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POLICE OFFICER COPING: THE EFFECT OF POLICE CULTURE, MANAGEMENT, AND
FAMILY

by

Megan Heflin-Brand

B.A., Southern Illinois University, 2018

A Thesis

Submitted in Partial Fulfillment of the Requirements for the
Master of Arts Degree

School of Justice and Public Safety
in the Graduate School
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THESIS APPROVAL

POLICE OFFICER COPING: THE EFFECT OF POLICE CULTURE, MANAGEMENT, AND
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A Thesis Submitted in Partial
Fulfillment of the Requirements
for the Degree of
Master of Arts
in the field of Criminology and Criminal Justice

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AN ABSTRACT OF THE THESIS OF

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TITLE: POLICE OFFICER COPING: THE EFFECT OF POLICE CULTURE, MANAGEMENT, AND FAMILY

MAJOR PROFESSOR: Dr. Matthew Giblin

This thesis examines the idea that police officers have supportive factors in their lives which influence coping mechanisms used to handle occupational stress. This idea comes from police culture literature which suggests that officers are encouraged to use maladaptive coping strategies like drinking and emotional suppression to deal with stress. Additional research on management support and family support are introduced as alternative supportive factors which can promote the use of adaptive coping like agency offered services and programs. This thesis uses data from “Work and Family Services for Law Enforcement Personnel in the United States” (Delprino, O’Quin, & Kennedy, 2000). A subset of questionnaire items and officer responses are coded and run through statistical analysis including linear regression and logistic regression. Finally, findings are discussed and future research on the topic is suggested.

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CHAPTER 1

INTRODUCTION

Occupational stress (used interchangeably here with job stress) is a term commonly used to describe the stressful features of certain occupations. Jobs characterized by occupational stress normally include those which are considered hazardous or emotionally and physically straining. Through the years, law enforcement has widely become known as one the most stressful occupations in the world (Anshel, 2000; Carlan & Nored, 2008). Not only are officers subject to stress by the nature of their work, but they also face stressful issues within their organization such as inflexible management and long hours. Police officers are constantly exposed to unruly, potentially dangerous citizens in the field as well as ill-treatment within the department (Hart, Wearing, & Heady, 1995).

The consequences of job stress are considerable as research shows that it is linked to numerous health-related issues. Left unaddressed, stress may leave officers with more physical and mental health problems compared to other professions. Common problems range from physical issues like heart complications and cancer to mental issues like post-traumatic stress disorder, anxiety, and depression (Carlan & Nored, 2008). According to Anshel (2000), these stress-induced health issues have led the policing profession, when compared to other occupations, to have some of the highest rates of job burnout, employee turnover, and early retirement.

With job-related stress comes the need for strategies that officers use to deal with their inherent work experiences. A common way to combat stressors within policing is by using coping mechanisms. Research on coping has led to the creation of coping terms which indicate positive and negative strategies such as adaptive coping and maladaptive coping (Violanti,

Marshall, & Howe, 1995). Adaptive coping refers to healthy coping strategies like emotional reactions, problem confrontations, and help-seeking behaviors. On the other hand, maladaptive coping includes short-term unhealthy strategies such as drinking, smoking, and avoidant behaviors. These behaviors may temporarily relieve stress but cause secondary consequences.

The way individuals choose to cope with stress can depend on many factors. While the type and amount of stress present in a person's work may influence the coping strategies used, authors such as Menard and Arter (2013) state that support from family, friends, co-workers, work supervisors, and other people may also impact how individuals handle stress. Given the uniqueness of police work and the stressors inherent to their job, police officers may largely rely on supportive factors to actively cope with stress (Menard & Arter, 2013).

Much of what is understood about officer coping comes from police culture literature. Police culture is created as a response to police stressors and is a closed off society which excludes the trust or help from outsiders like civilians (Paoline, 2004). Through police culture, officers adopt aggressive policing tactics, social secrecy, and overly suspicious personas (Paoline, 2004; Wesley, 1970). Officers heavily rely on the support of other officers and their masculine techniques to handle work-related stressors. With loyalty to the culture, officers are socially isolated and inhibited from seeking help for stress due to the stigma associated with mental health in the force. Consequently, commitment to the culture has limited the ways in which officers can cope with stress. Officers typically rely on alcohol and emotional suppressing to cope with work stressors (Anshel, 2000; Violanti et al., 1985).

Officers also have other options for support outside of police culture that are rarely discussed. While severely under-researched, officers may also turn to police management and family as an avenue for coping (Menard & Arter, 2013; Woody, 2005). The support of

management can determine the relationship between supervisors and lower-level workers as well as the stress-focused services they provide within the agency. Likewise, the support of family can dictate how much an officer brings work-related issues home and the role they play in helping officers cope. The support of management and family creates more opportunities for coping.

For police officers, opportunities for adaptive coping lie within services and programs offered within the agency that are tailored towards work related stress. There are a number of services with a wide range of targeted topics that officers may use including critical incident managing, PTSD, domestic violence, and substance abuse (Amaranto et al., 2003) However, whether an officer utilizes these programs is likely to depend upon the supportive factors that promote the use of these services. If there is little support or availability of these services, then officers are not likely to use them.

For this reason, this study will examine the factors and stressors within the lives of officers which affect coping strategies. Specially, police culture, management support, and family support are examined as critical factors affecting officer coping. It can be argued that the coping mechanisms officers use highly depend on the supportive factors within their lives. Therefore, officer use of adaptive coping and maladaptive coping can be influenced by the support of police culture, management, and family.

With greater adherence to police culture, it can be proposed that officers will engage in more maladaptive coping strategies and less adaptive coping strategies. Conversely, with support from management and family, officers are less likely to use maladaptive coping and more likely to engage in adaptive coping strategies. The idea behind these hypotheses is that police culture encourages unhealthy, maladaptive coping strategies. The general literature on police culture

portrays the ideologies behind officer actions. Additional research on the underlying issues of police culture shows how adherence constrains healthy coping mechanisms. Through literature on other supportive avenues, factors which encourage adaptive coping strategies for officers can be determined. Such factors like police management and family support have been tied to increased self-confidence and gratitude in officers (Menard & Arter, 2013; Woody, 2005). With the support of police management and family, officers can be encouraged to use adaptive coping strategies like the programs and services offered through the agency.

Using linear regression and logistic regression, factors such as police culture, management, and family are examined to see how they influence maladaptive and adaptive coping, controlling for age, gender, job title, and prior military experience. If police culture is positively linked to maladaptive coping, more awareness and effort should be targeted at changing beliefs or reducing ties to the culture. Additionally, if support from other factors like management and family lead to adaptive coping, then results from this study highlight avenues which promote healthy coping methods for officers. This is important for the mental health of police officers. Offering programs and services within law enforcement agencies is only effective if officers are willing to use them. If officers are engaging in more of these adaptive coping strategies, then there may already be a reduction in the stigma on mental health within the profession. Conversely, if officers are not using agency offered resources, this can guide future research on addressing the need for increased participation.

CHAPTER 2

LITERATURE REVIEW

Occupational Stress

Occupational stress can be described as the characteristics or events related to the workplace that result in the ill health of workers (Beehr, Johnson, & Nieva, 1995; Motowidlo, Packard, & Manning, 1986). In the work environment, this means that job features infringe upon a worker causing immediate effects and a prompt reaction (Cummings & Cooper, 1979). The stressful features are then labeled as stressors while the effects are labeled strains. The response to the strain is referred to as the adjustment process and can reinforce strains through failed attempts to adjust or by leaving strains unaddressed (Cummings & Cooper, 1979). With a higher frequency and intensity of stressors, more strains would be produced. The type of job and conditions of the environment dictate the frequency and intensity of stressors and strains (Motowidlo, Packard, & Manning, 1986).

In a study on occupational stress within policing, Liberman and colleagues (2002) used a 68 item Work Environment Inventory to test perceptions and prevalence of job stressors. Of the items, 15 were specific to policing while the remaining 53 were generically related to work experiences. The authors found policing to be significantly related to the police-specific items as well as the generic items. This means that officers experience similar occupational stressors as other occupations in addition to stressors specific to policing. Some of these police-specific stressors that were the most highly ranked include the demands and nature of police work causing personal problems like alcoholism, emotional suppression and anxiety, public criticism of the policing profession, and criminal sanctions administered in court not being the appropriate length and severity (Liberman et al., 2002). In another study, Spielberger, Westberry, Grier, and

Greenfield (1981) also examined stressors within policing using an itemized survey. Their results found the top five stressors included officers being killed in the line of duty, killing someone in the line of duty, exposure to victimized children, physical attacks, and situations requiring use of force. Additionally, Maran, Varetto, Zedda and Ieraci (2015) studied the level of stress experienced by law enforcement officers. The authors found that patrol officers were most susceptible to work-related stressors.

Left unaltered, stress in the workplace has a long-standing history of causing a variety of emotional and physical conditions. For instance, work-related stressors can lead to weakened work performance, job burnout, negative mental states, and deteriorating physical health. Research on occupational stress has led to further insight on which occupations are considered more stressful than others. In comparison to other occupations, police work has commonly been labeled a stressful occupation. Policing is a unique occupation where the work environment poses the possibility of physical danger to officers and they are granted coercive authority to handle their responsibilities (Anshel, 2000; Carlan & Nored, 2008). According to Anshel (2000), police officers experience more stress-induced physical and mental problems than most other occupations. Physically, police work cultivates issues such as high blood pressure, hypertension, stroke, ulcers, heart disease, digestive cancer, and suicide (Carlan & Nored, 2008). Mentally, police work has led to depression, anxiety, post-traumatic stress disorder (PTSD), neuroses, avoidance behavior, and substance abuse (Carlan & Nored, 2008). Together, these issues are found to impact police officer duties with higher rates of sick days, job burnout, and early retirement.

