8-2022

From Behind the Shield: Unearthing Perspectives of Retired Police Officers on Stress

Matarazzo A. Robert
St. John Fisher University, ram04704@sjfc.edu

From Behind the Shield: Unearthing Perspectives of Retired Police Officers on Stress

Abstract

The purpose of this qualitative study was to explore the concepts of job stress, burnout, and perceived organizational support among 12 retired New York City Police Department (NYPD) police officers. The research questions examined: (a) the lived experiences as described by retired NYPD police officers in handling stress and occupational burnout; and (b) the coping strategies and mechanisms, including organizational support, that retired NYPD police officers utilized to deal with occupational stress.

Using semi-structured, in-depth interviews, the lived experiences of retired police officers, explicitly the challenges, stressors, and resilience in developing coping mechanisms, and the perceived support from their organizations, are all explored. After unprecedented events in America, tremendous strain has been placed on police officers, especially in New York City, where stress and burnout has, at times, reduced job satisfaction, impaired health, and perhaps decreased performance. The results of this qualitative research study revealed eight prominent themes: (a) communication, (b) experience, (c) physical health, (d) coworker/work support, (e) family support, (f) meditation/mental health, (g) personal time, and (h) training consistent with the literature review. While no significant influence was found between the officers' lived experiences and their beliefs in the benefits of job-related interventions or job-sponsored programs, the findings did reveal that dealing proactively and effectively with stress increases job satisfaction, quality of life, and life expectancy.

Recommendations include replicating this research to explore the lived experiences, beliefs, and behaviors of officers by agency, gender, ethnicity, age, education, length of service, and other demographic factors as well as replicating this research in different areas of the United States, eventually including a much larger sample size of law enforcement officers. In addition, a quantitative study was recommended using surveys as the instruments for analysis. A large sample of retired law enforcement officers could be selected on either a national or regional basis. The survey could be designed to ask participants questions regarding demographics, experiences with stress, leadership, support, and the existence of stress intervention services in the workplace.

Document Type

Dissertation

Degree Name

Doctor of Education (EdD)

Department

Executive Leadership

First Supervisor

Kishon C. Hickman, Sr., EdD

Subject Categories

Education

From Behind the Shield: Unearthing Perspectives of Retired Police Officers on Stress

By

Robert A. Matarazzo

Submitted in partial fulfillment

of the requirements for the degree

EdD in Executive Leadership

Supervised by

Kishon C. Hickman, Sr., EdD

Committee Member

William Rolon, EdD

Ralph C. Wilson, Jr. School of Education

St. John Fisher University

August 2022

Dedication

I want to dedicate this dissertation to the four most important people in my life, my wife, Janet, and my children: Jenna Marie, Madison Marie, and Paige Marie, with my unending love, gratitude for being my strength, for their joy, and for heartening my life more than I could ever hope for. I have learned so much about life from having you and watching you mature and prosper in your own right. You have been my inspiration to become the finest that I can be, and you have encouraged me to persistently pursue my goals—regardless of any obstacles along the way. All I do is for you, and I hope more for you than I do for myself.

Moreover, my doctoral degree, as well as my personal and professional accomplishments, could not have come to fulfillment if it were not for the abiding love, support, guidance, and encouragement that I received from my wife, three daughters, and my parents, who instilled in me the importance of hard work, who inspired me to believe in myself, and who encouraged me throughout my entire life.

My dissertation journey was guided by my dissertation chair, Dr. Kishon C. Hickman Sr.; advisor, Dr. Anthony P. Chiarlitti; and Director, Dr. Josephine Moffett, who patiently, selflessly, and ably encouraged, motivated, and mentored me through the triumph's, labyrinths, and pitfalls of this worthwhile educational endeavor.

I would like to thank all of the study participants, police officers past, present, and who made the ultimate sacrifice with honor, courage, and loyalty. To Mr. John DeGrace for your support throughout this process and my life. Ultimately, I thank God for blessing

me with the opportunity to better provide for my family and help others through my life's work. You have blessed me with a beautiful wife, and three healthy, brilliant, and loving children all who have transformed my life for the better.

