STRESS RESULTING FROM POLICE SHOOTINGS

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I had always said that if I ever had to deal with someone who had killed a child, I would take them into the woods, shoot them in the head, then go and have a sandwich for lunch. Little did I know the day would come when I would be faced with the choice of eating the sandwich or eating my words.

Arkansans never even heard the news! It happened during the same time period as the Westside School shootings in Jonesboro. With such a tragedy in our state garnering national and international press attention, another mass murder occurring in rural Arkansas was second-page news. Five people, including three children, were murdered in a small community in Jefferson County.

Clay King Smith had brutally murdered his 20-year old girlfriend, the girlfriend’s cousin, who was 24 years of age, and three children. The children were ages 3, 5, and 12. All victims had died after Smith shot them with his .22 caliber rifle. The victim’s bodies would not be found until two days after their deaths. The father of one of the children located them inside the mobile home where Clay had slaughtered them. Clay King Smith was quickly named as a suspect in the case and he would soon be located in a home in rural Lincoln County.
The plan for capturing Smith involved personnel from the Lincoln and Jefferson County Sheriff’s Departments and me, representing the Arkansas State Police. Deputies were to be stationed in locations to cover the front and rear doors of the house where Smith was believed to be located.

As an Arkansas State Police sniper, I took a position on the perimeter with my rifle just in case things didn’t go as planned. Trust me! They didn’t go as planned!

Before the back door could be covered by a deputy, Smith saw us approaching the house and immediately ran out the back door towards the woods. Smith was running with the rifle in his right hand. Occasionally he would turn and look back at me and the other officers who were chasing him through the woods.

Smith was apparently not in the best of physical condition and soon stopped running. When he stopped, he turned towards me and the other officers and yelled, “shoot me!” I remember thinking that I couldn’t believe this was happening. I was standing in the woods, facing an armed, low-life killer of women and children, and I had to make the decision of whether to kill or talk.
The lead investigator of the murder investigation began talking to Smith, asking him to put down his gun. Smith kept saying that he was “sorry about the kids” but that “they were in a better place.” I quickly took a position approximately forty-five yards away from where Smith was standing. I watched Clay Smith through my rifle scope. Things became very tense when I observed Smith place his finger on the rifle’s trigger.

For whatever reason, Smith could never get the nerve to point the rifle at us and force us to shoot him. He would put his finger on the trigger and then take his finger off the trigger. Just as I thought the worst was about to happen, he would always take his finger off the trigger and start talking. Sometimes his talking was nothing more than antagonizing us to kill him.

It finally became obvious something had to be done. The decision made was something I had always been told not to do. I would shoot the subject. Not to kill, but to disarm! At one point, Smith held his rifle straight up into the air and said, “why don’t you just shoot me?” At that instance, I fired one round, striking him in his right bicep. Smith immediately dropped his rifle as the 25.06 caliber bullet from my sniper rifle knocked him to the ground.
The feeling of relief was overwhelming but was quickly followed by a deep feeling of guilt. I tend to blame the guilty feelings on my upbringing. I had always been taught that you shouldn’t hurt other people, much less shoot them. I couldn’t believe that I actually felt the need to go apologize to Smith for shooting him. I had just disarmed a very dangerous person in a very dangerous situation! I had just helped apprehend a murderer without trying to kill him and I was feeling guilty! Guilty! How could this be?

Soon after the shooting, I was asked a barrage of questions from almost everyone present, including; my Troop Commander, Criminal Investigation Division Investigators, the Prosecuting Attorney, EMS Personnel, and fellow officers. After all the questioning and the departmentally required drug test, I was told to go home and get a good nights sleep. I thought they were kidding! Sleep was the last thing I wanted to do! I was being driven by all the adrenaline still pumping through my body.

I felt the need to talk to someone other than the “police” about my experience, so I called my daughter and my parents. It seemed to help just being able to talk to them and knowing that they were aware of what had happened. Later that evening
two close friends of mine came over to talk and see how I was doing. I must have
told my story forty times over the next few days, but would relive it in my mind over
one-hundred times during the first night and the days that followed.

The one recurring question that kept being asked by others, and one that I
kept asking myself was, why didn’t you kill him? The only answer I have ever been
able to come up with was, I didn’t have to.

**Why Be Concerned For the Officer Involved In the Critical Incident**

In the article, *Not So Obvious Police Stress*: (1993), Ronald Terry Constant
writes: The law enforcement profession has one of the highest suicide rates in the
nation compared to other jobs. Our profession is also high on the list when it comes
to the divorce rate and many police officers are problem drinkers.

A foremost stress researcher, Hans Seyle, said that police work is “the most
stressful occupation in America, even surpassing the formidable stresses of air traffic
control.” When you place the additional stress of a critical incident on top of an
individual working in a profession which is known to be highly-stressed, it is
imperative that we, as department supervisors, tend to the needs of the affected officer and the officer's family.

Law enforcement agencies make a huge investment in a newly hired officer. Agencies will spend thousands of dollars investigating the candidate's background, conducting psychological, physical and polygraph examinations. More dollars will be spent on those who pass as they are properly trained and equipped as new police officers.