Stressors

Operational Tasks

Stressors within policing have been attributed to a range of factors. Past research has largely focused on the performance or operational tasks which cause distress to officers. Results have routinely found negative features of police work to include boredom, disrespect from the public, tedious paperwork, shift work, and violent threats (Anshel, 2000; Burke, 1998; Carlan & Nored, 2008). In addition to everyday tasks, officers are also subject to trauma, violence, and other severe distress from shootings, responding to deaths and assaults, and physical encounters with citizens. In a study by Violanti and Aron (1994), the authors ranked police stressors from highest to lowest based on officer experiences. Although the occurrences are rare, officers indicated that the top two stressors included killing someone in the line of duty and experiencing another officer being killed. Another stressor within policing is the ambiguity of the role itself. Police officers are left to make decisions using their own discretion with little guidance. Expectations from the community largely shape the role of officers and are subject to change with modernization (Woody, 2005). This ambiguity can often leave officers frustrated by the difference in duties they are expected to perform versus the duties actually performed.

Organizational Contexts

Other authors have argued that the operational tasks are not the most distressing part of police work (Carlan & Nored, 2008; Cowper, 2000; Hart, Wearing, & Heady, 1995). Organization contexts have also been linked to job stress. The term organizational contexts refers to the structure of policing such as the hierarchy of workers, policies, and job duties. Authors such as Hart and colleagues (1995) have criticized past research for methodological issues when studying police stress. By focusing on positive as well as negative experiences and

comparing them to similar occupations, the authors provide a better understanding of the stressful aspects of policing. Their research is distinctive from other literature which only focuses on the tasks performed. Hart et al. (1995) found that organizational contexts of policing cause more officer psychological responses to their work than the police duties themselves. Common stressors within the organization include poor relationships with management, unfair employment practices, lack of inclusion in organizational decisions, lack of organization support, and insufficient equipment, pay, and promotional opportunities (Carlan & Nored, 2008). In the organization, Violanti and Aron (1994) found shift work, insufficient support from the department, and inadequate personnel to be the highest ranked stressors.

The stressors within the organization of policing can be explained through research on law enforcement leadership conducted by Cowper (2000). Law enforcement organizations are frequently compared to the structure of the military given their strict rules, chain of command, and use of weapons. However, Cowper (2000) explained that the structure of policing does not mimic a modern military model. The military has made vast improvements over the years to its structure, leadership, and policies. On the other hand, police agencies largely stay the same with little changes to their traditional structure. This unwillingness to upgrade structure overtime or change traditions has led to organizational tensions between officers and supervisors. Thus, police officers are more susceptible to organizational stressors which differ from the military or other high stress professions. With this examination of stressful experiences for officers, different coping strategies can be evaluated.

Coping

As mentioned earlier, occupational stressors lead to strains which lead to adjustment processes. However, individuals can adjust to strains before experiencing the detrimental

outcomes. In other words, not all officers experience the harmful effects of the job. Rather, some can adjust to the working environment just fine.

For others, the occurrence of work-related stress has intensified the need for coping processes to balance the relationship between stress and well-being. The idea of identifying mechanisms to alleviate vulnerabilities to stressors is important for high stress jobs. Using a definition provided by Balmer, Pooley, and Cohen (2013), coping can be defined as “an individual’s cognitive and behavioral actions to manage internal or external stressors or problems which exceed their personal sources” (p. 6). Coping offers individuals the process of finding techniques which work to reduce or remove the negative effects of stressors. Violanti (1992) examined stress within police academy recruits and found that those who experienced more stress tended to use more coping mechanisms. This shows the importance of examining the coping strategies used within high stress jobs. Additionally, coping strategies used by employees to handle job-related stress can be supported or hindered by other employees within the environment (Beehr et al., 1995). Within policing, this means that officers may find strategies for handling stress commonly used among other officers. Conversely, officers may also engage in activities that officers do not deem useful or appropriate. Strategies used then become normalized and officers find themselves with a subculture of beliefs and ideas that guide them with their duties and relationships to others.

General Coping

There are a variety of ways individuals can cope with stressors. The most popular include problem-focused, emotional-focused coping, and avoidance-focused coping (Beehr et al., 1995; Johnsen, Laberg, & Eid, 1998). Problem-focused coping, also known as task-focused coping, uses activities to target the source of the stress to remove or improve the stressful condition

(Beerh et al., 1995). Problem-focused coping can also be characterized as aggressive efforts to change or solve work related problems (Haar & Morash, 1999). Second, emotion-focused coping focuses on regulating the emotional strain experienced through expressing emotions (Johnsen et al., 1998). This often includes methods like social support and emotional responses. Lastly, avoidance-focused coping is more of a dysfunctional method as it involves avoidance or denial of stressors (Johnsen et al., 1998). This may include escapist behaviors like distancing, isolation, and emotional suppressing (Haar & Morash, 1999).

To study coping within the policing profession, authors such as Violanti et al. (1985) and Haar and Morash (1999) suggest that the common coping strategies mentioned do not apply well to policing. Rather, the development of terms adaptive coping and maladaptive coping are two methods which encompass a variety of different actions taken to cope with stress. As applied to policing, adaptive coping is considered healthy coping behaviors like problem-focused coping and emotional-focused coping. Strategies often include help-seeking behaviors and social support from friends and family. Like avoidance-based coping, maladaptive coping includes escapist behaviors such as alcohol and drug abuse, disengaging, isolation and emotional suppressing (Mernard & Arter, 2013). A large problem with policing and stress research is the lack of attention to the adaptive ways in which officers cope. Research has largely focused on the maladaptive strategies and the harmful impacts they cause. However, much of this has to do with research predominantly focusing on the subculture of policing.

Police Officer Coping Process

The assumption of coping is that specific mechanisms or strategies are used for the intent of lessening the negative impacts of stress. Whether it is from operational tasks or organization contexts, officers must be able to effectively tolerate the source of their strain to continue to their

work. To explain the decision-making process and experiences of officers, Anshel (2000) described three general assumptions about perceiving and coping with stress as it relates to officers. The first postulate includes the situation or outer stimulus which is understood to be threatening, also known as acute stress, and the effect it has on mental and physical performance. For officers, this means that courses of action will depend on the intensity of stress in that situation. Highly stressful situations will impact an officer's information processing such as perceiving, decision making, reacting, and performing (Anshel, 2000). The inability to handle such situations are known to lead to wrong decisions, injuries, wrongful shootings, errors, and unnecessary danger. According to Anshel, the second postulate involves the failure to effectively cope with short-term acute stress which leads to long term chronic stress. Chronic stress generally includes poor health, harassment by others, bad work relationships, and/or persistent physical pain. Psychologically, chronic stress lowers mental processing which increases illnesses like anxiety and depression, low self-esteem, and low self-control (Anshel, 2000). On the work end, chronic stress leads to lower job contentment and performance and higher burnout which increase officer dropout rates. The use of coping skills such as drinking, tobacco use, and irrational reactions will lead to chronic long-term stress. The third postulate of coping is that long-term stressors of policing will lead to poor job satisfaction and performance, burnout, and departure from the profession altogether. Job burnout and low retention rates are well-known issues within policing. Together, the three postulates define the process of coping as it relates to officers.

Police Culture to Cope

History and Elements. A common way that police officers learn to cope with stress is through the creation of police culture. In the late 1940s, Westley (1970) was the first researcher

to study the contexts in which police officers perform and handle their unique environments. He discovered the traditional elements of police culture that still encompass their values today including isolation, hostility, self-protection, and secrecy (Westley, 1970). These adaptations were caused by tensions with the public where citizens were critical of police and at times hostile. As police modified their behavior to address public hostility, these behaviors became the solutions to do their job. Through time, police culture has grown to include a variety of coping mechanisms that officers use to handle the strains produced by their occupational and organizational working environment.

According to Paoline (2004), police culture can be defined as “the widely shared attitudes, values, and norms that serve to manage strains created by the nature of police work and the punitive practices of police management and supervision” (p. 207). As mentioned, the occupational environment commonly includes citizen interaction, threat of danger, and coercive authority. In the organization, officers are subject to the unpredictability of supervisors and ambiguity of their role as an officer. A summarization of police stress and coping is provided by Terrill, Paoline and Manning (2003): “What must be recognized is that patrolmen lead something of a schizophrenic existence: they must cope not only with the terror of an often hostile and unpredictable citizenry, but also with a hostile-even tyrannical-and unpredictable bureaucracy” (p. 1005). The creation of police culture has given officers a way to handle both.

Paoline (2003) argues that police culture is defined by two distinguishing characteristics: social isolation and group loyalty. Due to perceived danger, police culture treats policing as a closed off society which opposes contact with citizens or anyone outside of the policing profession. Officers generally believe that citizens are unwilling to assist them with police duties or would be unhelpful if they tried. Additionally, the coercive authority given to officers further

isolates the profession from the public because officers hold the right to force compliance on citizens when needed. Citizens become critical and hostile over this level of power. This two-way cynicism between citizens and officers have created a barrier between the two and an we-versus-them attitude (Paoline, 2003, 2004). Thus, officers are left in social isolation from the rest of society. Woody (2005) also adds that social isolation causes officers to become paranoid and believe that threats exist even when absent. This fact, coupled with role ambiguity discussed earlier, leads to an aggressive and crime-fighting orientation to their jobs (Woody, 2005).

As for group loyalty, it is known that organizational contexts play a large role in stress experienced by officers. Police culture has also adapted to provide solace from management. The culture serves as a sense of protection or group loyalty by peers as officers believe in allegiance to the culture despite any questionable behavior by officers (Paoline, 2003; Paoline, Myers, & Worden, 2000). When officers receive recognition, it is normally for something they have done wrong. Thus, officers prefer to lay low with a “cover-your-ass attitude” (Paoline, 2004, p. 207). Rather than turning to supervisors to fix problem officers, police culture has taught them to look the other way and stay out of managerial sight. This hush-hush nature negates efforts to catch and correct corruption or other misconduct (Paoline et al., 2000)

Coping Strategies. Given that police culture was created out of the strenuous demands of the job, it is important to consider the ways in which the culture promotes coping strategies to officers. As mentioned earlier, officers remain on edge, suspicious of their surroundings and distrusting of citizens. Police culture itself provides mechanisms for tolerating stress. However, idolization of aggressiveness and masculinity within the culture would discourage the use of most adaptive coping strategies. Under this culture, common methods of coping like emotion-focused or problem-focused are not found to exist because officers are expected to suppress their

emotions and avoid sources of strain like management scrutiny. This removes the ability to cope through emotions or target sources of strain to reduce stress.