Biographical Sketch

Robert A. Matarazzo is a member of the Criminal Justice Department at State University of New York (SUNY) at Suffolk County. Mr. Matarazzo attended Adelphi University from 1972 to 1974 and graduated with a Bachelor of Arts degree in Sociology. He attended The Rockefeller Institute at SUNY Albany via a Fellowship from 1996 to 1997, earning a Master's degree in Criminal Justice. He came to St. John Fisher College in the summer of 2019 and began doctoral studies in the EdD Program in Executive Leadership. Mr. Matarazzo pursued his research in the perspectives of retired police officers regarding stress, under the direction of Dr. Kishon C. Hickman, Sr., and Dr. William Rolon, and received the EdD degree in 2022.

Abstract

The purpose of this qualitative study was to explore the concepts of job stress, burnout, and perceived organizational support among 12 retired New York City Police Department (NYPD) police officers. The research questions examined: (a) the lived experiences as described by retired NYPD police officers in handling stress and occupational burnout; and (b) the coping strategies and mechanisms, including organizational support, that retired NYPD police officers utilized to deal with occupational stress.

Using semi-structured, in-depth interviews, the lived experiences of retired police officers, explicitly the challenges, stressors, and resilience in developing coping mechanisms, and the perceived support from their organizations, are all explored. After unprecedented events in America, tremendous strain has been placed on police officers, especially in New York City, where stress and burnout has, at times, reduced job satisfaction, impaired health, and perhaps decreased performance. The results of this qualitative research study revealed eight prominent themes: (a) communication, (b) experience, (c) physical health, (d) coworker/work support, (e) family support, (f) meditation/mental health, (g) personal time, and (h) training consistent with the literature review. While no significant influence was found between the officers' lived experiences and their beliefs in the benefits of job-related interventions or job-sponsored programs, the findings did reveal that dealing proactively and effectively with stress increases job satisfaction, quality of life, and life expectancy.

Recommendations include replicating this research to explore the lived experiences, beliefs, and behaviors of officers by agency, gender, ethnicity, age, education, length of service, and other demographic factors as well as replicating this research in different areas of the United States, eventually including a much larger sample size of law enforcement officers. In addition, a quantitative study was recommended using surveys as the instruments for analysis. A large sample of retired law enforcement officers could be selected on either a national or regional basis. The survey could be designed to ask participants questions regarding demographics, experiences with stress, leadership, support, and the existence of stress intervention services in the workplace.

Table of Contents

List of Tables

Chapter 1: Introduction

New York City Police Commissioner James O'Neill described a 10-day period, when three officers committed suicide, as "a mental health crisis," vowing to "address this issue – now – because it will not go away on its own" (Ostapiuk, 2019, para.1). Commissioner O'Neill also said, "The NYPD and the law enforcement profession as a whole absolutely must take action. This cannot be allowed to continue" (Ostapiuk, 2019, para. 7).

In a profession where strength, bravery, and resilience are revered, few wish to report or acknowledge mental health issues and officer suicide (International Association of Chiefs of Police [IACP], 2014). First-responder stress and trauma is an outgrowth of the profession that officers routinely experience (Everly & Lating, 2008; IACP, 2014). Traumatic situations expose police to stress and physical, emotional, and psychological illnesses. Post-traumatic stress disorder (PTSD) is on the rise, reaching epidemic proportions (Arble & Arnetz, 2017). Approximately one-quarter of first responders report symptoms of PTSD due to trauma. The incidence of PTSD in rescue workers is 10% greater than the general working population (Robertson, 2019). PTSD is historically associated with military combat (Brewin, 2010), however, police work, described as the most psychologically dangerous job (McCafferty et al., 1990), also qualifies as one of the bedrocks of PTSD.

A consequence of PTSD is suicide. Since 2014, the New York City Police Department (NYPD) has averaged five police suicides annually (Sandoval & Southall,

2019). In 2019, the suicides of 10 New York City police officers exceeded the five officers killed in the line of duty during that same year (Moore, 2019). Stress affects organizations, communities, and loved ones. Haugen et al. (2012) stated that reactive diagnosis and treatment are ineffective, but Tyagi and Dhar (2014) posited that leadership attentiveness to officer well-being should improve the situation.

