer services such as counseling, peer support, and physical fitness programs, but it has been unclear whether the people who need these programs most are the ones who use them.

Prior studies have found wide variation in program participation, with rates ranging from 17 percent to 75 percent depending on the study and population. Other research has found that personnel's mistrust of agency-run programs, concerns about confidentiality, and limited awareness of available services can all reduce participation. Separate research has shown that law enforcement personnel can be grouped into distinct categories based on their psychological and physical health, but it has remained unclear how these different health groups use wellness programs.

This study fills that gap by surveying 1,216 sworn and civilian personnel across nine law enforcement agencies, first identifying distinct health groups among staff and then examining how each group used agency-provided wellness programs.

How the Study Worked

Researchers surveyed staff at nine law enforcement agencies across the country, including seven local police departments, a state police agency, and a tribal law enforcement agency. The survey asked about psychological and physical health (such as anxiety, depression, physical fitness, and post-traumatic stress disorder (PTSD) symptoms), as well as personal use of 32 different wellness programs, including counseling, mental health, physical health, mentorship, and family support services.

Researchers first used a statistical technique to sort personnel into distinct groups based on shared patterns in their health responses, rather than relying on a single health score. This approach allowed three meaningful groups to emerge naturally from the data rather than being defined in advance. The researchers then compared how each group used wellness programs, while accounting for other factors such as job position, gender, tenure, and agency, to ensure differences between groups were not simply explained by these characteristics.

What Was Learned

- **Three distinct health groups emerged among personnel.** About 47 percent of staff had the healthiest profiles, with low anxiety, depression, and pain, and only 4.8 percent screening positive for PTSD. About 38 percent had moderate health, with about 20 percent screening positive for PTSD. The remaining 15 percent had the most severe challenges, with high anxiety, depression, and pain, and nearly half (46 percent) screening positive for PTSD.
- **The healthiest group was less likely to use counseling and mentorship programs.** Only 32 percent of the healthiest group used counseling programs, compared to 49 percent of the moderate health group and 46 percent of the most severe health group. A similar pattern appeared for mentorship programs, which were used by just 38 percent of the healthiest group compared to 46 percent and 45 percent in the other two groups.
- **The group with the most severe health challenges did not lead in any program category.** Despite having the greatest psychological and physical health needs, this group's use of counseling, mental health, and mentorship programs was statistically similar to or lower than the moderate health group and was never the highest of the three groups for any program type examined.
- **Civilian staff used wellness programs far less than sworn staff.** Across nearly every program category, civilian personnel had significantly lower odds of participation than sworn officers, even after accounting for other factors.

What This Means in Practice

The clearest takeaway for agencies is that personnel with the most severe psychological and physical health challenges are not reliably reaching the programs designed to help them. Despite facing the greatest wellness concerns, this group uses mental health and mentorship programs at rates comparable to or lower than colleagues with better health, suggesting that current outreach and engagement strategies are not effectively connecting with those who need support most. The authors also note that civilian staff—who make up a meaningful share of most agency workforces—remain a consistently underserved group, with significantly lower program use across nearly every category compared to sworn personnel.

The authors point to prior research suggesting that barriers such as limited awareness of program availability, low psychological health literacy, and concerns about confidentiality may help explain why personnel who would benefit most from these programs do not always use them.

Source article

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