Instead, many methods used within police culture are typically referred to as maladaptive coping in stress related literature. For example, Violanti and colleagues (1985) found cynicism and alcohol use to be popular maladaptive responses to stress among officers. These responses are a large part of police culture as officers are encouraged to engage in masculine activities and be distrustful of citizens. Similarly, Anshel (2000) mentions that maladaptive coping occurs when individuals react with heightened aggression towards stressful situations. Once again, increased aggression towards citizens is another aspect of police culture. Rather than decreasing stress, Anshel states that maladaptive responses increase the intensity of stress and result in poor mental and physical health. In another study, Gersons (1989) examined post-traumatic stress disorder in police officers. The author found that only three of thirty-seven officers were symptom free, yet none had sought professional help. The officers claimed that police culture discouraged officers to discuss emotions or mental health issues. Due to the idolization of aggression and toughness, officers were expected to use alcohol and humor to deal with stress. Gersons claimed that police culture may be worsening the mental health of officers rather than helping it. Additionally, Menard and Arter (2013) mentioned how police culture has led to maladaptive coping such as emotional suppression, withdrawnness, and self-criticism. Alcoholism, drug use, tobacco use, and overeating were also negative behaviors reported. Woody (2005) discussed how adherence to police culture has caused officers to become estranged from friends and family. Due to the favoritism of isolation, police culture becomes a barrier for social and family relationships. This heavy reliance on coworkers within police culture has forced officers into unhealthy relationships and emotional disturbance (Woody,

2005).

Rejection of Police Culture and Coping Strategies

Despite traditions of police culture, some research shows that not all officers subscribe to these ideologies. More specifically, Terrill, Paoline and Manning (2003) state that officers are likely to differ in the ways they cope with work-related stressors based on their commitment to the culture. Paoline et al. (2000) allude to this as autonomy versus individualism. Individualism refers to behavior that differs from group mentality. In other words, it is used to describe officers who do not pledge to police culture views. The authors mention that officers cope in a variety of ways based on the strains generated in their working environment. Much of what research shows about officer coping mechanisms focuses on police culture. However, there appears to be some expansion of research regarding the way in which officers view police culture. In Paoline and colleagues' (2000) study of officer individualism, they found that police culture is still present but is not comprised of all attitudes and beliefs of every officers when it comes to policing tactics. For example, the authors found that officers had some hesitations on aggressive policing tactics and were less accepting of officer misconduct. This shows that officers may be straying away from traditions of police culture and possibly the way they handle stress through it. Although the authors do not discuss officer coping, individualism may lead to coping strategies that also differ from police culture.

Within the literature, officers themselves have discussed issues within the culture of policing and how it has impacted the ways they handle stress (Gersons, 1989; Violanti, 2010). This leads to the question of whether adherence to the culture is as prominent as research makes it to be. If officers are criticizing the cultural standards, there may be more individualism within policing than research realizes. As mentioned, Gersons (1989) research on PTSD in officers left

officers criticizing police culture. Officers displayed a need for mental health services within their department. Likewise, in Violanti's (2010) research on police suicide, he found that work experiences that officers endure are the primary predictors in suicide analysis. He also stated that officers expressed a need for coping strategies and services within law enforcement to combat work-related stressors. This research suggests that there may be other prominent factors within the lives of police officers that affect the way they cope with stress. It would be unrealistic to assume that officers coping decisions are guided solely by their adherence to police culture. Rather, is it likely that there are other avenues guiding officers with coping strategies.

Despite the lack of research on adaptive coping strategies, much can be deduced on how officers would react to stressors when influenced by factors other than police culture. The role of management within the organization and support from family are also likely to influence the ways which officers cope with stress.

Organization Support

Aside from police culture, officers may also turn to the organization and management of the agency. Under police culture, officers normally refrain from engaging with management out of fear of being reprimanded. Additionally, if the organization were to offer services or programs for officers to use to handle work related stressors, police culture research suggests that officers would not use them due to the stigma associated with mental health or treatment within law enforcement. However, as research has discovered an increased need for management support and services for officers, management may be a supportive force to turn to increase the use of adaptive coping (Gersons, 1989, Violanti, 2010; Woody, 2005).

According to Woody (2005), there has been a call for supervisors to provide better social support to reduce tensions within the organization. Affirmations and recognition of competence

by supervisors' boosts confidence and job satisfaction for officers. With a rise in support, the wall between management and line officers as stated in police culture can be unbuilt.

Additionally, within the organization, a newer approach to handle the adverse outcomes of policing include adaptive efforts offered by the agency. As far as adaptive coping goes, research has praised the introduction of services and programs within law enforcement agencies meant to provide officers with resources to handle job-related stressors. This may suggest that officers are openly communicating their need for mental health services (Gersons, 1989; Vilolanti, 2010). According to Amaranto, Steinberg, Castellano, and Mitchell (2003), some of the most important program topics to include are stress management, domestic violence, PTSD, critical incident stress management, and substance use. Furthermore, the authors conducted an experimental study to see whether officers would use an 800-hotline intervention to help deal with stress. Their results showed a significant increase in the use of the hotline for officers in the Newark (NJ) Police Department. The authors highlighted the importance of implementing services within agencies to help officers effectively perform their jobs, increase job satisfaction, and manage work-related stress (Amaranto et al., 2003). With the support of management, officers may be more likely to use programs and services offered through the agency to combat stress.

Carlan and Nored (2008) also discussed the increased desire for stress prevention programs within agencies as awareness for police stress and coping has increased. In their examination of program opportunities and stress, the authors found that when agencies encouraged counseling, officers experienced a reduction in stress. A popular method mentioned is the organizational orientation which includes proactive methods that are department centered rather than individual centered. The authors mention that departments should regularly assess

physical and mental stress of officers, monitor coping mechanisms, and implement intervention strategies when needed. However, this would require active cooperation between management and officers to install a department centered method. With increased support by management, this method is more likely to take place. By doing so, Carlan and Nored (2008) also believe that stress prevention programs can be implemented in police culture customs.

Social Support

The role of social support is usually viewed as a coping mechanism itself. In an article on the effects of coping and social support in officers, Patterson (2003) argued that coping and social support are synonymous because talking to a co-worker about a work-related stressor may serve as a problem-focused coping technique if the individual receives guidance on how to handle the issue. However, the advice being taken may vary depending on the source of support and the availability of their suggestion. For this reason, social support is viewed as a guide to certain coping strategies rather than a coping process itself. Additionally, Peterson (2003) found that social support buffered against work-related stressors, but the author did not measure the type of support. There is a significant omission because it is possible that coping strategies are encouraged and/or discouraged by both the strength of the support and the source of that support, an empirical question examined in the current study.

Family Support

The family represents one source of social support for officers. Given the uniqueness of policing and the characteristics of the job, officers are more likely to receive support from family over other members of the community. Within the community police officers are often avoided by the public and stigmatized from bad experiences (Menard & Arter, 2013). The role of family is found to be important when it comes to officer stress and coping. Not much is known about

how the families of officer's influence or support adaptive coping strategies like prevention programs offered within agencies. However, there is research on how little family support can lead to maladaptive coping in officers.

Beehr and colleagues (1995) mention that prior research has examined the impact of work-related stressors on officers to include their family as well. The authors state that employees who report having poor mental health also report a lower quality of family life. Additionally, not only does the physical and mental outcomes of work-related stressors affect the quality of life for couples, but also the ways spouses and employees cope with it. Social support is considered an important system for coping strategies. Aside from family, social support can also come from friends and coworkers. Menard and Arter (2013) describe how social support can impact the well-being of officers. When given, social support helps officers with feelings such as self-worth and gratitude. It also helps to mitigate PTSD and other effects of traumatic experiences. However, when there is a lack of social support, officers report more alcohol use, resentment from family, rejection from friends, and isolation. Additionally, the authors found that officers who engaged in maladaptive coping behaviors were less likely to have social support from friends, family, or coworkers. In another study, Burke (1998) found that maladaptive coping is positively related to conflicts within officer's work and family life. Clearly, social support from friends and family is imperative to an officer's well-being but is highly dependent on the way officers handle work-related stressors (their coping strategies).

Officer Coping: Putting the Pieces Together

Research shows that occupational stress is prevalent within the policing profession. Much is known about the factors which cause stress to officers. For example, operational tasks and organization contexts are both causes of occupational stress within policing. Such stress leaves

officers with the need to cope to handle those stressors. However, an officer's ability to cope may highly depend on other factors within their lives. Factors such as family support, management support, and police culture may all dictate the kind of coping strategies officers use to handle their occupational stress. While research has focused on sources of stress, less research has studied the role of these factors as avenues for coping. After all, the presence or absence of such factors are likely to dictate the way an officer copes with stress.

Research that has examined police coping has largely used traditions of police culture to describe the ways in which officers cope with stress. Within this culture, officers are unwilling to talk to outsiders because civilians lack the understanding of policing stress or demands of their job (Wesley, 1970). Further, this suggests that officers will only discuss work-related issues with each other. This unwillingness to talk to outsiders signifies that officers will not use services or programs to handle stress or mental health issues because these services are operated by civilian workers and are not supported through the organization. On the other hand, additional literature addressing police coping and stress suggests that officers are searching for other supportive factors due to the negative outcomes of police culture (Gersons, 1998). Since officers will not talk to each other about work-related stressors because of police culture that idolizes aggressiveness/masculinity, officers are left with a need for services and programs to better cope with stress. Research on support from management and family suggests that both are likely to increase opportunities for adaptive coping. Management support opens the door to more services for officers within the agency as well as providing more social support to improve job satisfaction (Woody, 2005). On the family side, with more support, officers are less likely to engage in maladaptive behaviors like binge drinking and social isolation (Menard & Arter, 2013).

