Police Resilience Podcast

Episode 1: Resilience in Law Enforcement

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You are listening to The Police Resilience Podcast, a podcast from The International Association of Chiefs of Police and the Department of Psychiatry at Columbia University, where you'll hear from law enforcement leaders sharing wisdom, insight and perspective. This episode is funded by the US Department of Justices, Bureau of Justice Assistance through the VALOR Officer Safety and Wellness Initiative. The department's full disclaimer notice is available at the end of this podcast, and in the episode show notes. The views, information or opinions expressed during this presentation are solely those of the individuals involved and do not necessarily represent those of the IACP, Columbia University or BJA.

Jeff Thompson: Welcome everyone to the first episode. My name is Dr. Jeff Thompson. I'm with the Department of Psychiatry at Columbia University Medical Center. I'm also law enforcement detective involved in mental health. Let me be very clear, this is the Police Resilience Podcast. It's been created specifically for law enforcement across the country and across the world. This isn't about fluffy conversations, nope. It's about understanding the science behind real resilience and how we as police need to make sure we're taking care of ourselves. That's not selfish, it's smart.

And we're gonna jump in now with our first episode, and we have some really great guests. And the first guess that I wanna introduce is Dr. Golnaz Tabibnia and Dr. Tabibnia is a neuroscientist at the University of California in Irvine. She's received her PhD in Psychology at UCLA, and she was an assistant professor at Carnegie Mellon University in Pittsburgh. Her research focuses on the interaction of patient and reason in the brain, including such context as emotion regulation, impulse control, social decision making, and importantly, resilience. She uses those insights from neuroscience to explore novel cognitive or behavioral strategies from proven mental health and wellness and Dr. Tabibnia, it's awesome. Thank you so much to have you here with us.

Golnaz Tabibnia: Thank you for having me. It's great to be here.

Yeah, and importantly, before I introduce the chief next, everybody, please don't be wary of these great credentials she has. I know Dr. Tabibnia and she takes incredibly complex stuff and makes it easily accessible and importantly stuff that we can incorporate in our daily life, so it's... Thank you doctor for you being here.

Golnaz Tabibnia: Thank you for that.

[chuckle]

I don't want anybody leaving here in the first two minutes of our first episodes. So I hope they stick around because we like to strike that balance, with this podcast of having bonafide like legitimate, amazing experts in research and neuroscience as in your case Dr. Tabibnia. And we like to complement that with leaders, and leaders in the world of policing, and we're really honored to have, on this first episode, Dr. Kristen Ziman. She started as a police cadet at the Aurora Police Department back in 1991. She joined the police force in '94 as a sworn officer. She rose through all the ranks where in 2016, she was named police chief. Chief Ziman is currently the Vice President at large in the IACP's board of directors, and she's spoken widely about officer wellness practices. She's recently retired two months ago from her position as chief, but she is still incredibly active in...
law enforcement and making sure we're looking after ourselves. So chief, it's really great to have you here.

**0:03:16.0 Kristen Ziman:** Thank you, Jeff. It's so good to be here. I think I'm one of those people that, I think I might be on the wrong podcast with you guys, with your credentials. I have two doctors and a chief of police walks in. That feels like some kind of joke or something. So yeah, I will contribute as much as I possibly can from the experience level with your high level.

**0:03:40.3 JT:** Now, I have to add another disclaimer for clarity, she's kidding. She's on the right podcast, she was personally invited and if you're listening, you're in the right spot, stick around. And honestly, look, we're here to have a good time, but it's also we're here to share some really important stuff, and considering the name of this podcast is The Police Resilience Podcast, it's mainly dedicated to that term resilience. And again, how I said it before, and this isn't fluffy conversation, just saying the right stuff that people want us to hear, this is the IACP, and we have real conversations. And I'm very proud to be part of this because let's not sugarcoat it in the sense, this term resilience, especially in policing refers to responders seems to be one of the catchphrases that's being thrown around quite often, and what it is, what it's not.

**0:04:29.0 JT:** And I think a good way, perhaps to start us off is, I'm gonna give both the doctor and the chief my definition. I hope they're not gonna say I'm completely wrong or butchered. But I'm gonna give you both my definition of resilience, and it's a work in progress that I came up with this working definition based on the best research, as well as my experiences in policing as a member of law enforcement, but also being part of trying to develop programs that are practical and realistic and evidence-based, so here we go, buckle up. Here's my working definition. And I say working in case people don't like it, but I'm pretty happy with where I'm at right now.

**0:05:07.2 JT:** Resilience is taking ongoing proactive measures to sustain and enhance one's mental and physical health. Resilience is also using those measures to bounce back on tough adverse situations. Importantly, real resilience, especially in policing is reaching out for help when it's needed, regardless how strong with we are just like... I will call for help during a police call out there in the streets when we need assistance, there should be no different in our personal lives. Later on the podcast, I'll share some other important terms like perspective and control. But I'll stop there for the moment and I'll talk to you Dr. Tabibnia. First, what do you think of my definition? Be kind to me please.

[chuckle]

**0:05:46.6 GT:** Well, I couldn't be kind if I tried because I totally agree with that definition. I love it. First of all, it's in line with sort of how we define resilience in the science end of things. I define it really simply just in terms of adapting well in the face of adversity. But I really like the way you elaborated on that further by emphasizing that it's an ongoing thing, so it's a process, it's not a thing we're born with. It's a process that we can develop, so I think we're gonna discuss that a little bit more today. But I also loved that the emphasis near the end, you mentioned, at least in the context of policing, it's the importance of reaching out when you need help, so it's very action-oriented. And so I'll stop there, but I'm sure we'll come back to these themes throughout the discussion.

**0:06:40.5 JT:** Excellent, thank you so much, Doctor. Chief, what's your take?
0:06:44.7 KZ: Yeah, so I loved the definition. And I love it particularly because as the doctor mentioned, it’s like leadership, the old question remains, is a leader... Are you born a leader? Or, do you develop leadership skills? Do you become that? Right. And we often think that we are... Sometimes we come into the world with this skill of resilience and it just is dependent upon our nature as to how much resilience we come into the world with, and that must explain then why some people are better at coping and others are not, right? But what we actually have learned and from those of you who have done the work and the research is that you can build resilience, but there are tools that you have to really adopt in order to build it.

0:07:36.6 KZ: So I love that working definition, and I come from the culture of policing, everything is Mental Toughness, Suck it up and take the pain, you shouldn’t be here if you can’t handle it, and that is in complete... Truly in conflict with this idea of resilience, and so I have no formal credibility when it comes to this other than being a student of life, and especially as students of law enforcement, where you have come to realize that resilience is strong, is courageous. And when you ask for help, you’re exhibiting that courage, but yet it's often looked at as weakness, and so there’s that juxtaposition there that I’m just obsessed with delving into.

0:08:27.0 JT: Yeah, and before we dig deeper into the practices with Dr. Tabibnia, one thing that struck out a lot with you, Chief and what you said there, is that term you throw out strong and that whole old school mentality, suck it up buttercup and everything. One thing that also popped into my mind, and as a sidebar to our listeners, we know you’re listening to this, this is as interactive as you let it be, and I hope you’re thinking of stuff as the Chief just said that there and the interactive part, what’s something I came to my mind is also resilience, doesn't it come with a degree of vulnerability as well?

0:09:01.3 KZ: Yeah, absolutely, but that's... Therein lies the problem. That's the dirty V word. I mean, that is... Because we attribute that as a soft skill. The words like compassion and vulnerability and authenticity means that you have shed your armor, and in some way then that makes you susceptible to threats, and what we have to wrap our heads around of the idea is that those things are not soft skills, they're actually... That whole adage of respect does not mean trust. I'm going to give respect to someone, but I'm gonna watch their hands, it's this thing, it's like... So they're not mutually exclusive. You can have all of these and still be strong in the mind, mentally strong and stoic and courageous, but it's that vulnerability to ask for help is one of the hardest things that a human being can do.

0:09:51.9 JT: Yeah, especially in policing. Absolutely, it makes me think of among the different words you mentioned there, self-compassion, you mentioned compassion, and I just throw the word in front of... Self-compassion is hardcore resilience, and I'm not gonna get off on my tangents here too, but for the those people that aren't "buying into" what we're talking about, I know we're not the only two, that's where I have no problem, then you're the problem, and I don't think you should really be in part of policing and knocking down a brother or a sister when they're already down and telling them that they're not cut out for this. That's just awful. And it's not about the self-compassion, though also is not about giving people a free pass either. It's treating yourself the same way you would treat somebody close to you, and yet again, you tell me that's not strong.

0:10:38.7 JT: Dr. Tabibnia, I wanna throw it over to you because... And we're gonna make sure on the the page for this podcast episode, we have a bunch of resources and links, and you've got this amazing graphic, it basically encapsulates, I think, all resilience research in the past 50 years, give
or take. But you talk about evidence-based practices, which are truly, truly important, and that's one of the many reasons we have you here, can you share with us some of the neuroscience research behind effective evidence-based practices that actually work because... And then as we go through those, I wanna dig deeper because again, that's where you come back in chief, us being involved in law enforcement, these practices have to be practical that we as police can actually use otherwise it's just stuck in an academic book or journal that cops will be like, "What does this even mean?" So a lot of pressure on you, Dr. Tabibnia, if you haven't realized it, hit us with some of the awesome research, please.

0:11:38.4 GT: Oh, I would be happy to. So if you look at the 25 or so, best evidence-based practices that we know of for boosting resilience, and here, I guess I should define resilience a little bit more specifically, so this is like in terms of mental health outcomes, it could be psychiatric diagnoses or just subjective well-being, so how happy people say they feel, how well they say they feel, how well they report the quality of their life is, or even physical health outcomes like medical diagnosis, 'cause we know stress can affect obviously the body as well. So this is resilience, very broadly defined, but if we look at the 25 or so strategies that we have, so these are behavioral strategies or cognitive strategies, things that we can do is... This is not pharmaceutical stuff, this is stuff that we can all do.

0:12:27.3 GT: If we look at these strategies and examine what we know about each of these strategies, underlying mechanisms in the brain, the pattern emerges. So as you mentioned, I recently reviewed this literature to get a sense for us sort of what are the main pathways in the brain that we have for building resilience, and then what wisdom can we glean from understanding what those pathways are. So essentially, the pattern that I noticed is that there are essentially three general pathways to building resilience, so I guess if it's okay with you, I'll just give an overview of each of those three pathways and then we can discuss each of them in any detail we want.

0:13:07.6 JT: It sounds like a plan to me.

0:13:10.2 GT: Cool, so first, I'll talk about the one that most people have heard about, so this has to do with the pathways in the brain we have for processing negative emotions, particularly fear, so I think a lot of people have heard about the fear center in the brain called the amygdala. But the amygdala doesn't act alone, it acts with other parts of the brain and the body to process stress. We have also a stress response pathway through our body, known as the hypothalamic-pituitary-adrenal axis, this is where our stress hormones kind of are regulated. So the first category of strategies that I would wanna talk about is the category that I like to call downregulating the negative, so things we can do to down-regulate responses in the amygdala, these are the stress-related responses in the fear center of the brain or the emotion center.

0:14:03.2 GT: But also these strategies also regulate our stress responses in the hypothalamic-pituitary-axis, 'cause we know that over-activity in the amygdala and in the stress pathways of the brain like the HPA, the hypothalamic-pituitary-axis that I was talking about, we know that increased activity in these systems are bad for the body, they're bad for mental wellness. So depression and various anxiety disorders are associated with elevated activity in these networks. So understandable then why quieting down activation in these networks is a good thing.

0:14:39.4 GT: So strategies of this class include things like changing the way we think about a situation, changing our perspective, re-appraising or reframing the way we see a situation. So just a
quick example of that. A lot of people don’t like being stuck in traffic, they get upset, they get tense, [chuckle] and then it shows in their behavior, so an example of reframing that experience into something that's less negative, is looking at being stuck in traffic as an opportunity to listen to a podcast or to maybe make a phone call if you can do so safely. [laughter] Maybe I should not say that in the presence of police officers but with hands-free, with headsets. [chuckle]

0:15:16.0 JT: Of course, it was implied and of course that's what you meant. If you're not driving and listening to this, I hope you have a pen and paper like I have, and I'm writing stuff as you're saying that. And I wanted to check with you, Chief, but first that term that you said, Dr. Tabibnia, the reappraisal refrain. When I talk about "real resilience", when I talk about perspective and control, that is critical. And I hope everybody realizes how important this is, real resilience is sometimes not changing what's going on in your outside world. It's perhaps changing the way you look at it, and I'm gonna give a real-life example for my experiences and hopefully Chief, if you don't mind as well, I look at more from last summer, the protest and the rights everywhere. And looking at that and realizing, and I know you'll say it later, I'm not trying to steal any of your thunder Dr. Tabibnia, how the example I'm giving ties into purpose and meaning in life.

0:16:08.6 JT: I'm not negating any of the bad stuff that went on in all of the cities and towns across the... Across the country and world. I can look at... If I make time for the bad, I sure gotta make time for the good. And one great thing that reinvigorated my pride of working for my agency, standing shoulder-to-shoulder with brothers and sisters out there that were utmost professionals in incredibly tough situations. That's what, to me, the cognitive reappraisal is, or reframing the situation. We acknowledge how tough it really is, but then also trying to... And then the other thing just to lighten a little bit before I throw it over to you, Chief is, and realizing there's some really funny police officers and during the downtime and the jokes that people tell just to pass time, ah man, is been some funny ones. Alright Chief, what about you in terms of reframing our cognitive reappraisal?

0:16:57.4 KZ: Well, yeah, and Doc that's so interesting because the science behind it is, as you explained it. But the question becomes... Or I guess for me is it feels as though our default is negativity, and a great example is just the way that we start our day often starts at a deficit, right? If I had to sit here and describe to everyone who's listening, here is how your day starts if you have to get up with an alarm. Your alarm goes off and what happens? Right when I did that my alarm went off, that's... [chuckle] And so we get up in the morning, our alarm goes off and our default is to hit snooze. We hit it not once, not twice but okay, I've got three minutes, I can sleep for three more minutes before I have to get out of bed. Well then we build that up and then now we're running late.

0:17:45.8 KZ: And so our resilience is less then because we haven't built in time so that we're constantly running at a deficit. And then you add that emergency onto trying to get someone else ready in the house, I have to drive my kids somewhere so now... But I'm running late. So it's like we start our lives with the deficit, and to your point you, Jeff, a negative where it's like we could look at everything that life is throwing at us, then you turn on the news and, wow, there's nothing good on the news. I mean, you might as well... That's just a one-two punch. [chuckle] And so then we move about the world, and then we go, and now we're standing, we're police officers on the frontline, and I'm sending my officers out in the middle of a pandemic, you know?

0:18:25.9 KZ: When it first happened, not knowing if I was putting them at risk or their families, and then civil unrest, and it's like all of the negativity, so there must be... It's a conscious effort, and
I guess that's what I'm getting to, is that it just feels like our default is negativity, our default is being a scarcity. And then you have to stop and force yourself to say, okay, wait a minute, here is the good, that is happening in the middle of the pandemic. I got to spend more time with my kids, we had to come up with new and creative ways to make heart connections again, we had to develop new processes and systems, we had to learn to police differently. But that that pause is the hardest part to say, "Okay, I need to shift my paradigm.". That's, I guess my question and my observation, is that until someone says, "Hey guys, let's turn it positive or our default is negative." it feels like?

0:19:25.0 GT: I mean, that's absolutely right. Your observation is spot on. Our brains are wired to weigh negativity greater than positivity, it's a survival thing, right. Not being eaten by the lion, the hungry lion is more urgent than chasing the pot of honey or whatever it is our ancestors did. So definitely negativity looms larger, and we do have a bias towards noticing negativity more, remembering it more. And so it is absolutely a constant battle, but there's a silver lining here which is... And I was gonna get to this a little later, but I think that this theme will keep coming up, which is our brains are wonderfully elastic, meaning adult brains can change. It can learn. And so the more we can practice not being dragged down by all the negativity or perceived negativity that comes our way, the stronger it gets, the better it gets at not letting it get dragged down. So the fact that you're able to make it through the day and not be overwhelmed and still functioning, you have already won. You've already done a great job, and you should be pleased with yourself for that.

0:20:34.7 JT: Yeah, and Dr. Tabibnia that reminds me, if anybody's keeping track of neuroscience resilience terms, that elasticity that you're referring to is neuroplasticity, and I'm giving myself a pat on the shoulder and back, I can't reach my back. So it's just the shoulder pat. But this is the thing too, just real quick blip on that because I know you have more you want to share. There's a lot there that both the Chief and the Doctor shared with us. And it's that idea of... Also the thing that gets me, and I hope again, people are... I'm appreciating this. It's not just going through the motions. And again, when you talked about what you said some of that stuff Chief. We're not ignoring the bad, but if all we do is see the bad lens, and that's the only thing we're looking for, and that's the only thing we're finding that's cynicism, that's burnout, that's the stuff that literally eats us alive from the inside out.

0:21:25.1 JT: And that's why so many men and women in policing are dying at such a young age, just shortly after retirement. And it's the idea of... People will say, "Well, what's the point of looking at the positive things?" Well, it's keeping you healthy. And that's real resilience. It's just... The other thing, which we'll come back to it later too, with you, especially Chief, it's that balance of... Part of it is on the requirement of the agency, but also the individual, and I wanna cover that, but I know I'm Dr. Tabibnia, let's see what else you have.

0:21:55.2 GT: Well, actually, I was gonna say, this is an excellent segue that... Now that we're discussing positivity, it's a great segue to talk about the second pathway towards resilience. And maybe this might help address some of the questions that just came up. Alright, so the first pathway was about down-regulating the negative by shutting down or... Not shutting down but quieting down hyperactivity in our emotional and stress response networks. And the second pathway is about up regulating the positive by increasing activation in reward parts of the brain and the reward network... Or reward networks. I mean, arguably, there's more than one but a lot of psychiatric illness like depression, anxiety disorders are characterized by too little activity in the reward network. So that's that's not a good thing either. And a lot of strategies we have that have been shown to improve resilience tend to increase activity in the reward network.
0:22:50.5 GT: So for example, being socially connected, having a social network, that's tremendously rewarding. Seeing pictures of loved ones, activate the reward network. Seeing pictures of friends and family. And there are a lot of different strategies in this bucket, optimism is one of them which circles back to what we were talking about before that it's so easy to notice the negative. But the thing with optimism is that it can become a self-fulfilling prophecy like when you have positive expectations, you tend to notice positive things more. You notice the positive opportunities more. So you're more likely to take those opportunities.

0:23:31.2 GT: And there are a lot of other proposed mechanisms for why optimism works but that's one example. Another example that I think having a positive outlook has been empirically or through research shown that it works, is having a growth mindset. So believing that you can learn to become more resilient. So having faith that you can learn. So having confidence in the idea that you can be trained, you can improve your resilience can help make you become more resilient. Again, this highlights the idea that resilience is not a personality trait. It can be trained, and having faith that you can be trained can help improve your ability to be trained.

0:24:14.2 JT: That was fantastic, that last part there, so much so that I hope I should have wrote it down. I'm gonna tweet that out. I'll tag you, don't worry. Dr. Tabibnia. I've got thoughts on it but before hearing my thoughts, Chief, what do you think so far with what she said with that second part? The positive...

0:24:30.8 KZ: Yeah, I love that. And so the problem and especially... Dare I say the problem in law enforcement, you know what I mean, I think I've earned that right to say that, is that... You mentioned that this is not a matter of like, "Oh, why should I even try to be positive," right? So this is life or death. This slow drip of that adrenaline and that cortisol that comes in, is the stuff that kills us. It is why our life expectancy as police officers is so much lower than that of the rest of other professions. And so, when we say that this isn't just a matter of, "Oh, be positive." This absolutely is about our health. And what you said there about growth mindset is that the problem is that police officers take on that apathetic tendency of that, "Why should I bother to even find positivity?" because we call it the 1000 tiny cuts in policing.

0:25:30.5 KZ: It's one thing after another. It's not just the negative things but honestly the terrible things that we see, the accidents, the death, how humanity treats one another. We get a front row to all of that. And so it's a hard sell for police officers, for all first responders to say, "Look for the positive in that." And so it takes... It's conscious, but it's that growth mindset because the fixed mindset says, "No, there's nothing we can do about it." And, "Forget everything, it's useless," and you throw your arms up in the air. Well, then that will manifest into not only your mental well-being but your physical well-being, and I promise you, it will shorten your life. And so then having that growth mindset of I can find ways. And this is not about that trait concept of finding happiness. Because here's the problem, is that life brings unhappiness.

0:26:27.7 KZ: I mean, we are going to experience failure, pain, loss, devastation, all of the things, every single one of us. So it's about learning for ways to cope with that, and that... So it's more... It's less about searching for this notion of abstract happiness and more about well-being but you have... But your mind's in it to... Dr. Tabibnia, what you said about growth mindset is those who recognize that they can get better at it, are the ones who are going to become more resilient. And just as Aristotle said that you... The virtues, you become something by doing... If you want to become
kind, you commit acts of kindness. If you want to be courageous, you commit acts of courage. If you want to become resilient, then you have to practice some of these skills.

0:27:13.9 GT: Fantastic. Yes, absolutely, I totally agree with that. And I can appreciate how telling someone to just see the positive side of the situation could be a hard sell for the profession that you guys have. So if you need other strategies that helps increase the positive. There's a whole lot of strategies. That's not the only one. Social support is an important one that I had mentioned, but also things like physical exercise, that is also boosting the positive. Getting enough sleep, that's also boosting the positive. Keeping yourself physically healthy is so important and cannot be understated, humor, smiling.

0:27:52.2 GT: [chuckle] There are all these... There's 1000 little cuts, understandably, but there's also 1000 little... What do we call them? Positive tokens as well that you can use to counteract them. And if you need a little bit more science to convince you that this positivity is important, research has shown that these reward neurons or the reward networks in the brain can help you buffer the effects of stress in your stress parts of the brain. So you might as well come at it from all angles, not just directly go at the negative and try to down-regulate those but also use what makes sense to you and works for you for boosting the positive.

0:28:28.6 JT: Yeah. And that shows the interconnectedness of all that, Dr. Tabibnia.

0:28:35.0 GT: Exactly.

0:28:35.5 JT: And the way I look at it, too, is it just feels good feeling good, first of all. And I'd say that's good. No pun intended. But what makes these practices great is it helps you handle stressors in life going forward. And what, as you said it, Chief, what are we bound to face as human beings? Stressors. What are we definitely bound to face as police going forward? Stressors. Now I try and think of, as you were sharing, those things, cynical Jeff, maybe 10, 15 years ago and listening to this perhaps saying as you went through them. And Chief, you and I, we've seen these men and women and police and all. I can't curse. I'll just do, "So I can't get sleep. They made me work a double," or social support, "Let's go out and get hammered." I don't know what voice I'm doing, by the way. It's just [laughter] I didn't wanna do my voice there. I don't know why I just did that.

0:29:22.3 JT: But anyway, [chuckle] what I'm trying to say is that's not healthy, acting like that. And this is the thing for all the trainings. And I know you do a lot of work across the country as well, Chief. It's the senior cops that nod their head and not nodding their head falling asleep while we're talking, nodding their head in agreement saying, "Yeah, you're right," and it's that idea of social support. And I won't tell anybody to stop drinking. I have a drink occasionally, but that can't be your only coping strategy. That's not healthy in managing it, but then also, sleep. Again, I can't help to think of last year, right Chief. All across the country, a lot of cops working many long hours. Guess what? In those timeframes, I would tell people. When I say tell people, I would tell myself too, "Two hours of sleep is better than zero hours and it's what's realistic," because otherwise, there's that term, Dr. Tabibnia, that I was thinking again. The opposite of all this is learned helplessness and that's not healthy. And I know in episode 2, we talk more specifically about suicide. It's not only about suicide. And that's why this is the first one, talking about resilience and looking after our well-being. There's a lot more thoughts I have, but I know you have the third one you wanna cover as well.
Okay. That sounds good. Sure. All right. So the first one was down-regulating the negative. The second one is up-regulating the positive. And I'd like to think of the third one as rising above all that and I refer to that one as transcending the self, so this is things like mindfulness or religious engagement. And the neural underpinnings of these various strategies, what they have in common is that they reduce activation in this network in the brain called the default mode network. So this is the network in the brain that gets activated when people are instructed to think about themselves or when they are instructed to just lie there and do nothing. All right. So when we lie there and we're awake and we're doing nothing, well, what are we doing with our minds? [laughter] Exactly. Yes, our minds are churning.

Well, they can't see us right now, so it's recording and ruminating. [laughter] Yeah, we had fingers pointed to our temples and going in circles. [laughter] So yeah, our minds churn. We ruminate, we think about our past, we think about our future. And usually, a lot of times, I guess the things that we're thinking about in the past tend not to be so positive. It's all the things that we did wrong or said wrong or that were done or said wrong to us. And when we think about the future, it's the thing that we're worried about or concerned about. And so research has shown that excessive activity in this network is not adaptive. It's associated with depression, it's associated with addiction. And on the other hand, interventions that reduce activation in this network improve wellness. And we can... Fortunately, there are non-pharmaceutical ways of reducing activation in this network and they're things like mindfulness, religious engagement, and other strategies that I'm sure we'll touch upon. So should I...

What about the other keyword that you haven't said yet, one of my favorites?

That starts with A?

Yes.

[chuckle] Alright. So the experience of awe, experiencing something that is larger than us that is maybe difficult to comprehend.

Yeah. I'll jump in there for a second too because... So when people are thinking mindfulness or let me be of my perspective and my research that I've done on resilience. I generally say there's two key practices in any bonafide resilience-type practice, controlled breathing, which you can call meditation, if you want, or a type of mindfulness and then gratitude practices. When you mention mindfulness, people are probably coming up with whatever ideas that you want or not, "This is where I... " I don't have a sponsor and all, but I'm wearing a shirt that says "Unplugged." And it's got a coffee mug on it; great organization called Wander Heart and I bought it to remind myself "Practice what I preach." My version of mindfulness, and if people know me or don't know me, I live in Queens, New York. I Google walking and hiking trails. And there's dozens of them in Queens alone. That's my version of mindfulness; getting out by myself, literally unplugging, having a cup of coffee, walking by myself.

Yes, there's trees in Queens. There's actually a lot of trees in Queens. There's a couple of lakes too. And that's... For me, I couldn't do this if I didn't try to continually practice what I preach or I'll be a fool like some other whatever. I'm trying to do as much as I can, and I know
Chief, you as well, and that's why we have you here. Practicing what we preach, it's not easy, but it's moving... And then you shared an Aristotle quote. I have a quote; I don't know who said it. It's not Aristotle. But no amount of positive thinking or talking can replace positive action. The positive thinking, the positive talking must lead to action. And then Chief as you're hearing what Dr. Tabibnia is saying, how incredibly important this transcending the self is. How has that played out in real life for you over the scope of your career in all of the different ranks? And I know that's a heavy question, so.

0:34:36.3 KZ: Sure. Well, first of all I want to... Before I move on to that, let's just touch on the notion of mindfulness and how it often conjures up this granola, you know Yogi. And it's so funny, but then all you need to do for cops is to change it from mindfulness to you tactical breathing. Just throw the word tactical in front something and we're good. But we often don't talk about all the things that we used breathing for. And so I try and use the example for cops. Think of a time when you were told to breathe, and when is it? When you're shooting, you know; front, side, front, side, breathe. But that breathing... Call it mindfulness, call it meditation, but that being in the present and concentrating on your breath is actually what will help save you in the field and help you get your cognitive everything back when you are scared in the fight or flight.

0:35:28.8 KZ: Just that moment of breathing, focused breathing, will bring you back into the present so you can make a better decision. But as far as how that's applied in my life, I mentioned it a little earlier, and the reason that I am obsessed with this topic is because I have been on the end of it; where we have been advised not to seek help, not to practice resilience. And I will give a great example, and I will water down this story, but I had a police officer call me at 10:30 at night. And I picked up the phone, and he said, "I'm having a really hard time right now." He said, "I was just on the scene of an accident where I had to pull a state trooper out of his vehicle because the car, his squad car was on fire." And he said behind him was a tollway worker; a semi had hit them both. They were tending to a disabled motorist, and the trooper and the tollway worker were both... The tollway worker was pinned in his car, the trooper was on fire.

0:36:31.7 KZ: The two officers first on the scene saved the trooper and then went and they... The tollway worker was trapped in his car. So while the fire department was trying to get him out an officer climbed up on the hood, punched a hole in the windshield, reached through and held the hand of the tollway worker while he took his last breath because he didn't want him to die alone. Now, these officers were struggling, so this was when I was a commander. This is now eight years ago. And I took that back and I said, "Tell me what you need. Do you need me to come to you?" and he said, "No. I just need you to know that we're all struggling." So I took it back to my command staff meeting the following morning, and I said, "Hey," and I talked to all of my comrades and I said, "We need to get better in this department, in this profession, about checking in with our people.

0:37:23.3 KZ: These guys were on the scene of a horrible accident the night before, and I'm told... ". I protected their identity, I said, "But I'm told they're struggling". And one of the commanders responded and I quote, "Oh, so I guess we have to walk around and ask everyone, 'Are you okay?'" And then he said, "What a bunch of namby-Pambies." So I didn't know what that meant, but I had to look it up. Let me tell you, it is not kind. And it was in... And I use that example to illustrate what we are dealing with. You wonder why cops don't want to ask for help because you might be labelled something like a namby-Pamby which is weak. And so I vowed in that moment that I was going to do whatever I could to start to change the culture of my profession.
KZ: And right when I became chief, we would put these processes... I had a great team of people who are very like-minded. And we put resilience practices in place and got everyone an app on their phone. They could push a button and get help anonymously. So all of these things put into place, but I tell that story to tell you that that wasn't that long ago. And we still have people who are running police organizations that think that way. And so that is... And I'll stop right there, so as not to belabor the point, but this is the culture that we're... It feels like Sisyphus, forever pushing the boulder up the hill. And that's where we are in some agencies.

JT: Yeah, well, first of all, thank you for sharing that. And that whole story, and just for the experiences that cops go through on a daily basis to across this country. And it goes back to what Conan said, with the downstream, I believe that's how you call it, it's all the these awful moments in policing. And we can't minimize it, we have to do it. It's acknowledging it, and I would say how that was awful for those officers to experience that. And just acknowledging it. It's not fixing it, it's not trying to totally feel better or what have you, it's sometimes the best thing that you can do, and this is with the work that I'm involved in, the peer support, you're not fixing it. Sometimes the best thing you can do is just be there with them. Then we had that other awful person that was the supervisor which...

JT: I wanna segue to the part, especially where it's more directed towards you, Chief. So now what? Because, look, we go to these conferences all over the country and all over the world, and everybody nods their head in agreement, "Yeah, yeah, yeah." Well, we're not in a perfect world. So those people who are nodding their head in agreement. And it's not just bosses, so I'm not boss-hating. But like not everybody believes the same thing. And they'll nod at a conference. They'll just say, "Yeah." And then again, are they backing it up with action? So in a couple of minutes, I wanna hear from you how we fix all this across the entire country and all the policing. And then we'll package it and give it to other countries. So, no pressure on you, Chief. But in all seriousness.

KZ: I have the answer.

JT: Okay. Wow.

KZ: No, I'm dead serious. I have the answer and I'll tell you what it's about. Leadership is overrated. And I say that because then we put all of these things into place. So when you start to change a culture, it truly is about... It's the tipping point. It takes momentum. And so you put these things in place and you set the culture to give permission. And but what happens is when I say leadership is overrated, it's often someone who is not in a leadership position, but one who has influence. And fast forward to, I had a mass shooting February 15th, 2019, and five of my officers were shot and five people were killed. But before that, I had an officer attempt suicide and the whole department rallied with him. And so we had that incident.

KZ: And then fast forward to the mass shooting, and it was after this event. And this is when I knew that... This is why when I say leadership is overrated, one of the guys who was involved in the fight, in the gun battle, he's gotta come right back to work and he's standing there. I walked in right after the scene was secured and I was being kind of rushed to the press conference, and I walked past this cop. And I remember seeing him out in the field, and I looked at him and I said, "Are you okay?" And he looked at me with arms crossed, and he's the kind of guy that is... If I described this, you'll know exactly who it is. He tailors his uniform to his biceps, 'cause he's really
muscular and he has all the tattoos, and he's super bad ass. And he looked at me and he nodded his head, and he said, "Yeah, I'm fine." Because that's what your head and believes, is that, "Yeah, I'm fine."

0:42:01.8 KZ: And I looked at him again and I said, "Are you really okay?" And he fell into my arms and sobbed in front of everyone. And that guy, a patrol officer, we had a bunch of mental health professionals come in after the shooting, and he personally looked at all the people who were on the scene and he said, "Get your butt in there and go talk to them." It wasn't me. It was him. And so when I say that leadership is overrated, it's often the first follower that starts the movement. And so I think that it takes one courageous person to stand up and say, "Hey, let's get the help we need, no matter who that comes from." So don't wait for a boss to do it. Don't wait for your chief to do it if they don't fall in line, but someone has to do it.

0:42:46.9 JT: I think, among many things that you shared there, it's complicated, right? In the promotion of resilience. And it's maybe not putting all the pressure on leadership. Where in reality for it to stick, it's more than just maybe the leadership itself. And sometimes it's those moments like you shared. It's not even the leader. But I guess a question that I have kinda adds a follow-up to that, too, is... Well, I'll throw a couple of things at you. Add to any of them that you want or not. So some of the things that I come across is sometimes, and again, to use the word again, leadership, in agencies, they grab onto that term resilience and they want the quickfix, checkbox training. And it's complicated, resilience. And so, and again, I'll throw a few things at you. One, it's absolutely on the agency to look after the wealth-fare and the mental health of their workforce.

0:43:38.7 JT: And that being said, and, not but, and, it's also on the individual, absolutely, is responsible for themselves, as well. And for a sidebar to that, I quite often will say, "Well, for officers of all ranks, while you're waiting for your agency to change everything magically, what the hell are you doing today to change it? And it's gotta start with you. And maybe it needs to end with you for that day and it's good enough." So there's the checkbox mentality. And I know I can't go through all the researchers, but another colleague of Dr. Tabibnia and of mine, Dr. Jennifer Wild in the UK. She's done work that shows it can't be just cycle educational. There has to be practices involved to training. And, look, we can't have officers in training every day. They gotta be out on patrol. So how do we do this as a way to promote real, and yet again, and not a cliche, how do we promote real resilience where it'll actually be stick and it's legit?

0:44:38.0 KZ: So the answer to that is difficult because it's non-quantifiable. So, and here's why I say that, is that because when you institute tools, processes... And so what we did is we developed a peer team. And then we understood that not many people, that not all people will wanna reach out to a peer. And so then we instituted that app and the app that I adopted went on every single officer's phone. The app is called We Never Walk Alone. And you click that app and it's so if you don't wanna go to a peer. So it's like you have these levels of, you can go to EAP, no cop in the world trusts EAP. They think we're writing down... That they're writing down everything and it's being used against them. And so you have to develop all of the levels where people can go.

0:45:20.6 KZ: And so I think that is what the leader of an organization needs to do is to put these processes in place, knowing that every individual might utilize another tool. Now, I don't have any way of knowing how many people have pushed the button on that app. I have no idea and that's by design. I don't need to know as long as they can get the help they need. And so that is what the responsibility is, is that we have to take care. We being the leadership in our organizations, have to
take care of the people who are charged with taking care of our community. Full stop. Because if they're hurt, we already know that hurt people hurt people. And so it is incumbent upon us to put the processes in place. And how we quantify that, I don't know the answer to that, but I don't care. As long as the person is getting the help they need, I don't need to count the bean.

0:46:11.7 JT: Well, right. And that's I think the Einstein quote, right? "Not everything that counts can be counted. Not everything that can be counted counts." The other thing that hit me with how you're saying it is "no one size fits all" either. And in the world of resilience, we know Dr. Budgemananal talks about the idea of flexibility, and that's exactly what you said. And when we... Here's my take on implementing it. And so, any sort of... I think one-day trainings have a purpose, they're just... They're a piece of the puzzle, and my whole thing of one day resilience trainings, they have to hand off skills that then the participants can be encouraged to use going forward. And my other thinking too is, and I've been fortunate to be a part of with some agencies, it's I think all best practices say, resilience, promotion and enhancement training, and whatever you wanna call it, has to start in the academy and it needs to continue their whole career.

0:47:07.3 JT: And this is where I would say, I'm not talking about, and again I'm not holding back either, in the academy it's gotta be throughout the entire academy. I'm not talking about bringing in the guest speaker where you get a grant, where they do a one-day training. And again, I'd be a fool if I didn't have an opportunity to speak my mind. 'Cause I'm passionate about this stuff. It's gotta be real and legit, otherwise they'll see through it. And also, I know it's not easy, so from looking at it from our perspective, I'd imagine hopefully there are Chiefs listening right now to us, or leaders, and in the agency it doesn't have to be a Chief like you said. But so, if they're wondering... If they could ask you, Chief, they'd be like, "Well, where do we start?" Or "What do we do first?" What would you say to that?

0:47:55.2 KZ: So, I think a few things. I think that personal stories really resonate. And in our department, with that individual that I spoke of that had a suicide attempt, was so gracious once he got comfortable with his recovery and went to in-patient assistance, and then out-patient. And then I asked him at some point, "Are you willing to tell your story?" And he said, "Not yet." And I said, "Understood." But in the meantime, we're getting those processes in place. But when he was ready to tell his story, how powerful that was. I mean, I ended up writing a blog post and sharing it to other police officers, because that one person that said, "Man, no one knew that I was struggling." And you know what happens after that naturally, is that, that gives other people permission.

0:48:48.8 KZ: So that's the first thing I would do, is find someone who is courageous and willing to tell the story of their struggle and how they overcame it, so you see that there is hope to get to the other side, and you don't have to walk alone through it. Meanwhile then... And if you can't find someone within your department, then find someone outside, there are people who are willing, and bring them in, because personal stories matter versus where we're just gonna have resilience training, check a box, you draw all the places you can ask for help. That doesn't resonate with anyone, it's personal stories that resonate. And then once you have people who are inspired by the story, once you have the heart set, the mind set, well then you bring in the tool set. And that is all the things that they can do to help themselves in action-oriented. And so I think that's where I would gonna start, it's just someone just stepping up and telling the story.

0:49:39.7 JT: Yeah. And then to the power of narrative, we all know it's how it's just... It's amazing. One thing as a, sort of a sales marketing pitch as Dr. Tabibnia only briefly mentioned awe,
pun intended, it's awesome. It's so awesome, it's a future episode we're dedicating the whole topic to. And why do I say that here during this episode is, everything can't be resilience, resilience, resilience, much like all the outreach can't be suicide prevention, suicide prevention. We've gotta think of new and novel ways that are yet again adding space, to try and get cops to stay in tune with the message. So, one of the things I wanna talk now with both of you is what I consider, I even mentioned it earlier, hardcore practice of resilience gratitude. I have no problems saying I was the first one to be dismissive of it, and then I realized, "Wait, I'm being an idiot, it keeps coming up in research everywhere, I need to pay attention to it."

0:50:33.6 JT: And this is where, truly, I think it sells itself. But maybe first... Well, for everybody listening, I had the Doctor and the Chief participate in the gratitude practice that I do in some of my programs, before I ask them to share some of it, which I hope they realized that I was going to ask them to share some of it. Dr Golnaz Tabibnia, tell us why gratitude is so important in the world of resilience?

0:50:57.8 GT: Well, as far as the brain is concerned, and as far as the neuroscience evidence that we have so far. I'm not sure this is the whole story, but so far what we know about it is that, it does activate the reward pathway. It is also shown in various studies of having all kinds of long-term benefits in terms of our well-being. My personal hunch is that there might also be some reduction in the default mode network activity as we rise above, and think about the larger picture and see ourselves occupying a smaller part of this vast universe. But, yeah, so I think that the science is supportive of it being a very easy and yet powerful tool to counteract one of those thousand little cuts.

0:51:49.0 JT: Well exactly, and that's exactly the way I see it. It's a form, among many benefit, it's a form of cognitive reappraisal. And the practice I asked both the Doctor and the Chief to participate in is, doing a gratitude practice, and I know some people are familiar with different variations, right before you go to bed for three consecutive days, check in with yourself in the form of, one thing that made you happy that day, one thing that somebody else did nice for you that day, and then one thing that you did nice for somebody else that day. And then I ask them not to repeat, because otherwise it'd be easy. I would say you it's how, "You took the garbage out," or "My wife did the dishes." That's not rewiring your brain neuroplasticity, for those that remember that mentioned earlier in today's episode.

0:52:34.9 JT: But here's the thing, as I wanna check in with both of you, why do it right before bed because some research studies have showed it helps people with what? Sleep. What do a lot of cops have trouble with? Sleep. So these dots connect if we allow them to connect, and that's the thing, we're not robots, we can't just go through the motions, the last thing I will say is for those wondering, yet again. Well, what can I do today? Or what can I do starting tomorrow? How about do this, and especially if you're a supervisor, frontline supervisor, maybe at the end of the shift or the tour, check in with the guys and the women saying, "Hey, what's one good thing that came out of today?" Or "What's one good thing somebody did for you?" This is not negating anything tough, the tough is there, but it's that mindset and why not walk away at the end of your shift realizing as busy the day might have been, there were good little golden nuggets there as well.

0:53:19.1 JT: And I'm telling you, please, if you listen to this. This is real life, this is realistic, and that's gotta be good enough for today. Enough from me, Chief, you're up first, share with us your perspective, and I know you've got the [0:53:32.8] which I didn't realize you had gold
gratitude practice going on, but tell us, how do you feel about doing it for the three days and add I don't know some wonderful insights, as well.

0:53:42.9 KZ: Okay, my wonderful insights. Buckle up. Well, I defied you a little bit. So I adopted this practice when I read the book, The Miracle Morning. And then when I started to delve into the subject of positive psychology, and that's when I learned about you're able to rewire your brain. So, I started what your assignment was, and I did it. So, typically I do it every morning, I wake up in the morning, I have this. First of all, I'm trying really hard to become a meditator. I can last 10 minutes and it has to be guided because I have that... I'm working on it, right? But a part of my process in the morning is after I do that and get my coffee, I sit down and I write down three things for which I am grateful, and three things for which I am excited about.

0:54:29.0 KZ: So your assignment asked us to do it at night, which I was not used to. So the first night I did it, and for me, I like it better in the morning because I just got my Oura Ring, I'm obsessed with sleeping and so I do like all of the things at night to try to become a better sleeper, but... So I tried it at night, but I liked it better in the morning and here's... And this just illustrates as you do you, right? Whichever works.

0:54:56.9 JT: Right.

0:54:57.4 KZ: And so that's why I have to tell you I'm defying you. So I try to do the practice in the morning, and what that does is that sets my day on a positive trajectory versus the negative that I told you about earlier, where your [0:55:11.2] [__]. I make sure I get out of bed and I get that practice done because I find that it absolutely helps keep me on the positive path during the day, even when as we all know that something comes our way that is going to somehow bring some negativity to our day, I find that it doesn't derail me because I already have a mindset of gratitude, what I loved, what you asked us to do and I hadn't incorporated and I will now be incorporating, is what have you done nice for someone else? And what did they do for you?

0:55:46.1 KZ: And I was scribbling down all the things that people did for me, I was like, "Oh my gosh, well, I made... " My best friends flew in from out of town, I just moved and they came in and I cooked them breakfast, and I thought, "God, that's so lame." And yet, I realized as I was compiling these over the last three days, is you guys, these are not monumental things, they're just incremental steps and it just like I loved making them breakfast and they were here, present, and all of the tiny little things that I made sure that I did for someone or that I wrote down that someone did for me completely changed the trajectory of my mood. And so I will be incorporating that even though I defied you a little and do it in the morning, but I love that. And also made me more conscious of, "Oh, I'm gonna go do something nice for someone else," and so.

0:56:37.1 KZ: I loved the process. And I will also say this and then we'll turn it over to Dr. Tabibnia, but they're also... If you ask any police officer, and especially now in these trying times in our nation of unrest and as far as the policing and the temperature of the nation, I have police officers that say when someone comes up to me and says, "Thank you for your service," or someone buys me a cup of coffee, or I go to pay the bill at the restaurant, and someone says, "Oh no, someone took care of that." The feeling that comes over police officers, is they sit up a little taller. And I said, "You know how great that feels, it feels even better when you do it for someone else." So, those random acts of kindness.
And I don't know if you've ever been in a coffee line where you get up to the window and they say, "Oh, the person in front of you paid for your coffee." I'm like, "What did you just say? Are you kidding?" It's like, I am overwhelmed and I thought that was the best thing in the world until I bought someone else's coffee. And so I guess the point is that we have control, if we're feeling like one of those curmudgeons and we're negative, all it takes is a conscious effort to drive through the coffee line and pay for someone behind you and it will completely... It will just shift all of your molecules. And so the gratitude, it does the same thing, So I had a very positive experience, and since I have been doing it, but you just helped me enhance it.

Chief, do you remember...

You couldn't have summed up the science any better, you are absolutely right. When I talked about social support being activating the reward network and increasing resilience, it's not just about receiving social support, also giving social support and compassion for others also activates the reward network. So you are absolutely right.

So I can stay on the podcast? Okay, alright.

[chuckle]

Yeah.

You know you rock Chief. Tabibnia, before I throw it to you, just a quick takeaway I got from what you shared, Chief, and again me connecting the dots on that. The way you describe the mood change. I'm thinking when I try to help people try to get into this stuff. And when you share that now, ask people same thing when they do, how does it feel. And they'd say what... I said, "Don't forget this is important." Who's responsible for that feeling on how you feel right now? You. And you said the word control. How important, and I would say the two, to me the two most important terms connected to resilience and perspective and control. And you absolutely control that, and as I put down on my notes, own it too, right?

And Dr. Tabibnia, I wanted to talk about social connectedness, but you already covered that. And it's that idea of... The one thing I will say is, I truly am challenging our listeners whenever you listen to this. Try doing that gratitude practice just for three days, don't repeat. Some of you will struggle with it, including me. Certain days I have a hard time thinking about, "Well, what's something someone did nice for me?" Or how about this? Flip it around. Chief, how often do you think a cynical cop or someone not buying it who will say, "Well hell I do." There I go with that voice again. Let me cut that out.

[laughter]

They would say, "Oh, I do plenty of good things for people every single day." The purpose of this practice is pick one and think about it. And that's where Dr. Rick Hanson talks about creating those new neural networks in the neuroplasticity. Spend 13 seconds just thinking about it. You've got the 13-seconds, that's truly the change. But Dr. Tabibnia, I know we're running out of...
time, but definitely I wanna hear your gratitude practice perspective.

1:00:05.9 GT: Well, yeah. It was also a wonderful practice for me to slow down and actually write it down. So, I tried to practice gratitude ever since I wrote this paper on resilience. I'm like, "This is a good one. It's easy to implement, and I immediately feel the effect. So, I'm gonna do this." And so, I've sort of been just doing it in my mind at the end of the day. And I should say... So, my family is Jewish. And Friday nights, we light candles. And as a family, we go around in a circle and we talk about what is one, or two, or three, depending on how much time we have, [chuckle] things that we're each grateful for. And it's wonderful to verbally state it like that.

1:00:44.9 GT: So, at least we do it once a week, but just the practice of writing it down, I felt like had a different effect. It got me to slow down my thinking and reflect. And then, stuff comes out. You realize there's more to a situation that you're grateful for. So, I had this Zoom reunion with some old friends of mine that I haven't seen in over... Well, in about 20 years. [chuckle] And I came out of that reunion feeling really positive, but I hadn't had a chance to really reflect about what was so positive about that. And it just occurred to me it's because even though we haven't seen each other in so long, we all still care about each other. And we feel weighed down by each other's sorrows. And we're elated for each other's successes. And so that's a real powerful connection and being able to reflect on that, I feel stretched out that positive benefit for a longer period of time than it would have otherwise.

1:01:39.0 JT: Yeah, fantastic. And again, I just keep saying it feels good feeling good. And again, I'm just thinking for anybody listening, some people maybe are born with certain types of innate resilience, but it definitely, every one of us have the ability to enhance it. And it's these little daily practices that it's not about comparing your resilience compared to the next person's level of resilience, that's not the way it works in real life. It's just... It's about you, and looking after yourself every day. And again, this isn't soft. These are hardcore skills that every one of us deserves. Whether you're policing or not. And before I throw it to each of you for your last thoughts on this topic today, it's... Look, we're the top police men and women. We gotta look after ourselves, but also, let's not forget, we got family and friends as well. And there's people out there struggling too.

1:02:30.5 JT: So, I hope you're listening to this, and you're doing really well. And you're like, "You know what, I don't know if I need the gratitude practice." First, please do try it, but also, share it with other people, 'cause we all know people trying to get by every day. And this is truly yet again, Dr. Tabibnia, she said it, and the Chief said it as well, that's social connectedness. And we've gotta look out for one another. And to wrap things up, let me throw it first to Chief and then to the doctor. Any last comments, key takeaways that you want people to do walk away with and smile, or anything to smile, not smile, and give us a high five in the air. I don't know. Chief, say something, please.

1:03:08.9 KZ: I love how Dr. Tabibnia put all of the science behind the things that I've observed over the years, so that's... First of all, that's validation is that... I don't know what to call it, I just... I know it. And I'm trying to understand it more. So, this has been such a learning experience for me, but what I'd like to really challenge and ask people to commit to is something that you said earlier, Jeff, is that we truly have a tendency. You used the phrase learned helplessness. And that is so powerful, but let's interchange that with victimization. And that is any time you think the problem is up there, over there, down there, then that's part of the problem. And so, we can easily... It is so easy to fall into the negativity and to stand around the water cooler, the proverbial water cooler, and
talk about everything that is wrong, but it actually takes a pattern interrupter.

1:04:03.7 KZ: Someone to say, "Well, hold on." Just that. Be that leader. Be that courageous pattern interrupter to say, "Wow. Okay. Well, what happened that was right today? What happened that was good?" And that one person, but that's where we, gosh, we have the monopoly on bravery in our profession. Don't we? But I sometimes feel like we lack courage. And it's so much easier to stand around and feed into the victimization of the learned helplessness, the negativity, but it takes one person to be the pattern interrupter to say, "Hold on, change your mindset." And that is a conscious choice to do so. And so that is the challenge that I actually impose upon anyone listening is that be that person, be that courageous pattern interrupter.

1:04:49.6 JT: Thank you so much, Chief. Yeah, that was fantastic. Dr. Golnaz Tabibnia, what do you have?

1:04:55.7 GT: I love that message, and I think I wanna piggy back on it a little bit here and just really emphasize the idea that we have control. So this has come up a lot, and if you need any more science evidence to convince you that you have control, coping or taking control, rewire the brain to make it better at taking control the next time. Alright, so practicing coping, effective coping, right? So like hiding your feelings or shoving it down... Or what is it called? Sucking it up. That doesn't count as effective coping. But taking action, at least attempting to cope, rewire the brain to make it better at coping so that you're better at coping the next time around. And in fact, the mere perception of having control, even in the absence of true control, may be helpful.

1:05:44.4 GT: So studies have shown with pain, if you give people who are undergoing physical pain, if you give them a button to press that can reduce, can deliver some painkillers to them. And let them know, "If you wanna reduce your pain, just push this button and it'll reduce your pain." But if they don't... Even if they don't press the button, just having that button in their hand helps reduce their subjective experience of that pain. So the physical pain is the same, but it bothers them less because they have control. They're not using the control to change anything, but just having control or having a sense that you have control makes a difference.

1:06:19.0 GT: And when you look at these people's brains, just having mere perception of control over your pain reduces activation in your pain network. So they're not lying when they say they're experiencing less pain, the pain network in the brain is actually showing less activity when they think they have control. Right? So you do have control, your brain does rewire when you take control, and believing that you have control can help you along the way as well.

1:06:41.7 JT: Excellent, thanks so much doctor. Hey Chief, just the latest comment I'll conclude with is with the working definition that I've been having. We all have resilience in us. Let's just work towards every day towards enhancing it. And we cannot forget, real resilience is reaching out for help. And if there's somebody listen to this, if you're struggling, yes, you are strong. And yes, you don't have to take it on by yourself. Somebody out there cares, and it's more than one person. Please reach out for that help because you deserve it, much like the people that you help every single day, you deserve that same help as well.

1:07:16.5 JT: The older I get, the more time I spend in law enforcement, in the work at Columbia, I try and surround myself with really great, wonderful, kind, smart people. And it's fortunate to be part of this podcast and have our first two guests ever, the Chief Kristen Ziman and Dr. Golnaz
Tabibnia, thank you so much for being part of this. And for everybody that listen to it, we greatly appreciate it. Be well, be safe until next time. Thank you.

1:07:45 S1: This project was supported in whole or in part by Cooperative Agreement number 2017-VI-BX-K001. Awarded by the US Department of Justice, Office of Justice Programs. And as always, the opinions contained herein are those of the speakers and do not represent the official position or policies of the US Department of Justice or the IACP. References to specific individuals, agencies, companies, products, or services, should not be considered as an endorsement by the speakers. Rather, the references are illustrations to supplement discussion of the issues. Thanks for listening to today's episode. You can visit learn.theiacp.org/podcast to view show notes from today's episode. And to find additional ways you can learn from leaders in the field.