Problem Statement

Few researchers have investigated police suicide using the qualitative method (Violanti, 1996, 2007). Oquendo et al. (2004) and Price (2017) examined PTSD, and having had limited variables to focus on those methods, although beneficial, they were limited in their results.

Blue H.E.L.P. (2018), a post-traumatic stress organization specializing in first responders, found that 159 officers committed suicide in 2018 in the United States, and the National Law Enforcement Officers Memorial Fund (2018) website shows that 145 police officers died in the line of duty in the United States. Messer (1994) and Scupin (2012) provided explanations for premature police officer deaths in the United States: (a) extreme job stress, (b) PTSD, and (c) suicide ideation.

Police officers suffer additional health problems resulting from aversive events that do not affect the general population (Burris et al., 2017). Donnelly et al. (2015) found that increased alcoholism rates, substance abuse, family problems, domestic violence, PTSD, suicide, heart attacks, ulcers, and weight gain are the health problems that affect police officers. Lack of proactive emotional care and preventive treatment contribute to depression, anxiety, stress, and PTSD (Kosor, 2017).

Haas (2016) found that despite police officer training, the act of being heroic depicted in the media and in the entertainment business may cloud police officers' recognition of the need to seek mental health help. While stressors vary, coping styles and factors influencing the initiation of mental health support are not understood. The literature has broadened the understanding of trauma, yet research on police officer and first-responder stress is insufficient (Haas, 2016).

Theoretical Rationale

The vocation of a police officer can be burdensome (Tucker, 2012). After witnessing grim incidents and experiencing trauma, the potential for PTSD is probable (Abdollahi, 2002). Sugimoto and Oltjenbruns (2001) defined PTSD as an anxiety disorder affecting people exposed to death or situations involving great harm. Officers who may not have the ability to cope with trauma can develop PTSD (Anshel, 2000). Diagnosing PTSD is challenging. The police subculture and code of silence keeps most officers silent about the trauma they have witnessed or undergone, as they continue to portray being strict officers with nothing harming their well-being (Crank, 1998).

Police officers' anxiety levels can cause harm (Aaron, 2000; Hassell & Brandl, 2009; Lieberman et al., 2002). Pearlin (1989) defined chronic stress as the cumulative damage from stressful situations, affecting a person's ability to cope with emotional injury, physical injury, and disease (Lieberman et al., 2002). Pearlin (1989) found that chronic stress affects police officers' relationships, and Agnew (1985) saw police officers responding with anger and frustration when exposure to an event was unwarranted or undeserved (Agnew, 1985).

History of General Strain Theory

The use of coping styles by police emerges from Agnew's (1985, 1992) general strain theory, with origins in Durkheim's (1893, 1969) "anomie," a breakdown of moral and social norms resulting in social problems and job stress ramifications. Merton (1978) used anomie to develop a strain theory specific to work satisfaction and trauma, implying that individuals are in anomie due to an emphasis on success and the lack of a legitimate means to achieve such success. Merton (1978) posited that it is the adjustments by group members (e.g., police officers) that lead to high anomie levels and suicide ideation.

Although testing of general strain theory occurs, few studies have used it as a framework to clarify police stress (Swatt et al., 2007). Other studies used general strain theory to explore problems relating to alcohol consumption, citing coping strategies that can be detrimental, positive, or varied, and Swatt et al. (2007) investigated officer stress and negative coping strategies.

Congruently, Gibson et al. (2001) used a sample of 596 male police officers from Baltimore, MD and explored the relationships of police stress with coping, strain, negative emotions, and domestic violence. Finding strain is related to detecting depression and suicidal ideation through the effects of despair and anger. Gibson et al. (2001) found that social support and spirituality did not impact these feelings, but social support did decrease strain's impact.

Agnew's (1985, 1992) general strain theory was applied to retired police officers to investigate the implication that strain correlates with negative emotions, job stress, and PTSD. Coping strategies were examined using a sample of retired police officers who were assigned to high-stress assignments in the NYPD.