Importance of Current Study

Given the amount of research on the occupational stressors within policing, it is important to test the presence of supportive factors within officers lives that influence coping strategies. The role of supportive factors is likely to impact the negative or positive ways which officers cope with stress. Police culture is found to be a persistent and strong indicator of coping strategies used by officers. However, these strategies are found to be masculine, avoidant behaviors that are otherwise known as maladaptive. The isolation, distrust, and overly suspicious behavior of officers is not a healthy long-term solution to work-related stressors. This answer has worsened community relations with police that becomes hard to fix. This study is an important addition to police culture literature because it will examine the factors which promote positive (adaptive) coping and discourage negative (maladaptive) coping. If police culture is found to promote maladaptive coping as research suggests, more attention can be drawn to the fact that officers need to change police culture customs. If more adaptive coping strategies are found to be associated with police culture, then it may be that traditions of policing are changing. However, if officers are found to rely more on support from family or management, it may be that officers are realizing the negative outcomes of police culture and shifting supportive factors in their lives.

Next, evaluating police officer coping and influential factors is important for the mental health and well-being of officers. If officers are using adaptive coping strategies like programs and services offered within the agency, then this signifies that they are more willing to step forward regarding mental and physical health. Doing so may lead a reduction in the stigma of mental health within the profession. Officers need adaptive coping mechanisms that work for their profession. These adaptive coping strategies may be influenced more at the management and family level. Looking at used coping processes and the factors that led to them guides

research for a better understanding what officers need to reduce negative impacts of stress.

Lastly, while the implementation of programs and services within agencies for officers to handle stress are highly valuable, they are only helpful if officers are willing to use them. This research will show which supportive factors are promoting the willingness to use, as well as actual past use of adaptive coping strategies offered within agencies. Further, results will demonstrate which supportive factors influence the most adaptive coping.

CHAPTER 3

METHODOLOGY

This study aims to explore factors which influence officer coping strategies used to handle work-related stressors. More specifically, this research examines how factors such as police culture, family support, and management support affect maladaptive and adaptive coping.

Data

This study employed secondary data analysis using the dataset “Work and Family Services for Law Enforcement Personnel in the United States”, (Delprino, O’Quin, & Kennedy, 2000). The dataset was retrieved from NACJD’s (National Archive of Criminal Justice Data) website and was originally collected in 1995. The original authors used a 148-item questionnaire to ask police officers about (1) work and family orientation, (2) health and job stress (3) work and family issues, (4) job's influence on spouse/significant other, (5) support by spouse/significant other, (6) influence of parental role on the job, (7) job's influence on relationship with children, (8) job's influence on relationships and friendships, (9) knowledge of programs to assist with work and family issues, (10) willingness to use programs to assist with work and family issues, (11) department's ability to assist officers with work and family issues, and (12) relationship with officer's partner. The original study was meant to provide more information on work and family issues from the perspective of police officers. Additionally, the study examined that existence and past use of preparation and intervention programs offered by police agencies. After an initial pilot study to confirm proper questionnaire design, a Police Officer Questionnaire was developed based on the results of the pilot study. The survey was mailed to the homes of over 4,400 police officers in the Northeast to include New York City, New York and surrounding areas, the Midwest including Minneapolis, Minnesota and

surrounding areas, and lastly, the Southwest region including Dallas, Texas and surrounding areas. To ensure randomization, each agency had personnel select random officers to participate. Completed surveys were returned to researchers at Buffalo State College. In all, researchers received completed surveys from 1,632 officers from 51 agencies, computing a 36.45 percent response rate.

For the purposes of the current study, the dataset was further reduced. Family support is considered an important factor to officer coping in this research. To account for that, the data was filtered to only include officers that had a spouse or partner because questions regarding family support were specific to partnered or married individuals. This resulted in a final sample of 1,464 participating officers.

Hypotheses

The underlying idea behind this study is that there are supportive factors present in police officers' lives which influence their choice of maladaptive and adaptive coping mechanisms used to deal with occupational stress. If research discovers an association between supportive factors and specific coping mechanisms, it is possible that research can guide officers with helpful ways of handling stress.

Research Question 1: How does stress, police culture, family support and management support affect maladaptive coping like poor exercise, drinking and smoking?

Hypotheses

(H1) Adherence to police culture (camaraderie) will increase the use of maladaptive coping strategies exercise, drinking, and smoking.

(H2) Adherence to police culture (anti-help seeking) will increase the use of maladaptive coping strategies of exercise, drinking, and smoking.

(H3) Support from management for counseling will reduce the use of maladaptive coping strategies of exercise, drinking, and smoking.

(H4) Support from family (spouse/partner) will reduce the use of maladaptive coping strategies of exercise, drinking, and smoking.

(H5) If officers indicate more aspects of policing to be increasingly stressful, they are more likely to use maladaptive coping of strategies exercise, drinking, and smoking.

Research Question 2: How does stress, police culture, family support, and management support affect past adaptive coping use?

Hypotheses

(H6) Adherence to police culture (camaraderie) will decrease the amount of past adaptive coping use.

(H7) Adherence to police culture (anti-help seeking) for counseling will decrease the amount of past adaptive coping use.

(H8) Support from management for counseling will increase the amount of past adaptive coping use.

(H9) Support from family (spouse/partner) will increase the amount of adaptive coping strategies used in the past.

(H10) The more stressors officers have, the more likely they are to have used past adaptive coping strategies.

Research Question 3: How does stress, police culture, family support and management support affect willingness to use adaptive coping?

Hypotheses

(H11) Police culture (camaraderie) will reduce the willingness of officers to use

adaptive coping strategies.

(H12) Adherence to police culture (anti-help seeking) for counseling will decrease officer willingness to use adaptive coping strategies.

(H13) Support from management for counseling will likely increase officer willingness to use adaptive coping strategies.

(H14) Support from family (spouse/partner) will likely increase officer willingness to use adaptive coping strategies.

(H15) The more stressors indicated, the more likely officers are willing to use adaptive coping strategies.

Research Variables

Dependent Variables

As shown, there are variety of coping strategies available for officers to use. These strategies are largely grouped into two categories: maladaptive coping and adaptive coping. Dependent variables were created measuring these two common strategies including past adaptive coping, willingness to use adaptive coping, maladaptive drinking, maladaptive smoking, and maladaptive exercise.

Adaptive coping are the mechanisms which are healthy, seeking behaviors that realistically alleviate the adverse effects of work-related stressors. In the dataset, adaptive coping refers to the programs and services offered to officers within the organization. These services are geared towards the work and family life of officers as an intervention for any stressors caused by policing. Several questions were drawn from the dataset regarding the use of adaptive coping including willingness and past use. For this reason, adaptive coping is broken into two adaptive coping variables, past adaptive coping and willingness to use adaptive coping.

Adaptive Coping Measures. *Past Adaptive Coping.* The first dependent variable, past adaptive coping, is used to capture whether officers have used any department-provided services intended to combat work-related stressors for the officer and his/her family. For past adaptive coping, officers were first asked “Does your department offer this program/service?” and next “Have you ever used this program/service”. Answer options included “yes”, “no”, or “?” for unsure. Altogether, there were 19 services listed in the questionnaire which make up the variable past adaptive coping. The variable was measured in two ways to determine availability and need. To determine the number of programs used versus the number of programs offered (availability), a series of calculations were made. First, the programs offered and used were recoded into dichotomous variables. For programs offered, “no” and “unsure” were coded as 0, while “yes” was coded as 1. For programs used, “no” was coded as 0 while “yes” was coded as 1. Next, the number of programs offered was summed creating a scale from 0 to 19 (Cronbach’s alpha= .914). Cronbach’s alpha, a reliability test, was used to ensure that items being summed have internal consistency as a group. On average, officers indicated that their departments offered approximately six of the programs in the list. Next, the number of programs used was summed creating a scale from 0 to 15 (Cronbach’s alpha= .660). Lastly, the summation of programs used was divided by the summation of programs offered. After multiplying that amount by 100, the final product produced the amount of programs used as a percent of those available. Percentages ranged from 0 to 100 percent meaning officers with higher scores took greater advantage of programs available. The average amount of past adaptive use of available programs was roughly 14 percent.

Table 1*Descriptive Statistics for Items used in Past Adaptive Coping: Need*

	<i>Mean</i>	<i>SD</i>
Past Adaptive Coping Use (Need)	.42	.494
Employee Assistance Program	.12	.323
Counseling for law enforcement family members	.08	.271
Childcare on a 24-hour basis	.00	.000
Marital and child support groups	.01	.119
Stress reduction programs	.08	.267
Stress education for law enforcement recruits and family	.10	.300
Post-shooting debriefing for officers and their spouses	.08	.267
Group therapy	.02	.130
Hypertension clinics	.02	.127
Critical incident response on a 24-hour basis	.06	.236
Law enforcement family crisis telephone services on a 24-hour basis	.01	.087
Counseling for law enforcement personnel exposed to the HIV virus	.02	.130
Peer counseling	.02	.151
Counseling for families of personnel killed in line of duty	.01	.091
Seminars regarding alcohol, drug use, gambling, or overeating	.03	.173
Family orientation programs	.07	.253
Programs geared toward work and family issues for recruits	.04	.202
Programs gears toward work and family issues throughout an officer's career	.02	.149
Mental health treatment provided independently by health insurance	.07	.254

Note: Range for individual items is 0-1

To determine past adaptive coping (need), the range of 0 to 100 percent was recorded as 0 for “never used an available program” and 1 for “used an least one available program.” This was done to separate the need for programs from the availability for programs and show any past use of services. This measurement indicated that 42% of officers have used past adaptive coping strategies offered through the agency (See Table 1 for descriptive statistics of items). Some of the most used programs include Employee Assistance Program ($M=.12$) and stress education for law enforcement recruits and their families ($M=.10$). Some of the least used programs include childcare, marital and children support groups, law enforcement crisis telephone service, and counseling for families of personnel killed in the line of duty.

