

Introduction to Special Issue Police Stress and Trauma: Recent Perspectives

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Police officers are exposed to events in their work that are often violent and upsetting. Involvement with abused children, severely assaulted victims, accident victims, dead bodies, and human misery can weigh heavily on the mental well-being of officers. As years of policing increase, traumatic exposures may eventually lead to disruption of the quality of life for officers and even poor physical health as well.

This special edition addresses the problematic issue of stress and trauma in police work. Articles in this issue were written by an outstanding team of researchers from the Buffalo Cardio-Metabolic Occupational Police Stress (BCOPS) study, supported by the National Institute for Occupational Safety and Health. This study is presently in its eighth year. Dr. Paul Bartone from the National Defense University was invited as a special guest author regarding the development of a taxonomy for military suicide. Cynthia Robinson, National Institute of Occupational Safety and Health, Cincinnati, Ohio, and Rui Chen SRA International, Fairfax, Virginia were also invited as guest authors for a law enforcement suicide study. Suicide is a tragic problem that haunts both military and

police work. Prior research has noted an association between trauma and suicide.

Results from mortality studies suggest that police officers have higher death rates from specific stress-related diseases and on average die younger than the general population in the U.S. Traumatic stress symptoms have been significantly associated with increased general health symptoms and conditions. In the issue's first article, Violanti and colleagues compare the life expectancy of a sample of 2,800 deceased male officers to deceased males in the general U.S. population. Their results indicate that, on average, the life expectancy of police officers was significantly lower than the U.S. population and shorter and more pronounced in younger age categories. Police officers had a significantly higher average probability of death than did males in the general population. Possible reasons for lower life expectancy among police are discussed, including posttraumatic stress disorder (PTSD), shift work, obesity, and hazardous environmental work exposures.

In the second article, Hartley and colleagues take a look at the impact of stress on police officers with prior military service. They hypothesize that prior military experience may actually be beneficial for officers now in police work in terms of reducing stress. The authors expand past research on this topic to include specific types of police stress, combat status during prior military service, and coping strategies. Their results indicate that police officers with military experience reported less police-specific stresses, including organizational and danger stresses, than those without such experience. Interestingly, military combat veterans utilized less effective

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coping strategies than those without combat or non-combat status, yet still reported less stress. The authors call for future research to help disentangle this complex association through the inclusion of additional individual factors and prospective work.

In article three, Hartley and colleagues look at whether or not frequency, recency, and type of police-specific traumatic events were associated with PTSD symptoms. Frequency of several traumatic events was associated with higher PTSD scores in women, while the recency of seeing victims of assault was associated with higher PTSD scores in men. These results may be helpful in developing intervention strategies to reduce the psychological effects following exposure and these strategies may be different for men and women.

Article four, by Bond and colleagues, explores how different types of traumatic events may impact sleep quality and quantity in police officers. Police officers are known to have deficient sleep quality as well as poorer collective sleep. In female officers, seeing more abused children was associated with poorer sleep quality and seeing victims of serious traffic accidents was associated with shorter sleep duration. Higher workloads for women officers also appeared to affect sleep quality. These results are discussed in the context of gender differences in policing.

In the fifth article, Fekedulegn and colleagues examine the cross-sectional association of long work hours with work absence in a cohort of police officers. The authors examine the prevalence of one day absences (considered not associated with actual illness) and three day absences (considered physician documented illness absences) as associated with increasing hours at work and overtime. Work hours were negatively associated with both durations of work absence (one-day, ≥ 3 consecutive days). The more long hours worked the fewer the absences. The authors consider possible explanations of this unexpected finding. Determination of the underlying reasons for the inverse association requires further studies with larger samples and a prospective design that would enable estimation of the true incidence rates of absenteeism associated with long work hours and also identification of potential mediators.

Andrew and colleagues, in the sixth article, examine cross-sectional associations of protective factors with symptoms of depression, posttraumatic stress disorder (PTSD), and anxiety in police officers. A major protective factor examined is hardiness and its three dimensions of resiliency: control, commitment, and challenge. The commitment dimension

of hardiness was most strongly protective of psychological distress in both men and women police officers. Finding meaning and purpose in community service is a touchstone of many individuals working in law enforcement. Higher levels of hardiness commitment were approximately two-fold more protective among women than among men. Perceiving stressful events as opportunities for personal growth—the challenge dimension of hardiness—appears to be more strongly protective for psychological distress among men. While this difference is most pronounced for depressive symptoms, it appears less so for anxiety and PTSD symptoms.

Suicide is a tragic outcome both in police work and the military. Since 2005 suicides among U.S. military personnel have risen dramatically, and continue to rise despite significant leadership attention to suicide awareness and prevention. Prevention efforts have proven unsuccessful, perhaps because they have focused on associated factors, rather than the underlying more fundamental contributing ones. In the seventh article, Bartone presents a new taxonomy for organizing and thinking about the multitude of factors associated with suicide in the military. He distinguishes four sets of factors associated with suicide: (1) formative factors; (2) background factors; (3) precipitating factors; and (4) enabling factors. A model is presented in which military-specific formative factors are shown to contribute to alienation and powerlessness, key factors that can lead to suicide. Recommendations are provided for building up the sense of commitment (vs. alienation) and control (vs. powerlessness) in military personnel as a strategy for reducing suicide. Bartone's model can be applied to police work as well.

Following Bartone's article, Violanti and colleagues examined recent patterns of law enforcement suicide during 1999, 2003-2004, 2007, based on the National Occupational Mortality Surveillance (NOMS) system maintained by the Center for Disease Control and Prevention's National Institute for Occupational Safety and Health. Results indicated that law enforcement suicide was significantly higher than the U.S. working population for all races and sexes combined. Detectives/criminal investigators/police had an 82% increase and corrections officers a 41% increase in suicide.

Conclusion

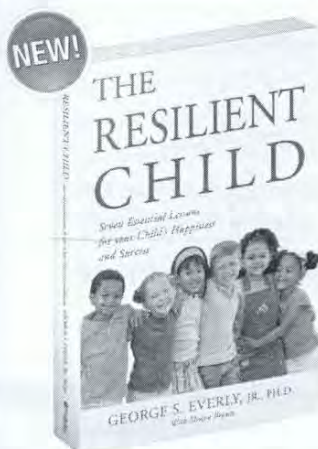
The research in this special issue demonstrates the often deleterious effects of stress and trauma in police work. The articles were researched and written in the context of bring-

ing heightened awareness to the psychological and physical dangers associated with this occupation. However, there is another side to the story - a need to explore paradigms based on recognition that stress and trauma do not have to result in pathogenic outcomes. As suggested by Hartley and colleagues in this edition of the Journal, a social experience of military service deemed protection for future stress, and by Andrew and colleagues who found protective effects of commitment to life, we need to search further for additional posits to develop a protective stress shield in policing. Within a more psychologically protective environment, police will

have at their disposal a utility that they can use to guide the development and maintenance of resilience in the face of stress and trauma. Furthermore, because police encounter unpredictable and challenging circumstances repeatedly, it is important that resilience programs are designed which identify the resources that facilitate proactive development over time. The problems discussed in this issue are amenable to change through organizational intervention and change strategies. Future projects which focus on organizational interventions to improve resilience may facilitate more positive anticipated results in police practice.

Seven Essential Steps To Preparing Children for Tomorrow's Challenges

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The Resilient Child

Seven Essential Lessons for Your Child's Happiness and Success

George S. Everly, Jr., Ph.D.

"...This delightful and informative book is designed to help busy caregivers and parents guide their children to view their lives as 'half full' even in the face of adversity and the bumps along life's journey." — Alan M. Langlieb, MD, MPH, MBA, The Johns Hopkins Hospital

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The Resilient Child teaches parents the key responses that all children need to learn in order to effectively cope with life's adversities. Dr. Everly teaches readers how to live a stress-resilient life that will lead to happiness and success. These skills are presented as seven essential lessons:

- Develop strong relationships with friends and mentors.
- Learn to make difficult decisions.
- Learn to take responsibility for your own your actions.
- Learn that the best way to help others, and yourself, is to stay healthy.
- Learn to think on the bright side and harness the power of the self-fulfilling prophecy.
- Believe in something greater than you are.
- Learn to follow a moral compass: Integrity

George S. Everly, Jr., PhD is one of the "founding fathers" of modern resiliency and stress management. He is on the faculties of The Johns Hopkins University School of Medicine and The Johns Hopkins University Bloomberg School of Public Health.