Criticism of General Strain Theory

Although Agnew's (1985, 1992) general strain theory is respected in criminology (Cranwell-Ward & Abbey, 2005), it has not always been so (Crosby & Stacks, 2002). Dowler (2005), as well as Finn (1997), criticized this theory, resulting in the development of the control and social-learning models by Agnew in 1992. Agnew (1992) revised the strain theory, reestablishing credibility by explaining criminological phenomena such as patterns of offending and workplace stressors (Cranwell-Ward & Abbey, 2005).

The Agnew (1992) revision contends that forms of strain can cause an individual to experience anger, depression, and fear. Depression and negative thoughts occur when a person's unfavorable mechanisms try to cope with negative emotions. Hoffman and Su (1997), contrary to Agnew (1992), argued that not all individuals in law enforcement who have been exposed to inherent trauma experience periods of depression or negative feelings. They explained that coping strategies are the determining factors of whether one experiences depression and/or anxiety.

Criticism regarding Agnew's (1992) modification of the original definition of strain enabled a new theory to explain depression beyond work-related depression (Jaramillo et al., 2005). Agnew (1992) added two sources of strain: removing positive stimuli and confronting negative stimuli. As an example, Agnew (1992) suggested that job loss could be the removal of a positive stimulus or something of value. A negative stimulus could be a student who encounters a bully. "In either case, negative emotions induced by these strains could lead to an individual's depressive state as a means with which to cope with their emotions" (Agnew, 1992, p. 29).

Evidence of General Strain Theory Effectiveness

The police subculture promotes that the weak suffer from stress; therefore, most police officers hide their feelings of isolation, depression, and anxiety, avoiding preventive/proactive strategies that could help them deal with stress (Beehr et al., 1995). Agnew (1992) investigated stress and negative coping strategies to explain powerlessness and reported that strain correlates with negative emotions, depression, and anger, and the researcher argued that anger is an emotional response to strain. Displaced anger is powerlessness and stimulates a need to react and correct a situation (Agnew, 1992).

Arter (2008) tested Agnew's (1985, 1992) general strain theory using a sample of undercover police officers who reported what they attributed to increased levels of stress and depression. Consistent with Agnew's (1985, 1992) assertions, anger, and frustration were associated with higher stress levels. Police officers who perceived strain as unjust and elevated responded with deviant behavior (Arter, 2008).

Davis (2009) claimed that Agnew (1992) "suggests three main forms of coping strategies" (p. 5) to deal with strain. The first form, cognitive coping, is divided into three parts. The first part is minimizing the strain. Davis (2009) posited that when "using this strategy, the individual attempts to neutralize a strain-causing situation by downplaying the importance of [it with] a goal [to] avoiding tension, resulting from their inability to reach it" (p. 5). The second part of cognitive coping is rationalization. The third part of cognitive coping is accepting the negatives where "they failed to achieve the desired goal by minimizing the negative outcome" (Davis, 2009, p. 5). The outcome is to "deny or ignore the negative stimuli by taking positives from the experience" (Davis, 2009, p. 5).

Using the third part of the cognitive coping strategy, the "individual is accepting a negative outcome [because that is] what they expected" (Davis, 2009, p. 5). Davis (2009) concluded that "For whatever reason, individuals have no expectation of achieving the desired goal, and so their eventual - and inevitable - failure comes as no surprise and consequently, causes no great tension" (p. 5).

The second form of coping set forth by Agnew (1992) was a behavioral coping strategy. Unlike cognitive coping, this strategy takes physical action to cope with strain. Using this approach, Davis (2009) surmised there might be a change in "their behavior in some way – to seek out positive experiences while avoiding situations that involve negative stimuli" (p. 5). By omitting negative stimuli and including positive experiences, individuals lessen stress and strain. Davis (2009) stated, "this type of avoidance strategy may represent non-deviant revenge on those who have blocked their opportunities – by removing themselves from negative stimuli, the individual denies others what they see as something positive" (p. 5).

The third form of coping strategy is emotional coping, which is dealing with "the individual attempting to remove the negative feelings that cause the strain (rather than avoiding or confronting failure)" (Davis, 2009, p. 5). People control emotions, taking their minds off things and activities, or they have "techniques of emotional neutralization, including physical exercise, massage, and relaxation techniques" (Davis, 2009, p. 5).