Table 2*Descriptive Statistics for Items Used in Willingness to Use Adaptive Coping*

	<i>Mean</i>	<i>SD</i>
Willingness to Use Adaptive Coping	3.38	.797
Employee Assistance Program	3.29	1.115
Counseling for law enforcement family members	3.33	1.094
Childcare on a 24-hour basis	3.13	1.453
Marital and child support groups	3.09	1.130
Stress reduction programs	3.55	1.061
Stress education for law enforcement recruits and family	3.43	1.141
Post-shooting debriefing for officers and their spouses	4.24	.981
Group therapy	2.70	1.134
Hypertension clinics	3.20	1.085
Critical incident response on a 24-hour basis	3.74	1.078
Law enforcement family crisis telephone services on a 24-hour basis	3.22	1.146
Counseling for law enforcement personnel exposed to the HIV virus	3.62	1.110
Peer counseling	3.06	1.103
Counseling for families of personnel killed in line of duty	4.12	1.031
Seminars regarding alcohol, drug use, gambling, or overeating	3.13	1.169
Family orientation programs	3.40	1.136
Programs geared toward work and family issues for recruits	3.15	1.149
Programs gears toward work and family issues throughout an officer's career	3.43	1.067
Mental health treatment provided independently by health insurance	3.44	1.113

Note: Range for individual items is 1-5

Willingness to Use Adaptive Coping. Using the same nineteen services, the officers were asked their willingness to use such services if they were faced with a difficult situation at home or work. To answer, the questionnaire included a scale of willingness for following questions including “definitely would not use service”, probably would not use service”, “unsure”, “probably would use service”, and “definitely would use service”. These nineteen variables makeup the willingness to use adaptive coping scale (See Table 2 for descriptive statistics of items). To create the variable, the nineteen items were summed and then divided by the total number of items. The willingness to use scale ranged from 1 (definitely would not use the service) to 5 (definitely would use the service) (Cronbach’s alpha= .945). This variable measures

whether officers are willing to use adaptive coping services provided by the organization.

Officers willingness to use adaptive coping averaged 3.38 on the willingness scale meaning that the average officer was unsure whether they would be willing.

Maladaptive Coping Measures. Maladaptive coping strategies are considered unhealthy avoidance behaviors that temporarily relieve symptoms of stress. For this research, maladaptive coping is measured through a series of questions asked about the health habits of officers. Officers were asked three questions regarding their exercise routine, alcohol consumption, and cigarette use. Therefore, there are three maladaptive coping variables: *maladaptive exercise*, *maladaptive drinking*, and *maladaptive smoking* (See Table 3 for frequency distribution of items). To measure exercise, officers were asked on an eight-point scale from zero (0) to seven days (7), to disclose how many days per week they engaged in vigorous activities for twenty minutes or more (reverse coded). To measure drinking, officers were asked to indicate how many alcoholic drinks they have had in the past week. Answer options ranged from zero (0) to 29+ drinks (7). For cigarettes, officers were asked on a six-point scale from zero (0) to 41+ (5) how many cigarettes they smoked per day. This variable captures whether officers are engaging in poor health choices otherwise known as maladaptive coping. For maladaptive exercise, scores on the higher end of the scale indicate less exercise (maladaptive coping). Officers averaged a score of 4.52 for maladaptive exercise. For maladaptive drinking and maladaptive smoking, scores on the higher end of the scale indicate more drinking and more smoking (maladaptive coping). Officers averaged a score of 1.83 for drinking and .43 for smoking.

Table 3
Frequency Distribution of Maladaptive Coping

	N	%
Maladaptive Exercise		
7 days/week	42	2.9
6 day/week	43	2.9
5 days/week	145	9.9
4 days/week	176	12.0
3 days/week	299	20.4
2 days/week	268	18.3
1 days/week	211	14.4
0 days/week	279	19.1
Total	1463	100.0
Maladaptive Drinking		
0 drinks	531	36.3
1 drink	160	10.9
2-3 drinks	254	17.3
4-7 drinks	259	17.7
8-14 drinks	147	10.0
15-21 drinks	63	4.3
22-28 drinks	26	1.8
29+ drinks	24	1.6
Total	1464	100.0
Maladaptive Smoking		
0 cigarettes	1205	82.3
10 or less cigarettes	61	4.2
11-20 cigarettes	93	6.4
21-30 cigarettes	60	4.1
31-40 cigarettes	30	2.0
41+ cigarettes	15	1.0
Total	1464	100.0

Independent Variables

To study the coping strategies of officers, it is important to understand which factors led to the used mechanisms. Using the police questionnaire, variables were again created through questions asked of officers. The following variables were created to study the influence they have on coping mechanisms: police culture, management support, family support and stressors.

Police Culture: Camaraderie. The impact of police culture is a large factor in policing literature. An officer's adherence to the culture indicates an officers policing style, relationships

and even coping mechanisms. Therefore, the effect of police culture is important to include in this research. There are two measures of police culture included in this study. Since a main argument made by Paoline (2003) on police culture is social isolation and loyalty to the group, the first measure of culture is measured through questions about co-worker friendships. This variable includes four items from the police questionnaire and is a general measure of police culture by Paoline's (2003) definition of culture (See Table 4 for descriptive statistics of items). On a Likert scale from strongly disagree to strongly agree, officers were asked to rate the following statements: I spend time outside of work with other police officers; It is difficult to develop friendships with other officers (reverse coded); It is difficult to maintain long-lasting friendships with other officers (reverse coded); I am cautious in developing friendships with other officers (reverse coded). Items were summed and divided by total item amount to return to the original scale which ranged from 1 to 5 (Cronbach's alpha= .747). The officers averaged a score of 3.55 on the camaraderie scale.

Table 4
Descriptive Statistics for Items Used in Police Culture: Camaraderie

	<i>Mean</i>	<i>SD</i>
Police Culture: Camaraderie	3.55	.889
I spend time outside of work with other police officers	3.10	1.253
It is difficult to develop friendships with other officers (reverse coded)	3.95	1.063
It is difficult to maintain long-lasting friendships with other officers (reverse coded)	3.74	1.167
I am cautious in developing friendships with other officers (Reverse coded)	3.40	1.233

Note: Range for individual items is 1-5

Police Culture: Anti-Help Seeking. To measure police culture more specifically, anti-help seeking is included as a variable. Police culture literature suggests that officers are not supportive of counseling or services because they are led by civilian workers. Additionally, police culture idolizes masculinity which discourages help-seeking behaviors. To understand the

effect of police culture on adaptive coping mechanisms, anti-help seeking is included to indicate the support of other officers towards counseling (See Table 5 for descriptive statistics of items). On the police questionnaire, officers were asked on a scale from strongly disagree (1) to strongly agree (5), to rate the following statement: My fellow officers back up officers seeking counseling (reverse coded). Anti-help seeking as a variable indicates if officers feel that their co-workers are supportive of officers for seeking counseling offered through the agency. Support from officers can influence whether officers use or are willing to use services offered through the agency. Officers averaged a score of 2.90 on the peer support scale.

Table 5
Descriptive Statistics for Items Used in Police Culture: Anti-Help Seeking

	<i>Mean</i>	<i>SD</i>
Police Culture: Anti-Help Seeking		
My fellow officers back up officers seeking counseling (reverse coded)	2.90	.974

Management Support. Aside from police culture, other factors have been found to influence an officers coping style. Specifically, management and family can play a large role in the support for healthy or negative coping. For this reason, management support and family support are also observed. Management and family variables were created to study the support of officers which will promote or discourage coping styles. Similar to previous variables, both were created through the combination of questions regarding experiences with management and family.

As shown earlier, the impact of management is critical to police work. Some studies found organization contexts to be more important than the operational tasks themselves. To study the support of management, the dataset gave two statements regarding management that officers were asked to agree or disagree with. This included: My supervisor is supportive of officers who

seek counseling and top management supports officers seeking counseling. Officers were asked to state their level of agreement on a Likert scale (strongly disagree to strongly agree) with each statement. The creation of variable management support comprises of these two variables (See Table 6 for descriptive statistics of items). Items were summed and divided by total item amount to return it to its original scale. The scale ranged from 1 (strongly disagree) to 5 (strongly agree) (Cronbach’s alpha= .774). On the management support scale officers averaged a score of 3.12. This variable is used to identify whether management supports the use of adaptive coping through programs and services offered to officers within the agency.

Table 6
Descriptive Statistics for Items Used in Management Support

	<i>Mean</i>	<i>SD</i>
Management Support	3.12	1.081
My supervisor is supportive of officers who seek counselling	2.97	1.234
Top management supports officers seeking counseling	3.29	1.160

Note: Range for individual items is 1-5

Family Support. Family support is created to look at how spouses/partners act towards an officer’s job. Spouse/partner support or lack thereof towards policing can influence the way which officers cope with stress. If spouses/partners are more understanding of their work, officers are likely to receive more social support. More social support is associated with more adaptive coping styles. Family support comprises of five inquiries on the questionnaire under “How do your spouse/partner provide support for you?” (See Table 7 for descriptive statistics of items). On a Likert scale from never to always, the following statements were asked: Tries to understand my job; Communicates well; Maintains a positive attitude, Maintains good sense of humor; and Supportive of my career in law enforcement. The items were then summed and divided by the total item amount which created a scale that ranged from 1 (never) to 5 (always) (Cronbach’s alpha= .886). The officers averaged a score of 3.91 on the spousal/partner support

scale. This variable measures how supportive spouses/partners are towards policing. The amount of support can determine the use of certain coping strategies.

Table 7
Descriptive Statistics for Items Used in Family Support

	<i>Mean</i>	<i>SD</i>
Family Support	3.91	.770
Tries to understand my job	3.83	.976
Communicates well	3.67	.988
Maintains positive attitude	3.87	.897
Maintains good sense of humor	3.85	.920
My spouse/partner is supportive of my career in law enforcement	4.34	.854

Note: Range for individual items is 1-5

Stressors. Stressors refers to the aspects of work that impact the officer and his/her family. This variable is used to establish which parts of police work is viewed to negatively impact the officers or their family and to what extent. To examine coping mechanisms, it is important to understand which aspects of policing cause the most stress to officers. Previous research has indicated many operational and organizational contexts which are considered stressful. To study this, the dataset lists five features of police work within operational tasks and organizational contexts that are commonly viewed to be considered stressors. Officers were asked on a Likert scale from “not at all” to “a lot” whether the following scenarios pertain to them: job stress, burnout, danger associated with the job, closed society of policing, and organizational hierarchy of the department. The combination of these five items creates the variable stressors (See Table 8 for descriptive statistics of items). The items were summed and divided by total item amount to create a scale ranging from 1 (not at all) to 5 (a lot) (Cronbach’s alpha=. 777). Higher scores indicate that officers view multiple aspects of policing to be increasingly stressful. Officers averaged 2.77 on the stressor scale.

Table 8
Descriptive Statistics for Items Used in Stressors

	<i>Mean</i>	<i>SD</i>
Stressors	2.77	.870
Job stress	3.14	1.080
Burnout	2.82	1.272
Closed society of policing	2.33	1.130
Danger associated with job	2.71	1.117
Organizational hierarchy of department	2.86	1.356

Note: Range for individual items is 1-5

Control Variables

There are several other variables that are important to consider for this research. Age is important to consider for this study because younger officers may have different stress and coping styles compared to older officers. This is likely to do with experience within the force. As officers age, aspects of policing that they once considered stressful may no longer be an issue. This can be due to successful coping mechanisms or numbness to certain issues. In a study on work stress in aging officers, Gershon, Lin and Li (2002), found that stress within the organizational structure was not identified to be an issue. This may mean that aging officers have learned to adapt to the managerial structure. Additionally, aging officers who did experience more stress were at higher risk for serious physical and mental health issues. Therefore, identifying stress and coping styles in aging officers may be important to help lower health risks. On the questionnaire, officers were asked to report their age in years. The variable age ranged from 22 to 64 with an average age of 37.

Race is also included as a control variable. While little research has addressed minorities within policing, it is possible that race can account for differences in experiences and coping strategies. Haar and Morash (1999) mentioned that African American officers were more likely to feel isolated from their Caucasian counterparts. Additionally, their results on racial differences within policing concluded that African American officers were more likely than Caucasians to

bond with racially similar officers. This may affect their ability to turn to surrounding officers for support or adhere to police culture ideas. Feeling isolated from co-workers as well as society may leave minority officers with more stressors to deal with and less avenues for coping. On the questionnaire, officers were asked to select from the following races/ethnicities: African American, Hispanic, American Indian/Alaskan Native, Asian or Pacific Islander, White, or other. For this study, White was coded as 1 and all others were coded as 0. The mean of race was .86 indicating that 86 percent of officers were White.

Gender is used as a control variable in this study. The gender of officers can affect the decision-making process that leads to certain coping strategies (Haar & Morash, 1999). The sex of officers is likely to impact which aspects of policing are considered stressful and how to handle it. According to Haar and Morash (1999), gendered differences in coping normally find women to use emotional tactics while men use avoidance behaviors. In their study, Haar and Morash (1999) studied gender differences in police officer stress and coping. The authors found that female and male officers used similar methods of coping despite females experiencing higher levels of stress. It is possible that police culture can affect any gender differences in coping styles. In another study, Anshel (2000) mentioned that female officers are more likely to use avoidance coping strategies due to females being a minority on the force, sexual harassment by other officers and not fitting in with co-workers. For this study, the sex of the officer was asked in the questionnaire. Gender was recoded as 1 for male and 0 for female. The mean of gender is .88 indicating that most officers were male. Given police culture primarily relates to males, controlling for gender will show how male and female coping strategies differ.

The job title of police officers is also included as a control variable. Research on police culture is specifically geared towards patrol officers. The literature argues that there is a

separation between patrol officers and management in terms of behavior, work duties and expectations (Wesley, 1970). Therefore, the argument of police culture regarding camaraderie and anti-help seeking may only pertain to patrol officers in this study. Additionally, in an article by Brown, Cooper, and Nieva (1995), the authors studied stress and coping among senior officers. The authors found that police managers identified organizational structure and administrative tasks to be the most stressing. Their ideas of coping included planning ahead, referring to policing regulations, or avoiding the situation altogether. Therefore, the stressors and coping strategies for patrol officers and non-patrol officers may be exceedingly different. By controlling for job title, differences in coping mechanisms between patrol officers and non-patrol officers can be examined. In the questionnaire, officers were asked to identify their job title among the following: chief, captain, detective, deputy sheriff, police officer, lieutenant, sergeant, sheriff, dispatcher, or other. For this study, deputy sheriff, sheriff and police officer were considered patrol officers and coded as 1. All other categories were recoded as 0 for non-patrol officers. The average of job titles indicated that 59 percent were patrol officers.

Lastly, prior military experience is also used as a control variable. As Cowper (2000) mentions, the structure of the military and law enforcement have differentiated over the years. In the military, personnel are given access to numerous mental health services within the VA (Veterans Affairs) which they are able to seek help for stress. This may impact an officer's likeliness to use adaptive coping within policing over maladaptive coping. Additionally, officers that are prior military have likely experienced similar stressors which they may have learned to handle prior to entering the policing profession. It is common for policing recruiters to seek out military veterans and give them preference over non-military recruits (Ive & Garland, 2011). They are viewed to be more equipped to handle the stressors of policing. In an article by Ivie and

Garland (2011), the authors found that officers with military experience found exposure to distressing situations like crime scenes, violence, and use of deadly force have less influence on them versus officers without. It will be interesting to see if prior military experiences affect the way police officers cope with stress. On the questionnaire, officers were asked if they are a military veteran. For this study, military veteran was recoded as 1 for “yes” and 0 for “no”. The average score of military status indicated that 25 percent of officers were veterans (See Table 9 for descriptive statistics).

Table 9
Descriptive Statistics for Independent and Dependent Variables

	<i>N</i>	<i>Range</i>	<i>Mean</i>	<i>SD</i>
<i>Independent Variables</i>				
Police Culture: Camaraderie	1450	1-5	3.55	.889
Police Culture: Anti-Help Seeking	1459	1-5	2.90	.974
Family Support	1464	1-5	3.91	.770
Management Support	1456	1-5	3.12	1.081
Stressors	1440	1-5	2.77	.870
Age	1460	22-64	37.25	8.298
White	1457	0-1	.86	.344
Male	1461	0-1	.88	.323
Patrol Officer	1462	0-1	.59	.492
Military Veteran	1458	0-1	.25	.435
<i>Dependent Variables</i>				
Past Adaptive Coping (Availability)	1306	0-100	13.70	22.080
Past Adaptive Coping (Need)	1306	0-1	.42	.494
Willingness to Use Adaptive Coping	1397	1-5	3.38	.797
Maladaptive Coping: Exercise	1463	0-7	4.52	1.857
Maladaptive Coping: Drinking	1464	0-7	1.8	1.786
Maladaptive Coping: Smoking	1464	0-5	.43	1.034

Analysis Plan

For this study, linear regression is used to study the effect of police culture, peer support, family support, management support, and stressors on adaptive and maladaptive coping.

Additionally, one logistic regression model is used to study past adaptive coping in terms of need. Six models are used to represent the three research questions asked. In the first three models, police culture, management support, family support, and stressors are examined as predictors of the maladaptive coping methods of drinking, smoking and exercise. Additionally, another model examined the same independent variables as predictors of past adaptive coping use (availability). The last linear regression model examined the independent variables as predictors of willingness to use adaptive coping. The linear regression method chosen for the first five models measures to what extent there is a linear relationship between the supportive factors and coping mechanisms. In other words, the analysis shows the positive and negative impacts that that supportive factors have on maladaptive and adaptive coping and the significance of the relationship. Lastly, the logistic regression model is used to examine past adaptive coping (need). Logistic regression measures the relevance and direction of relationship between the independent variables and the need for past adaptive coping.

CHAPTER 4

FINDINGS

Research Question 1

How does stress, police culture, family support and management support affect maladaptive coping like poor exercise, drinking and smoking?

To test *Research Question 1*, linear regression was used to assess the independent variables as predictors of maladaptive coping. Three models are provided in Table 10 that show the results for maladaptive exercise, maladaptive drinking, and maladaptive smoking, respectively. As shown in Table 10, H1 was partially supported. The results show that police culture (camaraderie) was a significant and positive predictor of maladaptive drinking ($p=.000$) but not smoking ($p=.330$) or exercise ($p=.284$). In other words, officers with more adherence to police culture (camaraderie) tended to drink more frequently. However, the hypothesis involving the second measure of police culture was not supported. Police culture (anti-help seeking) was not a significant predictor of exercise ($p=.216$), drinking ($p=.910$) or smoking ($p=.124$). Table 10 also shows that H3 was not supported. Management support was not a significant predictor of maladaptive exercise ($p=.608$), drinking ($p=.510$) or smoking ($p=.563$). There is partial support for H4 that family support decreases maladaptive coping. Results show that family support is a significant and negative predictor for maladaptive drinking ($p=.001$) and smoking ($p=.038$). Officers with more support from partners and spouses smoked and drank less. Lastly, H5 was also partially supported. There was a significant and positive relationship between stressors and maladaptive drinking ($p=.030$) and smoking ($p=.014$). This means that officers who reported experiencing more stressors at work tended to drink and smoke more frequently. However, stressors was not significantly related to exercise ($p=.549$). Additionally, there was no control

variable that was significantly related to all three measures of maladaptive coping. Age was positively associated with exercise ($p=.025$) and smoking ($p=.000$) but not drinking ($p=.148$). Older age was associated with fewer days of exercise, but more smoking. Additionally, race and gender were positively associated with drinking but not exercise or smoking. Whites ($p=.002$) and males ($p=.000$) reported more frequent alcohol consumption. Of the five hypotheses on maladaptive coping, three were partially supported.