The longer an officer works, the more time and money the department has invested in them. One question I feel must be asked is why departments would not always be willing to take better care of their investment. All officers should be given the opportunity for emotional help when needed, but officers involved in critical incidents must be given that help. Some departments may strive to make sure that officers are taken care of physically while sometimes neglecting their officer's emotional health.

Thinking back on my own personal experience, the most help that I received from the department was a few “free” days off. Granted, the supervisors and investigators who responded to the scene of my shooting were very compassionate
and concerned for me. But, I had to deal with the stress of what had just occurred in my own way. In my eight weeks of the Police Academy and ten weeks of Troop School, they never taught one course on how to deal with what I was going through.

I guess so few officers are involved in a shooting situation that the developers of the course curriculum didn't feel it was important. Or, maybe the mentality that “men don’t cry” and “you’ve got to be tough to be a cop” still rears its ugly head from time to time in our profession.

According to Laurence Miller, *Law Enforcement Traumatic Stress: Clinical Syndromes and Intervention Strategies* (2005), in the United States, two-thirds of officers involved in shootings suffer moderate or severe problems and about 70% leave the force within seven years of their critical incident.

We owe it to our officers to take care of all their needs. From making sure they are safe, to making sure that they have the means and opportunity to take care of their mental health following a critical incident. Supervisors must be aware and take the steps necessary to offer, and maybe even demand, support and help in a way which is neither embarrassing nor rejected.
I believe it is imperative that we train our supervisory staff, and maybe even more importantly, the men and women in the field, with the knowledge to recognize the signs and symptoms of stress which an officer may display following a critical incident.

Knowing whether or not an officer is having a problem dealing with a critical incident will better enable the department’s supervisors to secure and provide the needed help. Key to providing the help the officer may require is being mindful that, more times than not, the officer will be unwilling to ask for such help. Once assistance is provided to the officer, then, and only then, can it be said we are taking care of the department’s investment and more importantly, taking care of the person.

The Signs and Symptoms of Post-Traumatic Stress Disorder (PTSD)

Post-Traumatic Stress Disorder, or PTSD, in police work is generally associated with a critical incident that an officer is involved in. Most all of us remember our first fatal accident or murder crime scene. Critical incidents may include; shootings, fatal vehicle accidents, fire involving death or serious injury, and other gruesome crime scenes. All officers who do the actual “work” of the department will eventually be faced with something that will qualify as a critical incident in their lives.
Responses by officers to these various critical incidents are as varied as the officers themselves. Some officers deal with what they have seen by making jokes. Some officers may break down and cry openly, or, and more commonly and to protect our “macho” image, will hold it in until we’re behind closed doors. Some may become physically sick and throw up. All of these are normal early responses to horrible scenes, but how does our mind and body handle these sights and smells over longer periods of time?

In some cases, “the traumatic critical incident can precipitate the development of full scale” post-traumatic stress disorder (Miller, 1994, 1998c). Symptoms may include numbed responsiveness, impaired memory, alternating with intrusive disturbing images of the incident, irritability, impaired concentration, sleep disturbance, anxiety, depression, phobic avoidance, social withdrawal and substance abuse.

Officers may display one or more of the previously listed symptoms. However, not all the symptoms are easily recognizable. For example, officers may begin to drink heavily following a critical incident. The officer may become talented at hiding his problem. The drinking problem usually doesn’t come to light until the officer is
involved in an alcohol related incident (DWI, coming to work with a hang-over or under the influence).

**What Officers May Experience During and After a Shooting Incident**

David Klinger, Associate Professor of Criminology and Criminal Justice at the University of Missouri-St. Louis, (2005) conducted research on officer involved shootings. The research dealt with what officers experienced during shootings and what they experienced after the shooting incident. The following information was taken from this research.

Of all the officers researched, the most commonly experienced physical response experienced following a shooting was trouble sleeping. Almost half of all officers (48%) reported this response, followed closely by those experiencing fatigue (46%). The third most common physical response was only cited by a quarter of respondents. Twenty-four percent (24%) admitted to crying after involvement in a shooting incident.

In this same study, 49% of the officers indicated that at the actual time of the shooting, the thought going through their mind was their fear for the safety of others.
The feeling of an adrenalin rush was the second most indicated thought at 46%, a disbelief of what was taking place was experienced by 34% and a fear for their own well-being was indicated by 30% of the officers.

Officers may, as time passes, lose their appetite, have trouble sleeping, experience recurrent thoughts or “flashbacks” of the shooting incident. Officers may feel guilty about injuring or killing another human, and/or experience a host of longer-term responses to the shooting event (e.g., Nielsen, 1981; Solomon and Horn, 1986; Campbell, 1992).

In Nielsen’s (1981) study of 63 municipal, county, and state law enforcement officers, 90% experienced at least one physical symptom, such as nausea, headaches, and general fatigue, and nearly 90% of the shooters experienced at least one emotional or psychological symptom, such as depression, anxiety, or intrusive thoughts about the incident.