Statement of Purpose

The purpose of this research was to identify and understand the impact of occupational stress on the frequency of specific coping mechanisms, and also to enlighten the causal factors of stress and the coping mechanisms that have been used by retired

police officers, with 20 years of service in the NYPD, to gather the methods they used to cope with the stress of their jobs as first responders.

Research Questions

Research questions are interrogative statements that narrow the purpose statement to specific questions (Creswell, 2002). The data gathered from the interview questions to answer the research questions informed the study:

1. What are the lived experiences described by retired New York City police officers in dealing with stress and occupational burnout?
2. What are the coping strategies and mechanisms, including organizational support, that retired New York City police officers utilized to deal with occupational stress?

Potential Significance of the Study

Tucker (2015) found that while the literature on police stress and burnout expands, there is limited information regarding the nature and extent of intervention services. Abdollahi (2002) stated that stress arises from organizations, individuals, and duties. Determining stressors and preferred coping strategies should assist police departments in addressing police stress and burnout (Abdollahi, 2002). This study also explored job performance, job satisfaction, and organizational supports relative to the predictors of stress and burnout. Retired officers were requested to participate in this qualitative phenomenological study to ascertain what contributed to their careers' quality while enduring traumatic experiences that possibly could have resulted in PTSD, stress, and possible suicide ideation.

Definitions of Terms

Anomie – a breakdown of society's moral and social norms. This breakdown may result in social problems, stress, and negative ramifications (Durkheim, 1893, 1969).

Code of silence – behavior preventing one police officer from incriminating another police officer. Out of respect of the officer and as a professional courtesy, an officer does not report a rule or law violation committed by another officer (Anonymous, 2011).

Enforcement activity – compilation of arrests and criminal court summonses issued by an officer; often seen as a measure output (MacVean et al., 2013).

Excessive force – based on reasonable standards, the application of more force than required where use of force is necessary (Kuhns & Knutsson, 2010).

First responder – an individual whose job it is to immediately act in response to an accident or emergency. Emergency medical technicians (EMTs), paramedics, firefighters, and police officers are first responders (Bea et al., 2003).

Law enforcement suicide – a police officer's response to trauma and stress after a crisis (Rouse et al., 2015).

Line of duty – all that is authorized or normally associated with a field of responsibility (FBI National Press Office, 2014.)

Organizational stress – an emotional, cognitive, behavioral, and/or physiological response to the aggressive and harmful aspects of work, work environment, and institutional climates (Paton et al., 2009).

Peri-traumatic experiences – risk factors that contribute to the development of PTSD in police officers. They can include dissociation, physical and emotional reactions during trauma, a threat to a fellow officer's life, or exposure to death (Hodgins, 2001).

Police burnout – (a) emotional exhaustion and lassitude that sets in insidiously after 7 to 12 years of policing, or (b) a syndrome of exhaustion and cynicism that often presents in individuals who work in the social services field (Burke et al., 1984)

Police emergency operations response – law enforcement's critical role in emergency management, search and rescue, and recovery efforts (Huppert & Griffiths, 2015).

Police employee assistance programs – a confidential resource developed to help employees and their family members cope and possibly resolve problems that affect their work/home lives and marital and relationship difficulties, and assist them with stress and family, financial, or legal issues (Moriarty & Field, 1990).

Police-kinship groups – several individuals who share a social relation that extends into a family-like gathering, such as fraternal, athletic, and religious societies (Barrie & Broomhall, 2012).

Police misconduct – inappropriate or illegal actions by law enforcement officers while conducting their official duties (Henry, 2006).

Police subculture – beliefs, attitudes, and behaviors by those in law enforcement. Walker and Katz (2013) posited that because police officers spend the majority of their time dealing with crime, they tend to view members of the public as untrustworthy and potentially hostile.

PTSD (Post-traumatic stress disorder) – a mental health condition triggered by experiencing or witnessing a terrifying event. Symptoms may include flashbacks, nightmares, severe anxiety, or thoughts about the experience (Sugimoto & Oltjenbruns, 2001).

Psychache – a neologism coined by suicidologist Edwin Shneidman, in 1993, describing unbearable psychological pain manifesting in body hurting, anguish, soreness, and aching. Shneidman theorized that unresolved psychache results in suicidal behavior. In almost every case of suicide, psychache is the cause (Shneidman, 1993).