Table 10*Linear Regression of Maladaptive Coping*

Independent Variables	Maladaptive Exercise			Maladaptive Drinking			Maladaptive Smoking		
	B	β	<i>p</i>	B	β	<i>p</i>	B	β	<i>p</i>
(Constant)	4.589		.000	-.477		.411	.068		.843
Police Culture: Camaraderie	-.063	-.030	.284	.411	.204	.000	.032	.028	.330
Police Culture: Anti-Help Seeking	.070	.037	.216	.006	.003	.910	-.048	-.045	.124
Management Support	-.026	-.015	.608	.032	.019	.510	-.016	-.017	.563
Family Support	-.096	-.040	.148	-.216	-.092	.001	-.076	-.056	.038
Stressors	-.036	-.017	.549	.123	.059	.030	.082	.069	.014
Age	.016	.073	.025	.010	.046	.148	.015	.118	.000
White	.121	.022	.417	.442	.083	.002	-.005	-.002	.949
Male	-.150	-.026	.348	.602	.106	.000	-.121	-.037	.174
Patrol Officer	-.054	-.014	.630	-.052	-.014	.619	.077	.037	.215
Military Veteran	-.162	-.038	.195	-.045	-.011	.705	.102	.043	.140
		<i>n</i> = 1398			<i>n</i> =1399			<i>n</i> =1399	
Note:		R^2 =.013			R^2 =.070			R^2 =.028	

Table 11*Linear Regression of Past Adaptive Coping (Availability) and Willingness to Use Adaptive Coping*

Independent Variables	Past Adaptive Coping (Availability)			Willingness to Use Adaptive Coping		
	B	β	<i>p</i>	B	β	<i>p</i>
(Constant)	-.729		.924	2.777		.000
Police Culture: Camaraderie	-.371	-.015	.610	.044	.049	.076
Police Culture: Anti-Help Seeking	-1.610	-.071	.020	-.167	-.204	.000
Management Support	.512	.025	.411	.188	.160	.000
Family Support	-1.222	-.043	.130	.040	.039	.145
Stressors	4.933	.194	.000	.156	.170	.000
Age	.211	.080	.019	-.001	-.007	.833
White	1.051	.016	.557	-.135	-.057	.029
Male	.726	.011	.708	.084	.033	.207
Patrol Officer	.162	.004	.906	.058	.036	.216
Military Veteran	1.361	.027	.374	.027	.014	.612
		<i>n</i> = 1252			<i>n</i> = 1336	
Note:		R^2 =.057			R^2 =.110	

Research Question 2

How does stress, police culture, family support, and management support affect past adaptive coping use?

Linear regression was also used to test Research Question 2 regarding past adaptive coping (availability). Results are shown in Table 11. Around 6 percent of variance was explained through the model meaning that other factors should be considered. As shown in Table 11, H6 regarding the first measure of police culture was not supported ($p=.601$) but the second, H7, was. This means that one measure of police culture (anti-help seeking) was supported as a negative predictor of past adaptive coping ($p=.020$). With more adherence to police culture (anti-help seeking), officers reported using less adaptive coping in the past. As for management and family, H8 and H9 were not supported as being significant predictors of past adaptive coping use. This means that management support ($p=.411$) and family support ($p=.130$) did not have any discernable effect on past adaptive coping use. Stressors, H10, was supported and had the biggest effect on past adaptive coping ($p=.000$) versus all other variables. Officers that reported experiencing more stress were more likely to have used adaptive coping in the past. As for control variables, age was the only factor found to be significantly associated with past adaptive coping ($p=.019$). As age increased, use of past adaptive coping increased as well. Two of the five hypotheses were fully supported.

Past adaptive coping was additionally tested using logistic regression (See Table 12 for logistic regression). Using past adaptive coping (need) as the dependent variable, the same independent variables were assessed. This variable takes into account all programs ever used in the past rather than programs used of those offered. Results from Table 12 suggest that the pseudo R^2 was low (Nagelkerke $R^2=.053$) indicating that other unmeasured factors play an

important role in predicting use of coping mechanisms. Once again, H7 was supported but not H6 meaning that police culture (anti-help seeking) was a better predictor of past adaptive coping use ($p=.016$). With more adherence to police culture (anti-help seeking), officers were less likely to report past adaptive coping. Similar to the linear regression, H8 and H9 were not supported. Management support ($p=.056$) and family support ($p=.373$) were not found to be significant predictors of past adaptive coping. Under Table 12, stressors, H10, was supported as a positive predictor of past adaptive coping ($p=.000$). Officers who reported experiencing more stress were more likely to have used adaptive coping in the past. Results also show that age was no longer significant in the logistic regression ($p=.071$). Instead, gender ($p=.026$) and job title ($p=.042$) were both negative and significant predictors of past adaptive coping. The odds of males having used adaptive coping strategies were 33 percent lower than for females. Additionally, the odds of patrol officers using adaptive coping in the past were 23 percent lower than non-patrol officers. Under this model, two hypotheses of the five were still supported.

Table 12
Logistic Regression of Past Adaptive Coping (Need)

Independent Variables	B	Sig.	Exp(B)
Police Culture: Camaraderie	-.016	.815	.984
Police Culture: Anti-Help Seeking	-.162	.016	.850
Management Support	.115	.056	1.122
Family Support	-.070	.373	.933
Stressors	.282	.000	1.325
Age	.016	.071	1.016
White	.084	.632	1.087
Male	-.415	.026	.661
Patrol Officer	-.268	.042	.765
Military Veteran	.125	.397	1.133
Constant	-.823	.263	.439
Pseudo R^2	=	.053	
n	=	1252	

Research Question 3

How does stress, police culture, family support and management support affect willingness to use adaptive coping?

Linear regression was used to test Research Question 3. Table 11, Model 2 indicated that 11 percent of variance was explained. Results show that for police culture, H11 was not supported but H12 was. Similar to past adaptive coping, this means that police culture (anti-help seeking) was a significant and negative predictor of officer's willingness to cope ($p=.000$) while police culture (camaraderie) was not ($p=.076$). In other words, officers who indicated more adherence to police culture (anti-help seeking), reported being less willing to use adaptive coping. H13 was also supported meaning that management support was a significant and positive predictor of willingness to use adaptive coping ($p=.000$). This shows that officers who reported more management support were also more willing to use adaptive coping. H14 regarding family support was not supported ($p=.145$). However, H15 was supported. Stressors was a positive and

significant predictor of willingness to cope ($p=.000$). Officers who reported experiencing more stress indicated being more willing to use adaptive coping. Of the control variables, race was the only significant predictor of willingness to cope ($p=.029$). Being white lowered officer willingness to cope. Results indicate that three of the five hypotheses were fully supported.

In all, maladaptive coping and adaptive coping can partially be explained through supportive factors like police culture, management, and family. Of the fifteen hypotheses, five were fully supported and three were partially supported. Additionally, control variables age, race, and gender were all significant predictors of maladaptive coping. Age, gender, race, and job title were also found to be associated with adaptive coping. However, military veteran was not significant in any model.

CHAPTER 5

DISCUSSION AND CONCLUSION

This study sought to test the relationship between supportive factors and coping strategies used by police officers. Specifically, how does police culture, management, and family affect maladaptive and adaptive coping? This relationship was explored using OLS regression and logistic regression. Results indicate that supportive factors are predictive of maladaptive and adaptive coping, but other variables need to be considered. Stressors was the most consistent predictor among all types of coping (See Table 13).

Table 13
Summary of Independent and Dependent Variable Relationships

	Police Culture				
	Camaraderie	Anti- Help Seeking	Management Support	Family Support	Stressors
Past Adaptive Coping (Avail.)	n.s.	-	n.s.	n.s.	+
Past Adaptive Coping (Need)	n.s.	-	n.s.	n.s.	+
Willingness to Use Adaptive Coping	n.s.	-	+	n.s.	+
Maladaptive Exercise	n.s.	n.s.	n.s.	n.s.	n.s.
Maladaptive Drinking	-	n.s.	n.s.	-	+
Maladaptive Smoking	n.s.	n.s.	n.s.	-	+

n.s.= no relationship; - = significant negative relationship; + = significant positive relationship

H1, H6 and H11 all focused on police culture (camaraderie) as a predictor of maladaptive and adaptive coping. It was hypothesized that camaraderie would increase maladaptive coping and decrease past adaptive coping and willingness to use adaptive coping. Camaraderie was only supportive of maladaptive drinking. This is consistent with research which suggests that police culture encourages officers to cope with stress through alcohol rather than discussing their

emotions with other officers (Gersons, 1989; Violanti et al., 1985). While camaraderie did not decrease adaptive coping as predicted, this can be explained by how the variable was measured. Police culture (camaraderie) measured the presence of friendships with other officers, not support from other officers. This variable appears to be a better predictor of maladaptive coping over adaptive coping. Therefore, it can be argued that the camaraderie aspect of police culture promotes maladaptive drinking as a coping mechanism.

Three hypotheses, H2, H7, and H12, focused on the second measure of police culture (anti-help seeking). It was predicted that anti-help seeking would increase maladaptive coping and decrease adaptive coping use or willingness. Anti-help seeking was a significant predictor of adaptive coping use but not maladaptive coping. Officers who did not receive support from co-workers for counseling were less likely to have used adaptive coping strategies in the past or be willing to use them in the future. Anti-help seeking was statistically significant in all models for adaptive coping. This shows that support from officers is important for adaptive coping. While services may be available through their agency, officers were not willing to use them if there is a perceived culture against help seeking among fellow law enforcement. This finding is also supported in police culture literature. Officers are unwilling to use agency provided programs due to the stigma associated with mental health or treatment within law enforcement.

Between the two measures of police culture, results show the importance of measuring police culture in two ways, one testing the elements of police culture which promote maladaptive coping and another which tests attitudes towards adaptive coping strategies to see how it discourages adaptive coping. In other words, camaraderie encourages drinking while negative attitudes towards help-seeking dissuade adaptive coping. These results highlight the importance of reducing ties to police culture or changing customs. Officer attitudes towards counseling

services decreased the frequency of officers having used services in the past or their willingness to use them in the future. To increase participation in agency offered services, attitudes towards help-seeking would have to change. Perhaps bringing awareness to officers on these prominent issues within police culture is a place to start for officers to realize the healthy and unhealthy ways in which they handle work-related stress.

Of the three hypotheses regarding management support, only one (H13) was supported. Management support does not predict maladaptive coping or past adaptive coping use. However, with increased management support, officers indicated that they would be more willing to use adaptive coping strategies. This is a significant finding because it shows that there is still a need for increased management support within law enforcement as suggested by Woody (2005). While management support hasn't yet changed between past research and this study, management still has the capacity of becoming a more significant supportive factor for adaptive coping use for officers. Officers indicating that they would be more willing to use agency offered services with more management support shows the importance of involving management in adaptive coping strategies for officers. If management support towards counseling increased, then it is likely that officer support would also increase. Increasing management support could be the necessary change that improves officer attitudes and participation in adaptive coping strategies.

Family support was predicted to increase past adaptive coping use and willingness, and decrease maladaptive coping like exercise, drinking, and smoking. Family support did not impact adaptive coping meaning that H9 and H14 were not supported. However, H4 regarding maladaptive coping was partially supported. Support from family like spouse and partner was associated with reporting lower levels of drinking and smoking. Family support having a

negative and significant relationship to maladaptive coping like drinking and smoking is supported in literature. Menard and Arter (2013) found that officers who used maladaptive coping strategies like drinking and smoking were less likely to have support from family. This is consistent with this study. One reason that may explain why family support was not related to adaptive coping is that family may not be aware of the services being provided with the agencies. Officers would have to communicate to the family on the services provided first before receiving support for them.

Stressors was found to be the most consistent predictor of maladaptive and adaptive coping. This is consistent with the idea that as stress increases, coping increases. Here, stressors apply to both maladaptive and adaptive coping. Despite the presence or absence of supportive factors, stressors still contribute to the officer coping. Given the significance, police departments would benefit from introducing more stress-related programs for officers. Of the nineteen used in the research, only two programs were specifically focused on stress. Both programs were also among the topmost used services. Introducing additional stress-focused programs that are geared towards specific occupational and organizational stressors would help officers reduce stress. These programs should focus on offering healthy and constructive ways to handle stress to reduce use of maladaptive coping. The stressors variables consisted of five different stressing aspects of policing including job stress, burnout, danger associated with the job, closed society of policing, and organizational hierarchy of the department. Future research should break stressors down into operational and organizational stressors to study the effect of each on coping.

Age was found to be a positive and significant predictor of past adaptive coping (availability), smoking, and exercise. Past adaptive coping increased as age increased. This means that older officers were more likely to have used adaptive coping strategies versus

younger officers. This may be because officers move out of patrol officer positions and into management positions as they age. This variable could coincide with job title which also found that patrol officers were less likely to use adaptive coping strategies. Additionally, as age increased, smoking increased exercise decreased. Increased smoking with age may be explained by generational habits. Younger generations are smoking less cigarettes compared to older generations. Additionally, older officers may work out less due to fitness standards changing with age. As officers with more time on the force move out of patrol and into management positions, there are less physical fitness requirements.

Like age, job title also decreased past adaptive coping (need) meaning patrol officers were less likely to have ever used an agency offered service in the past. This may be due to police culture customs which pertain mainly to patrol officers. If patrol officers are less willing to use adaptive coping strategies, this shows the presence of police culture. The relationship could also just be a function of time. If management is correlated with time on the force, then they have had more time to use programs in the past.

Race and gender were both found to be associated with maladaptive and adaptive coping. Law enforcement primarily comprises of white males. In this sample, 88 percent of officers were male, and 86 percent were white. The results of race and gender were fairly consistent with police culture variables. Being a white male was significantly associated with increased drinking and decreased adaptive coping. This shows that since police culture was first introduced in the 1940s, the composition of those who adhere to the culture has largely remained the same.

Military veteran as a control variable had no significant effects on maladaptive or adaptive coping. This could mean that officers with military experience do not need to cope given their prior experience in stressful situations. This supports literature suggesting that

officers with military experience were better equipped to handle the stressors of policing. This supports Ivie and Garland's (2011) findings that officers with military experience found aspects of policing to be less stressing versus officers without military experience. If those officers are not experiencing stress, there is no need to cope.

Maladaptive drinking and smoking appeared to be the best measures of maladaptive coping. Under maladaptive coping, hypotheses regarding police culture (camaraderie), family support, and stressors were partially supported. None were associated with poor exercise. The only variable associated with exercise is age. Literature on maladaptive coping refers to alcohol use, drug use, and tobacco use as common unhealthy behaviors (Menard & Arter, 2013). Therefore, results on drinking and smoking are consistent with prior research.

Both measures of past adaptive coping found police culture (anti-help seeking) and stressors to have the largest effect but in opposite directions. With more stress, there was more past adaptive coping. However, with more adherence to police culture, there is less adaptive coping. This shows that past use of adaptive coping strategies is dependent upon the stressors experienced and attitude of other officers towards counseling. The first measure of past adaptive coping (availability) looked at officers who used programs of those which were available while past adaptive coping (need) looked at all of the programs that have ever been used. The only changes between the two models were control variables. While age was significant in the linear regression, gender and job title were significant in the logistic regression.

Like past adaptive coping, stressors and police culture (anti-help seeking) were also statistically significant predictors of willingness to use adaptive coping. However, willingness to use adaptive coping had one more statistically significant variable than past adaptive coping being management support. Management support was not associated with past adaptive coping

but could lead to adaptive coping with more support. This is significant finding because it shows the role that management could play in adaptive coping for officers.

Limitations

With the data being collected in 1995, it is unknown how police culture has changed over the past 25 years. A more recent study should be conducted on police culture customs to see if elements or attitudes have changed in the past two decades towards maladaptive and adaptive coping. Agency offered services could also have changed and adapted to the needs of officers. An article by Carlan and Nored (2008) discuss whether counseling should be mandatory for officers. Their results on counseling within departments concluded that it does reduce officer stress. Therefore, the authors suggest that law enforcement should mandate regular counseling. Additional research should examine if mandatory counseling has been implemented in any agencies and what that has done to officer stress and coping.

This data is also limited in the number of cases used. The original collectors only had a 36 percent participation rate for their study. Since a filter was used to exclude any officer without a spouse or partner, the number of included officers was further reduced. This impacts the generalizability to other officers, especially those without a spouse or partner. It is possible that single officers have different forms of support or a lack thereof. Past adaptive coping use already had many missing cases due to officers answering “no” or “unsure” on the questionnaire for whether their agency offered the listed programs and services. Availability and use of programs were rather low and removed over 200 cases from the analyses. Past adaptive coping had the most missing cases and caused some limitation for those not accounted for. This study is also limited by the type of analyses ran. Linear and logistic regression were used despite not being the most appropriate tests. Given that the three maladaptive dependent variables were ordinal, it

would have been better to use ordinal logistic regression in those models.

Future research

Future research should consider breaking stressors into categories, operational and organization stressors. These two types are argued to be the most stressing parts of policing. Research would benefit on knowing how each group of stressors impacts coping. With organizational contexts causing the most stress, it would be expected that officers would use more coping strategies. There may be differences in coping strategies used for operational and organizational stressors.

There is also a need to include more maladaptive coping variables in future studies. While drinking and smoking were good indicators of unhealthy coping, exercise was not. More unhealthy internal behaviors should be included such as emotional suppression, heightened aggression, cynicism, and dark humor. These additional behaviors are argued to be prevalent under police culture coping (Anshel, 2000; Violanti et al., 1985). Adding more maladaptive coping strategies can provide better understanding of the relationship between police culture and maladaptive coping.

Additionally, research should consider developing better police culture measures. Paoline (2003) defines police culture by social isolation and group loyalty, while the variable in this study only accounted for camaraderie. While closeness with other officers is a part of social isolation, this variable did not account for socializing outside of law enforcement. It is possible that officers still maintained non-law enforcement friendships. Also, accounting for group loyalty may highlight other coping strategies used. Furthermore, there should be a focus on better direct questions about police culture and the stigma associated with mental health services. Questionnaire items were grouped together and labeled police culture based on prior literature.

These questions did not directly ask about police culture but rather implied the presence of culture. Questions should focus on the elements of police culture and their specific coping strategies.

Research should also address support from management and family. Results from this study revealed that officers would be willing to use adaptive coping strategies with more management support. This finding introduces the question of how can management support increase? It is possible that breaking the barrier between management and patrol officers can increase support. Reducing ties to police culture may also increase management support by officers not avoiding supervisors. Additionally, research should address family support as a supportive factor for adaptive coping. While not significant in this research, involving family in agency provided services may boost participation.

While results on military veteran status were not significant, there is still something to be learned from this group of officers. Additional research should study officers with military experience and find ways in which they handle stress. This may lead to more ideas and strategies to help officers. Being white and male were consistent with police culture variables. Increasing women and minorities in the work force may reduce ties to police culture traditions.

Given that all models used in this study explained little variance, there are other variables that need to be considered. Other variables that should be considered are peer support and family support besides spouses/partners. While police culture suggests that officers do not talk to each other about their problems, this research does not control for that. Variables in this study include the closeness of officer friendships and support for counseling but not general support by officers. Officers could lean on officer communication as a role of support. Similarly, social support in this study only address the role of spouse/partners. Officers could be turning to

other friends and family that is not included in this research such as parents, children, and close relatives.

Conclusion

Results from this study address the ways in which stress and supportive factors affect maladaptive and adaptive coping. Research should continue to address the effects of police culture, management, and family. Specifically, how to reduce ties to police culture, increase management support, and involve family in agency offered services and programs. The stress that is inherent to policing is not likely to change. However, the support and services that officers have access to can reduce the strains experienced on the job through healthy adaptive coping strategies. The mental health of officers is imperative to their job and their decision-making processes that can not only cause harm to themselves, but the community they are sworn to protect. By addressing internal organization issues like police culture and management support, officers can remove the stigma associated with mental health and receive the help they need. This research opens the door to the understanding of supportive factors and coping mechanisms. With additional research, supportive factors within policing can be expanded and improved upon to increase adaptive coping for officers and reduce stress and maladaptive coping.

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