I do not recall being concerned for myself during the Smith incident but being concerned for the well being of the other officers involved. I was also concerned for Smith’s brother who had been brought to the scene to try and persuade him to
surrender. I would classify guilt about shooting Smith, and recurrent thoughts about the incident, as being most prevalent following my shooting incident.

**Another Officers View - Interview of Captain Dale Saffold**

On Tuesday, November 1, 2005, I interviewed Captain Dale Saffold of the Arkansas State Police. Captain Saffold, (yes, he is my brother) was involved in a shooting incident, following a lengthy pursuit which ended approximately sixty miles inside Mississippi.

The suspect attempted to run down the Captain and other officers with his vehicle after running off the highway. Captain Saffold along with other officers fired several rounds striking the suspect and ending the pursuit. The information below is obtained from my interview.

“I felt great compassion for the suspect once I realized he had been shot.” Saffold stated. “We had been pursuing this subject from Lake Village, Arkansas, across the Greenville River Bridge and south on Mississippi Highway #1. I remember feeling the adrenaline pumping in my body. This pursuit had gone on for so long.
We, myself and Sergeant Randy Lewis of the Arkansas State Police, had become the secondary units in the pursuit as soon as Mississippi deputies became involved in the chase.”

“The suspect had rammed our car before crossing into Mississippi and we had reports he had seriously injured his girlfriend prior to being pursued by other officers.” When asked if the length of the pursuit added to their response at the end of the pursuit, Saffold stated, “it probably helped in that it gave us time to have some sort of a game plan, talk out what we were going to do if certain things happened. On the other hand, the fact that it went on so long probably wore us out, made us more tense and more motivated for a conclusion.”

At the time of the shooting, the suspect had ran off into a ditch and you got out of your unit to give chase? “That is correct. I exited Randy’s unit, knowing the suspect would flee into the woods. Instead, he accelerated his vehicle, ran down the ditch a short distance before turning and heading straight for me. I was between him and our unit.”

Wanting to stop the suspect, you fired several shots? “I basically emptied my clip into the truck. One shot apparently penetrated the driver’s door, completely
penetrating the suspect’s left leg and most of the way through his right. The injury was near his femoral artery and I remember having a fear he might bleed out before an ambulance could arrive or we could get him to a hospital.” “As bad as I wanted the suspect, it was a completely different feeling once I realized he was shot.”

Did you have any recurring thoughts about the incident? “I ran the scenario over and over again in mind for several days. I’m sure if the suspect had died, my response would have been much more severe when I think how I reacted just to the fact he was shot.”

“While I was completely justified in my actions, it is such an unusual event in an officer’s career, you really can’t prepare for it or know how you should feel. Having the support of fellow officers during such a time is always a help, however, knowing you’re about to have your actions viewed under a microscope by departmental investigators only added to my stress level at the time of the incident.”
What Departments Can Do For The Involved Officer

As supervisors, we have a duty and responsibility to take care of our personnel. When an officer is involved in a critical incident situation, and especially a shooting incident, it is critical that we take care of the officer and his or her mental and emotional well-being. Departmental responses to aid our officers vary greatly from each department.

Some departments require the involved officer to go to counseling following a shooting. Other departments leave the officer to deal with the incident on their own. Executives in smaller department’s, which normally have smaller budgets and thus not always in the greatest position to pay for assistance, would agree that they have plenty of room for improvement when it comes to dealing with mental health issues. Others want to help but are unsure or untrained in what they should do to help the involved officer.

One of the most important issues to overcome when it comes to mental health counseling for officers remains confidentiality. An officer who wishes to have a professional help them deal with the stress of a shooting must have the confidence that what is discussed in their session(s) will be kept confidential. Some have even
suggested that department officials should not know when an officer uses a department counselor.

The next most important issue to overcome is the officer having confidence in the counselor. If the officer has no confidence in the person doing the counseling then they are apt to just go through the motions in order to get the session over with.

According to Constant (1993) the department can do things immediately following an officer involved shooting that may help relieve some of the officer's stress. Getting other officers to handle the crime scene and removing the involved officer away from the public eye is one recommendation.

A second idea suggested by Constant is requiring everyone who needs to hear the officer’s story conduct their interviews at the same time. This will prevent the involved officer from having to relate the story over and over again.

Finally, by having officers who have been involved in similar situations available to talk to the officer is of great comfort. Talking to someone who has “been
there” and letting the officer know and understand that what he is experiencing is normal can be of great comfort. This would also give the involved officer a sense of concern from the department’s upper management and supervisory personnel.

Most of us involved in law enforcement will be fortunate enough to go through our entire career without ever pulling the trigger on our weapon except for qualifying on the firing range. For those who are in the minority, it is a shock when we realize this is really happening. Once the shooting is over it is time for the investigations and inquires to begin.

More importantly it is time for those of us in supervisory positions to take care of our people. If we spend a little extra time helping our officers and their families, it will be paid back many times over. You will have a bond with that officer that goes beyond supervisor and employee. You will have a bond with the officer for the rest of your life.
References