Chapter Summary

Although most of an officer's duty may not be dealing with trauma, there is the potential for adversity, making stress problematic. Traumatic events are frequently linked to stress. When officers feel they are in danger, they cannot control the factors that induce stress (Johnson et al., 2005). Stress emerges unpredictably in how officers balance their work and how stress influences their health (Kaufmann & Beehr, 1989). The literature suggests that occupational stressors (Johnson et al., 2005), individual strains (Brewin, 2010), and lack of social support (Messer, 1994) complicate feelings of anxiety.

When police officers experience trauma, how they deal with stress is critical. Kenwright and Whitehead (2008) described that the "macho man portrayal" (p. 148) is partially responsible for officers not seeking help. Stevens (2004) explained that officers seeking counseling or support are perceived as weak or unfit to serve. Considering the proliferation of stressors, mainly PTSD, and the spate of suicides among police, the question is: Are there organizational hierarchies proactively recognizing occupational stress? Owing to the incremental processes prescribed by Roberts and Hyatt (2019) and

Joyner et al. (2018), this research study examined the coping strategies used by retired NYPD police officers with 20 years of experience in law enforcement.

The literature review in Chapter 2 addresses studies of stress and coping mechanisms that include (a) PTSD, (b) proactive and preventive strategies, (c) stress and emergency operations, (d) coping strategies and mechanisms, (e) effects of psychological trauma and mental illness, and (f) the concept of psychache. Chapter 3 details the methodology that was used for this study. Chapter 4 provides the research findings from the data collection and analysis. Moreover, the qualitative research, through interview questions, includes an analysis and description of the results derived from the collected data. As previously stated, the Florida Fraternal Order of Police (FOP) Lodge was the selected site for the study to conduct semi-structured interviews. Chapter 5 offers a summary and documentation of the values, perspectives, and understandings of retired police officers relative to stress, burnout, and perceived organizational support; and a discussion of considerations for future study.

Chapter 2: Review of the Literature

Introduction and Purpose

Law enforcement line-of-duty death and assault statistics concerning police officer deaths by suicide were twice as high as traffic accidents and felonious assaults in 2017 (Federal Bureau of Investigation [FBI], n.d.). Some officers suffer mental health issues, including suicidal ideation, and many die from suicide (FBI, n.d.). Research suggests that mental health is integral to officer safety and wellness and critical to preventing suicide (Messer, 1994; Toch, 2002). Police executives provide resources ensuring officer safety and physical fitness standards, such as firearms training and physical fitness, yet they do little to invest in the support of officers' mental wellness (Stanley et al., 2016).

This literature review presents scholarly literature applied to police trauma, PTSD, and suicide, emphasizing how the topics intersect within the research. The analysis is apportioned into the following tenets, underscoring the silence and denial concerning officer mental health: (a) PTSD, (b) proactive and preventive strategies, (c) stress and emergency operations, (d) coping strategies and mechanisms, (e) effects of psychological trauma and mental illness, and (f) the concept of psychache.

PTSD and Law Enforcement

Police officers experience threatening events and atrocities, and they witness cruelty more than other employed individuals (Brewin, 2010). Soomro and Yanos (2019) reported that police officers experience higher trauma and PTSD rates than the general

working population. Haugen et al. (2012) identified a gap in the literature suggesting that there are no systematic reviews of treatment studies for first responders. They identified a number (N = 845) of peer-reviewed articles on the treatment of first responders; two of those studies were randomized control trials (RCTs) where the primary outcome was PTSD. Both RCTs found that treatment effects lacked evidence and recommendations for first responders (Haugen et al., 2012). Based on the preceding synthesis, treatment guidelines are questionable, and PTSD studies are needed (Haugen et al., 2012).

Soomro and Yanos (2019) examined mental health stigma among police, including trauma and PTSD (N = 296). The outcomes have implications for the training of police officers regarding mental illness awareness and treatment.

According to Taylor (2018), law enforcement, corrections, and first-responder organizations increased in their occupational suicides. Research from Stanley et al. (2016) reveals that police officers, firefighters, EMTs, and paramedics' exposure to stressors increase the risk for PTSD, suicidal ideation/behaviors, and suicide. Stanley et al. (2016) reviewed 63 studies, examining stress-related thoughts, actions, and fatalities, and they agreed that suicide risk might be elevated among first responders.

Violanti et al. (2016) studied 378 police officers (276 men and 102 women) to examine the stressors that may be associated with hopelessness as a risk factor for suicide. "It was interesting that administrative stress and lack of organizational support, not the danger, were associated with increased levels of hopelessness" (Violanti et al., 2016, p. 5).

The term "peri-traumatic" (Taylor, 2018, p. 2) describes a composite of reactions to trauma, suggesting an interpretation of events and reactions that underscore the

existence of PTSD. Peri-traumatic experiences are dissociation, physical and emotional reactions during trauma, threats to a fellow officer, and/or exposure to death that constitute the risk factors for developing PTSD (Hodgins, 2001). Perrin and Perrin (2007) found police officers who were performing particular tasks during a critical event, such as rescue/recovery at the World Trade Center sites or working outside their area of expertise for a prolonged time, were at risk of developing PTSD.

Brewin (2010) evaluated peri-traumatic factors of officers receiving support during or immediately after trauma, and they experienced decreased PTSD. Carlier (1997) outlined post-traumatic factors that predict PTSD: (a) short recovery periods, (b) dissatisfaction with organizational support, and (c) lack of social support outside of work. Asmundson and Stapleton (2008) found that psychological debriefing does not impact PTSD.

Wilson et al. (2012) found that perceived availability and satisfaction with social supports are associated with lower PTSD. Positive attitudes from coworkers and supervisors about emotions and talking about trauma have been associated with fewer PTSD symptoms (Wilson et al., 2012). Coherence of the members within a law enforcement group links to reduced PTSD symptomatology (Friedman & Higson-Smith, 2003).

PTSD and Concerns in Reporting

The stigma of mental illness and obtaining professional help is a strength in the law enforcement culture and it cannot be underestimated (IACP, 2017). Despite the health-related consequences of stressors, police officers hesitate to seek treatment (Gharibian, 2015). Weakness is disguised or not discussed because of the fear of losing

peer support or one's career (Larned, 2010). Non-law enforcement organizations recognize and seek mental health treatment for trauma and mental illness, law enforcement organizations, characteristically, do not (Roberts & Hyatt, 2019).

McKoy (2011) found that officers are trained to ensure comrades' safety, but they are unprepared to personally identify or respond to trauma or mental illness, including extreme cases. McCafferty et al. (1990) concluded that officers might be confused about the laws and policies governing officer firearm removal as a result of mental illness, hindering the seeking of help.

Proactive and Preventive Strategies

Brooks et al. (2018) conducted a review of interventions designed to improve staff well-being during or after disasters. Of the 15 articles, five suggested that pre-disaster skills training and education improve confidence. Ten studies on post-disaster interventions revealed mixed findings on the effectiveness of psychological debriefings.

Similarly, Mishara and Martin (2012), in their study of 4,178 police officers, found that suicide prevention programs may significantly impact suicide rates. According to Mishara and Martin (2012), law enforcement agencies strive to promote officer wellness and prevent suicide with internal or contracted mental health services, peer support, or critical incident stress debriefing. Likewise, Burris et al. (2017) observed that "law enforcement executives are responsible for implementing programs to assist employees with emotional and physical well-being. Issues need to be explored and addressed to provide adequate law enforcement services and help our community at large" (p. 17). However, Ramchand et al. (2018) questioned the value of these efforts.

Stress and Emergency Operations

Lab et al. (2011) described the work of emergency responders as "hours of boredom punctuated by sheer moments of terror" (p. 201). Emergency or first responders face a higher risk of traffic accident injury and death (Becker et al., 2003; Clawson, 2017; Van Derbeken, 2004), disease and violence (Bigham et al., 2014; Mechem et al., 2002), and exposure to hazardous materials (Brooks et al., 2018). Nonemergency response stressors create the effect of disturbed and inadequate sleep (Belzer, 2017; Okada et al., 2005; van der Ploeg & Kleber, 2003; Vila, 2000; Yetkin et al., 2010; Young & Cooper, 1997), and where little to no calls or actions occur, Bush and Dodson (2014) found stress levels in 49 firefighters were very substantial.

In 1987, Lim et al. found that the literature was not forthcoming regarding coping mechanisms. Ramchand et al. (2018) identified the law enforcement population's risk and protective factors, pinpointing strengths and weaknesses. Their findings revealed an elevated risk of ill feelings and a need for studies utilizing more rigorous methodologies (e.g., longitudinal designs and probability sampling).

Ramchand et al. (2018) surveyed 177 U.S. law enforcement agencies, eliciting strategies for coping with stress; 110 agencies participated in qualitative interviews. Based on the services offered, agencies were placed into four categories, offering (a) minimal assistance (municipal employee assistance programs), (b) necessary assistance (mental health, critical incident response procedures, and training), (c) proactive assistance (in-house mental health care, embedded chaplains, substance misuse, peer support, screening, and health and wellness programs), and (d) integrated services (services available within the daily operation of organizations). The results

indicated that many agencies engage in efforts to promote wellness but the perceptions of confidentiality inhibit the employees' use of in-house or contracted mental health services.

Research may determine if educational intervention reduces the stigma attached to mental health issues. Research should encourage treatment, reduce suicide, and benefit law enforcement, thereby reducing sick-leave, disciplinary actions, compensation claims, and terminations (Ramchand et al., 2018).

Coping Strategies and Mechanisms

Cross and Ashley (2004) found that trauma spurs healthy and unhealthy mechanisms. In August 2019, two New York police officers killed themselves in 1 week (Ramchand et al., 2018). More police officers commit suicide than are killed in the line of duty. Since 2014, an average of five New York City police officers each year have died by suicide (Sandoval & Southall, 2019).

Badge of Life (2017) examined law enforcement suicides throughout the United States, revealing that there were 141 suicides in 2008, 143 suicides in 2009, 126 suicides in 2012, 108 suicides in 2015, and 140 law enforcement suicides in 2017. The average age of the law enforcement victims in 2008 was 37; in 2009, 42; in 2012, 42; and in 2016, 42. The average number of years of service of the victims in 2008 was 10 to 14 years; in 2009, 20 years; in 2012, 16 years; and in 2016, 17 years of service (Badge of Life, 2017). Data provided by Chae and Boyle (2013) gave evidence that 3 to 4 times as many police officers succumb to suicide than are killed, suggesting that officers are at a higher risk of death by their own hands than other individuals. If undiagnosed and

untreated, the average number of years and ages suggests a correlation between trauma-related chronic stress and outcomes (Ramchand et al., 2018).

Violanti (2004) suggested that traumatic police-work exposures increase the risk of PTSD, alcohol use, and suicide ideation (Lindsay & Shelley, 2009; Madonna & Kelly, 2002; Richmond et al., 1998). Lindsay and Shelley (2009), Madonna and Kelly (2002), Richmond et al. (1998), and Pienaar et al. (2007) all found that police officers consume alcohol to cope with stressors and tension.

Gershon et al. (2009) examined work stress and the impact of coping on the health of police officers in an urban police department (N = 1,072) by compiling questionnaires. Critical incidents, discrimination, uncooperative coworkers, and job dissatisfaction correlated with work stress. Stress was associated with adverse outcomes including, depression and intimate partner abuse (Gershon et al., 2009).

Officers relying on harmful or avoidant coping mechanisms reported higher levels of perceived work stress and adverse health outcomes, indicating implications for improving stress-reducing efforts among police officers (Messer, 1994; Toch, 2002). Toch (2002) demonstrated that officers who are affected by exposure to violence and trauma view it as their duty, and they adapt by incorporating coping techniques.

Effects of Psychological Trauma and Mental Illness

Stress has been described as a derivative of the combination of mental illness, psychological trauma, and culture (Goldsmith et al., 2002). The *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.; *DSM-5*; American Psychiatric Association [APA], 2013) states that emergency responders' exposure to "repeated and

extreme exposure to aversive details" (p. 217) of traumatic events is a part of their job duties. Additionally, the *DSM-5* (2013) defines trauma as:

> