

Policing, Mental Illness, and Seeking Help: Perceptions of Stigma

Carol Archbold, Ph.D.

May 2025

Introduction

Police officers are called upon to deal with a wide range of situations, often involving danger, tragedy, conflict, and human suffering. The stressful nature of the duties associated with policing can result in negative outcomes for officer mental health. Research suggests that some officers do not seek help for mental illness due to a perceived stigma by society, their organization and colleagues, or even themselves (Drew and Martin, 2021; Grumley, Imogen, and Rydon-Grange, 2025; Karaffa and Koch, 2016; Soomro and Yanos, 2019). A recent study by Drew and Martin (2021) found that 90.3% of officers (from a sample of 7,963 police officers across the United States) reported that stigma was a barrier to police officers seeking help for mental illness.

Officers choosing not to seek help for mental illness is often driven by the fear that they will be perceived as weak, unreliable, or unable to effectively carry out their duties at work. There is also concern that seeking mental health support could negatively impact career advancement for officers, including promotion. The police culture, which emphasizes control, physical and mental strength, and suppression of

emotions, further contributes to the stigma surrounding mental health (Bell, Palmer-Conn, and Kealey, 2022). The presence of this culture within police organizations can stifle open conversations about mental health concerns among officers.

The stigma surrounding mental health in policing can result in serious consequences for officers both at home and at work, including increased levels of stress, burnout, substance abuse, and in some instances, suicide (Grumley, Imogen, and Rydon-Grange, 2025). In addition, untreated mental illness in police officers can negatively impact public safety. The negative outcomes that can result from untreated mental illness of police officers makes research on this topic so important.

Purpose of This Study

This study examines police officers' perceptions of mental illness and perceived stigma associated with mental illness. It is important to understand how police officers perceive mental illness and whether they believe there is a stigma associated with mental illness within this profession, as this may signal whether they are willing to seek help. This study also looks at officers' knowledge and use of wellbeing

programs/services available to them through their place of employment.

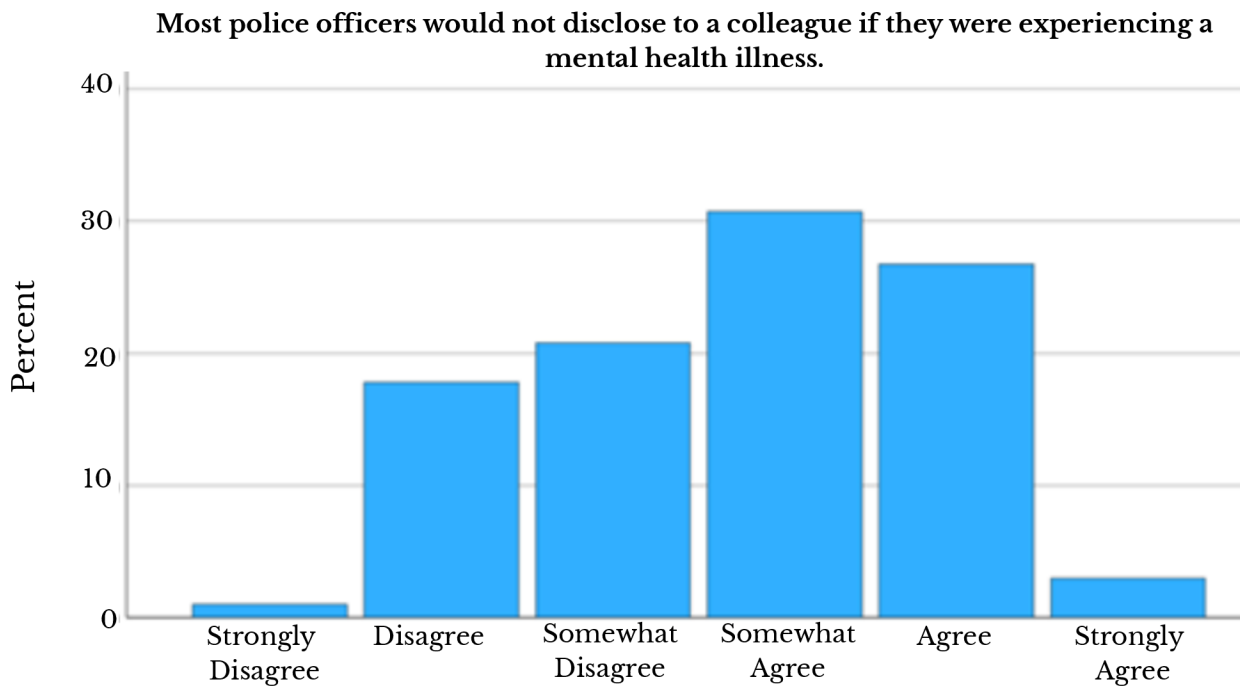
Methodology

In November 2024, a survey containing questions associated with officers' perceptions of mental illness, seeking help for mental illness, and perceived stigma associated with mental illness was distributed to sworn officers within the Fargo Police Department (FPD hereafter). FPD officers were asked questions drawn from the Stuart Police Officer Stigma Scale - POSS (2017). The POSS is an 11-item scale designed to measure mental health stigma among police officers. This scale is unique as it inquires specifically about beliefs held by fellow police officers (as opposed to asking questions directed toward members of the general public or non-sworn individuals). FPD officers were asked to respond to several statements using the following set of responses: strongly disagree, disagree, somewhat disagree, somewhat agree, agree, and strongly agree. The survey also contained questions inquiring about officers' knowledge and use of wellbeing programs and services available to them through the FPD. Surveys were distributed to every sworn police officer present at roll call for each shift. Most (93% or 101/109) of the officers who received a survey during roll call, turned in a completed survey.

Research Findings

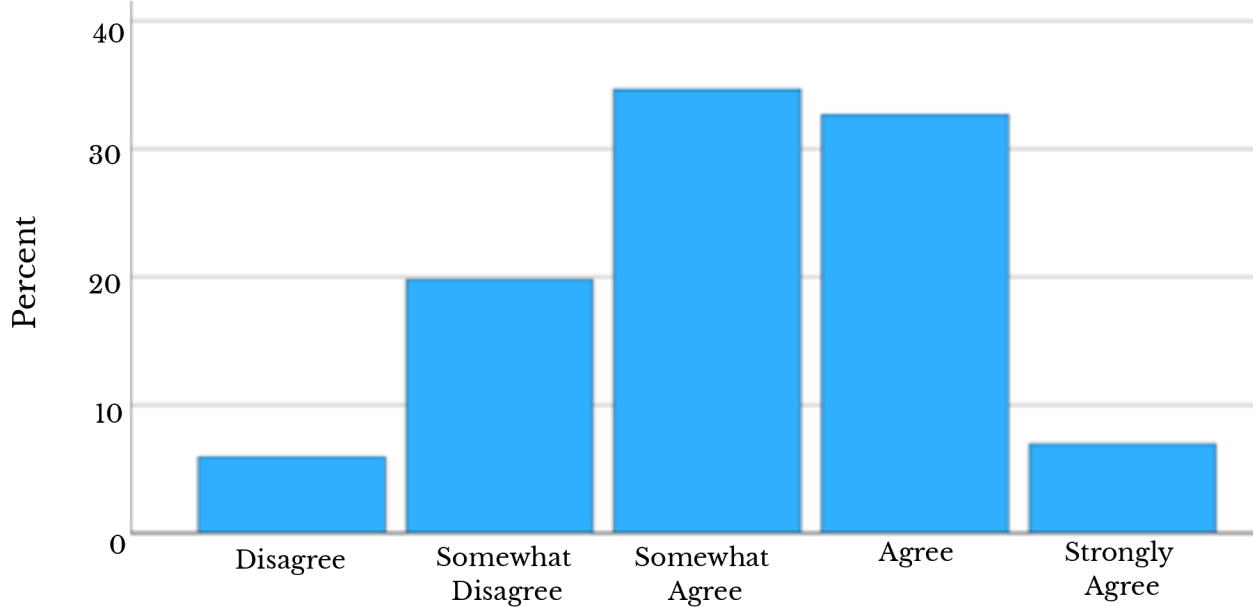
Disclosing Mental Illness at Work

FPD officers were asked if most police officers would not disclose to a colleague if they were experiencing a mental illness. More than half (60%) of the officers somewhat to strongly agreed with this statement.



FPD officers were even less likely to believe that officers would disclose their mental health status with a supervisor. Approximately 74 percent of officers expressed some level of agreement with this statement.

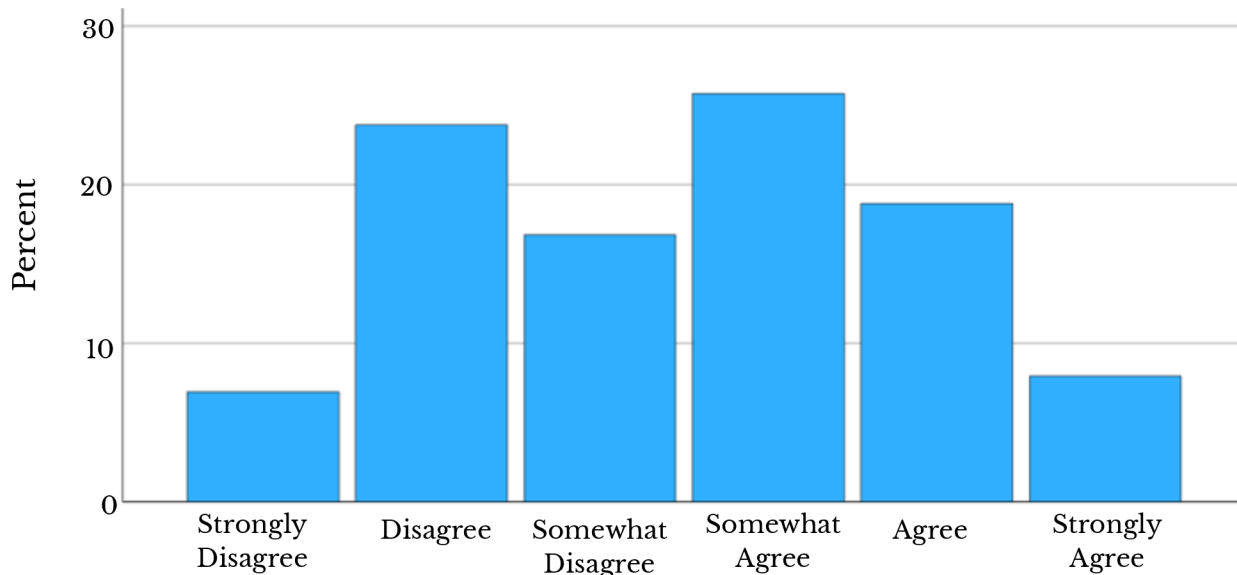
Most police officers would not disclose to a supervisor/manager if they were experiencing a mental illness



Perceptions of Stigma Associated with Mental Illness

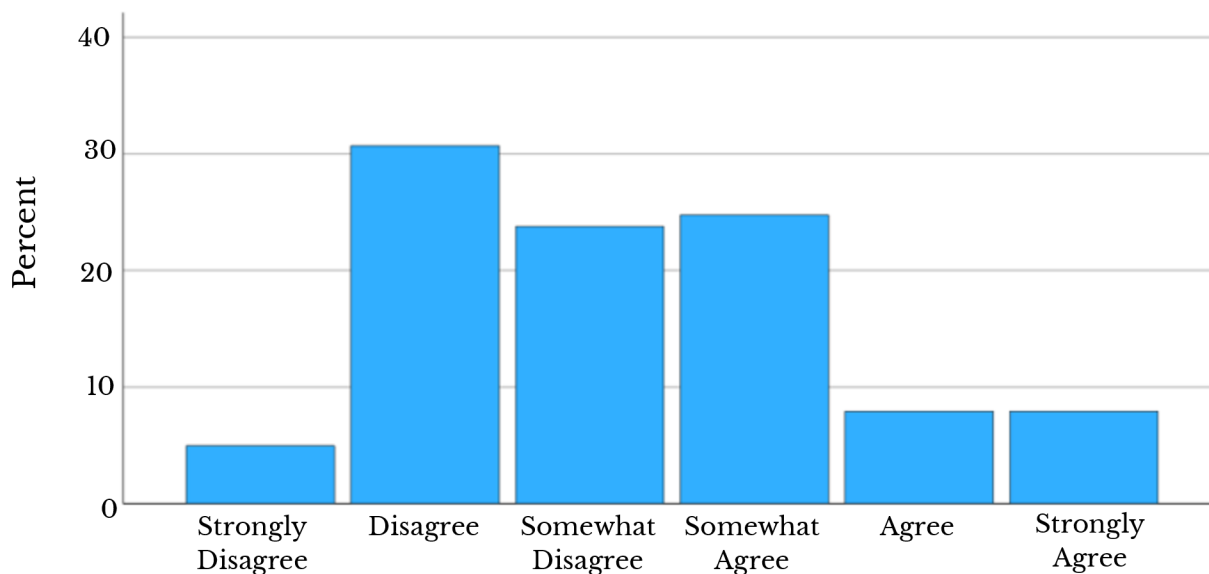
The survey also contained a series of questions centered on how officers believed they or their colleagues would be treated at work if they disclosed their mental health status. Slightly more than half (52%) of FPD officers agreed that most officers would expect to be discriminated against at work if they disclosed that they were experiencing mental illness.

Most police officers would expect to be discriminated against at work if they disclosed that they were experiencing a mental illness



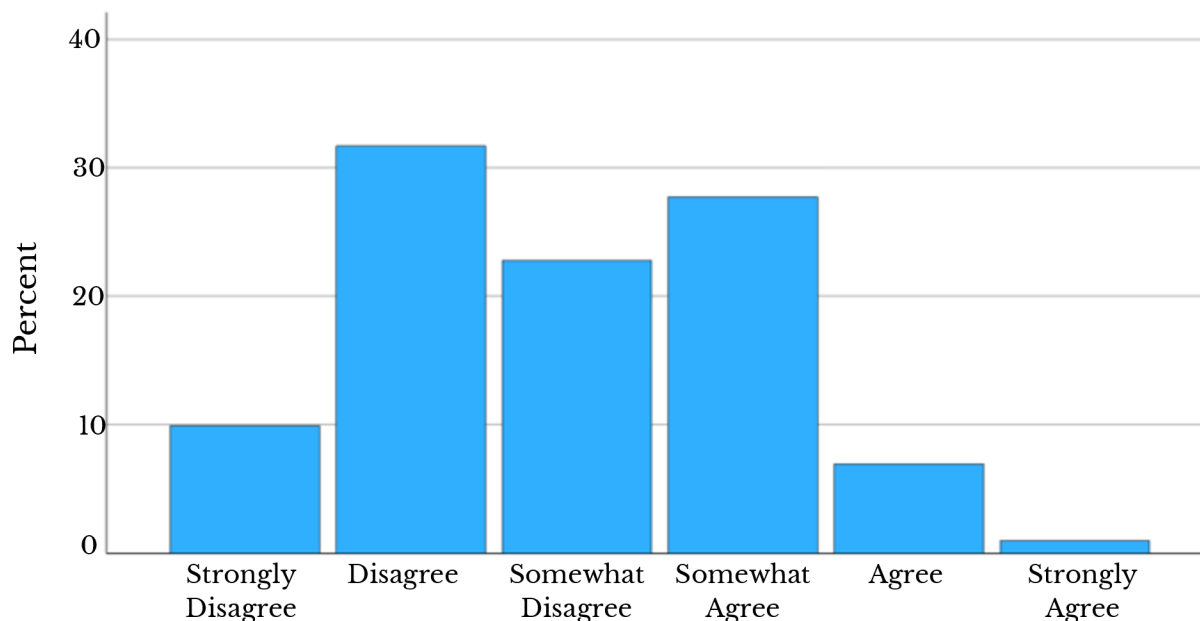
There was some concern among FPD officers that disclosing their mental health status at work would hurt their chances of promotion. Less than half (40%) of officers agreed that most police supervisors/managers would not consider an application for promotion from an officer who has had a mental illness.

Most police supervisors/managers would not consider an application for promotion from an officer who has had a mental illness.

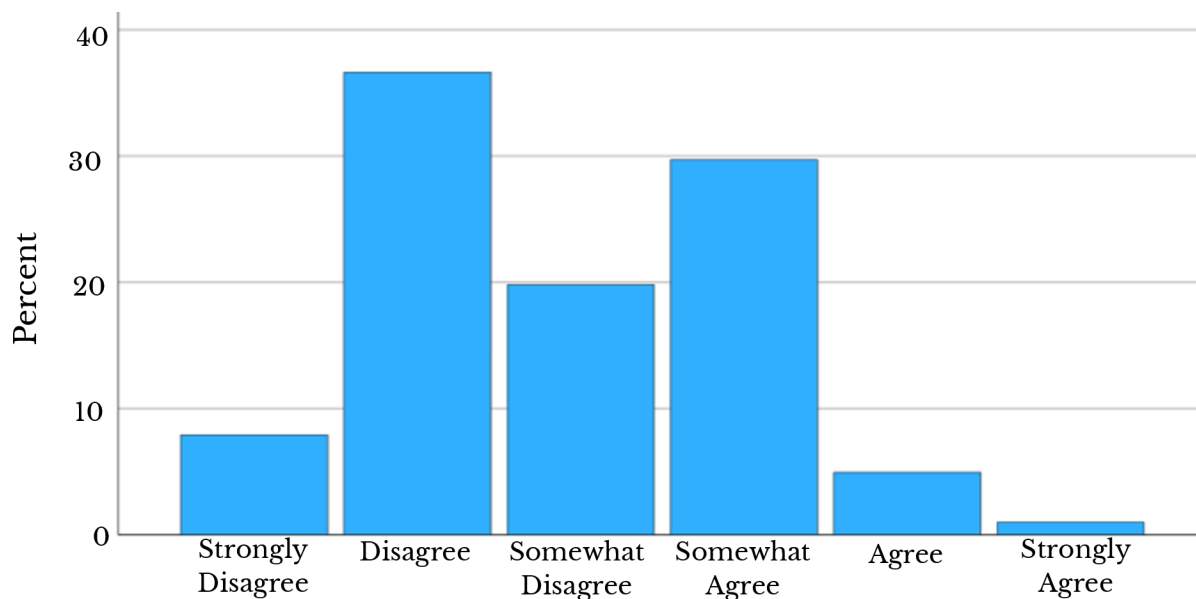


Teamwork among police officers increases officer safety, improves the quality of service provided to the public, and makes a police department more successful (Bergner, 1997). FPD officers were less concerned about being accepted as a partner by others in their organization. More than half (64%) of officers disagreed with the statements that most police officers would not willingly accept a colleague with a mental illness as a partner, and that most police officers would think less of a colleague who has had a mental illness.

Most officers would not willingly accept a colleague with a mental illness as a partner

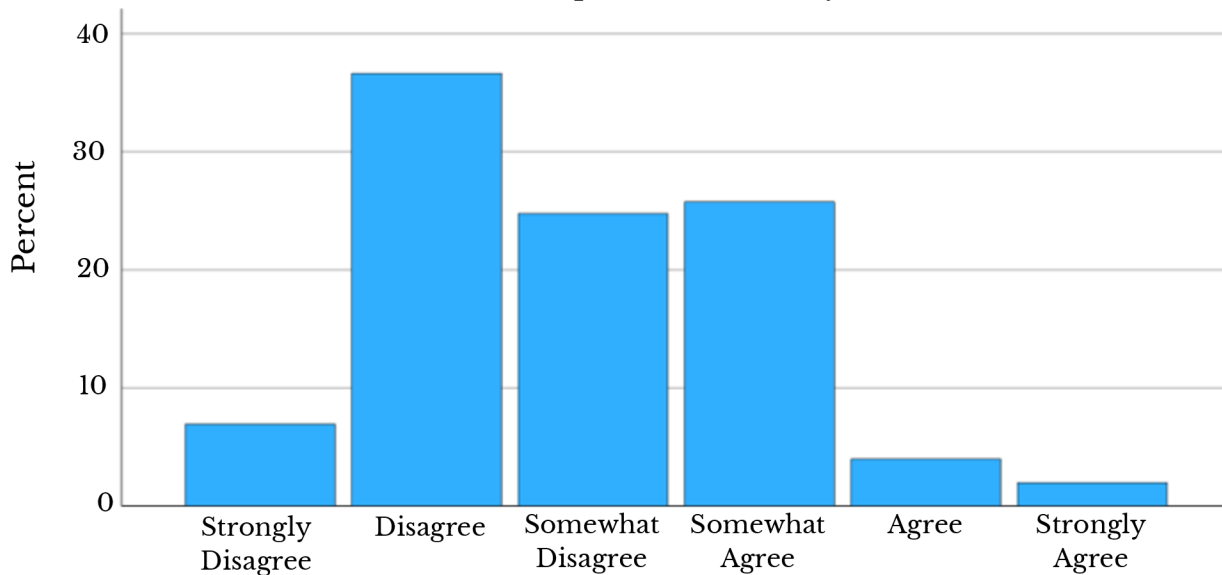


Most police officers would think less of a colleague who has had a mental illness

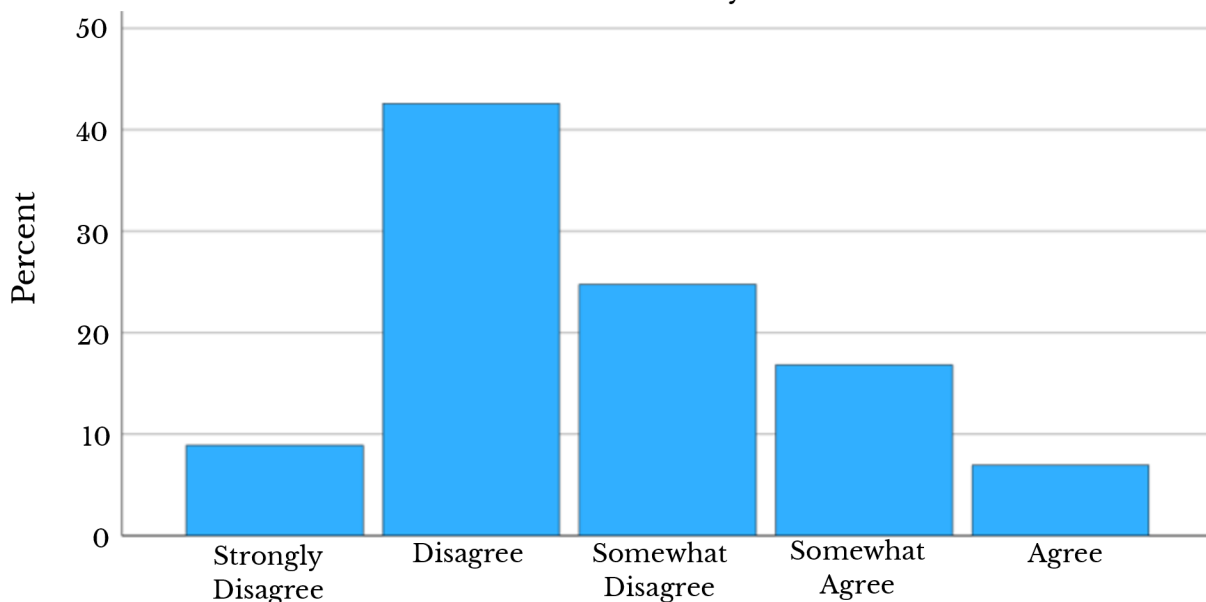


More than half (68%) of FPD officers disagreed with the statement that once they know a colleague has had a mental illness, most police officers would take their opinions less seriously. Most officers (76%) also disagreed with the statement that most police officers would believe that a colleague who has had a mental illness is not trustworthy.

Once they know a colleague has had a mental illness, most police officers would take their opinion less seriously

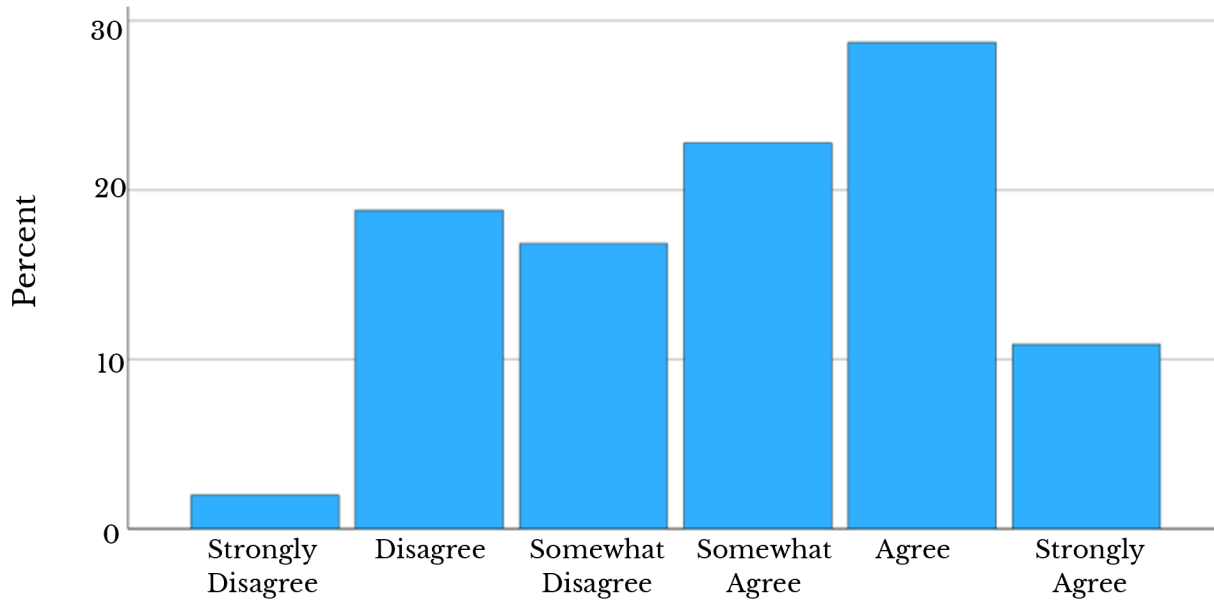


Most police officers believe that a colleague who has had a mental illness is not trustworthy



Police supervisors are not exempt from the perceived stigma associated with mental illness. Over half (62%) of FPD officers agree that most officers would not want a supervisor/manager who has had a mental illness.

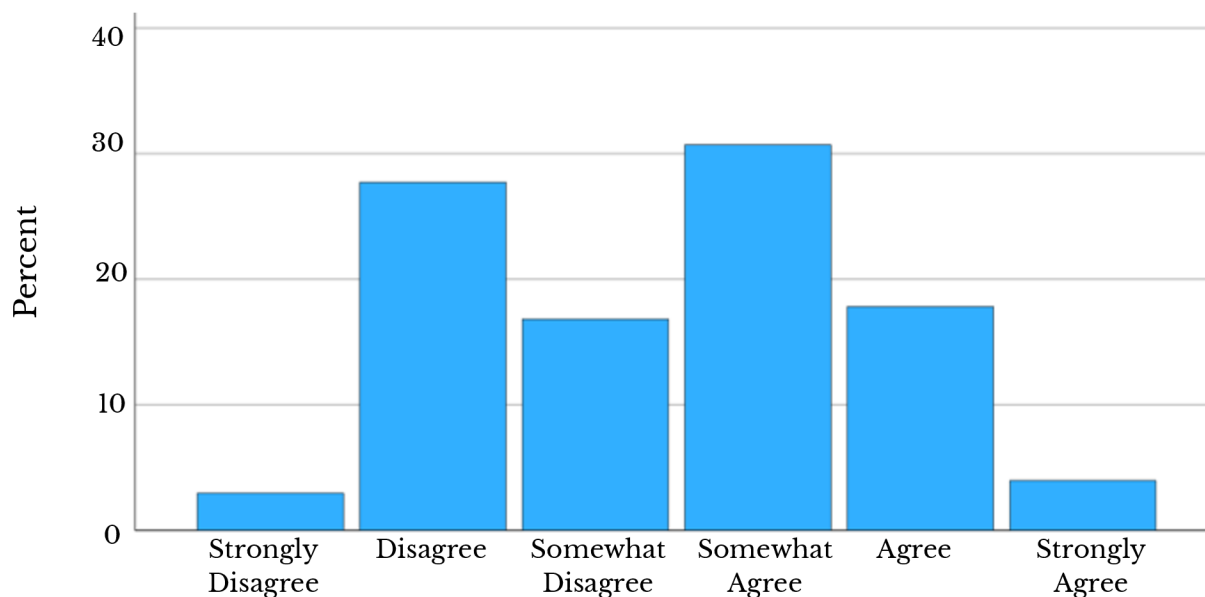
Most police officers would not want a supervisor/manager who had a mental illness



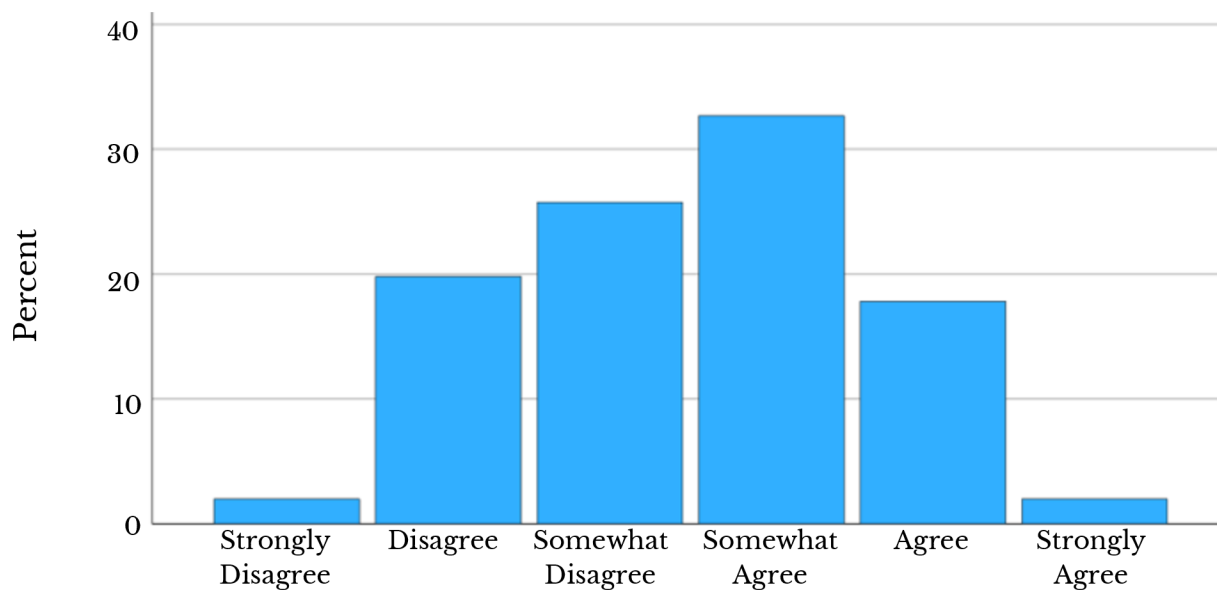
Seeking Help For Mental Illness

Just over half (53%) of FPD officers agreed that most officers think that being treated for a mental illness is a sign of personal weakness, and that most police officers would not seek professional help if they were experiencing mental illness.

Most police officers think that being treated for a mental illness is a sign of personal failure



Most police officers would not seek professional help if they were experiencing a mental illness



Officer Knowledge and Use of Wellbeing Services

The survey also contained several questions inquiring about officers' knowledge of wellbeing services/programs offered to them through the FPD, whether they have ever used those services/programs, and if so, the extent to which they believed it was useful to them.

- **Employee Assistance program** – Approximately 68% of FPD officers surveyed are aware of this program. Twenty officers have used this program, with 17 officers reporting that it was helpful to them.
- **Formal or informal debriefing** – Nearly all (95%) FPD officers are aware of this service. Eighty-three officers have used this service, with 70 officers reporting that it was helpful to them.
- **Police Department Chaplain** – Most (91%) FPD officers are aware of this service. Thirteen officers have used this service, with 11 officers reporting that it was mostly/extremely helpful to them.
- **Substance abuse program** – This program is available to FPD officers through Village Family Service. Over half (66%) of FPD officers were aware of this program. One officer has used this program and stated that it was somewhat helpful.
- **Peer support** – Most (93%) FPD officers are aware of this program. Forty-two officers have used this program, with 36 officers stating that it was helpful to them.
- **Resilience therapy program** – Most (76%) FPD officers are aware of this program. Thirty-six officers have used this program, with 33 officers stating that it was helpful to them.
- **Annual mental health and wellness checkup** – Nearly all (96%) FPD officers are aware of this service. Seventy-five officers have used this service, with 55 officers reporting that it was helpful to them.
- **On-site weight room** – Nearly all (99%) FPD officers are aware of this facility. Eighty-nine officers have used this facility, with 84 officers stating that it was helpful to them.
- **FPD Health and Wellness Coordinator** – Most (84%) FPD officers are aware of the Health and Wellness Coordinator. Twenty-two officers reported that they have interacted with the coordinator, with 19 officers stating that the coordinator was helpful to them.

Most FPD officers are aware of the well-being programs and services available to them; however, it appears that a small portion of the officers utilize these programs. The on-site weight room, the annual mental health and wellness check-up, and the formal and informal debriefing appear to be the most utilized services by FPD officers.

Conclusions

The findings from this study indicate that there is a general perception of stigma associated with mental illness among some police officers within the FPD. This finding is not unique to the FPD, as other studies conducted in police agencies across the United States and across the globe have revealed similar findings (Drew and Martin, 2021; Grumley, Imogen, and Rydon-Grange, 2025; Soomro and Yanos, 2019). An indicator of stigma is the perception that most officers would not disclose their mental illness to their colleagues and supervisors. This resistance to disclosure is troubling since police officers are more likely to experience mental health problems when compared to the general public (Santre, 2024). The FPD does offer a wide range of mental health-related services and programs to their employees; however, it appears that a limited number of employees are using these services.

Although it is difficult and can take time, it is important that police leadership continue to create a culture within the organization that

supports police personnel seeking help when they struggle with mental illness. This culture can be fostered by educating officers about the importance of maintaining their mental health, normalizing conversations about it in the workplace, and providing continuous access to resources and support services. If officers who are struggling with their mental health realize they are not alone, they will be more likely to talk to others about it and ultimately seek the help they need. “Mental health promotion requires the encouragement of mental health screening and long-term monitoring or intervention programs to promote the mental health and well-being of police officers” (Santre, 2024).

References:

- Bell, S., Palmer-Conn, S. and Kealey, N. (2022). 'Swinging the lead and working the head'—An explanation as to why mental illness stigma is prevalent in policing. *The Police Journal*, 95(1), 4-23.
- Bergner, L. (1997). "Building teamwork among officers." *Law Enforcement Trainer*, 12, 6: 10-12.
- Drew, J.M. and Martin, S. (2021). "A National Study of Police Mental Health in the USA: Stigma, Mental Health and Help-Seeking Behaviors." *Journal of Police and Criminal Psychology*, 36, 295–306. <https://doi.org/10.1007/s11896-020-09424-9>
- Grumley T., Imogen, E., and Rydon-Grange, M. (2025). "Examining correlates of police officers' attitudes towards seeking mental health support: A scoping review." *The Police Journal*, 98,1: 3-36.
- Karaffa, K.M. and Koch, J.M. (2016). "Stigma, pluralistic ignorance, and attitudes toward seeking mental health services among police officers." *Criminal Justice and Behavior*, 43,6: 759-777.
- Santre S. (2024). "Mental Disorders and Mental Health Promotion in Police Officers." *Health Psychology Research*, 12. doi:10.52965/001c.93904.
- Soomro, S. and Yanos, P. T. (2019). "Predictors of mental health stigma among police officers: The role of trauma and PTSD." *Journal of Police and Criminal Psychology*, 34, 175-183.
- Stuart H. (2017). "Mental illness stigma expressed by police to police." *Israel Journal of Psychiatry and Related Sciences*, 54:18–23.

About the Author



Carol Archbold, Ph. D., is a Walter & Verna Gehrts Endowed Professor and Challey Institute for Global Innovation & Growth Faculty Fellow at North Dakota State University in the Department of Criminal Justice.

carol.archbold@ndsu.edu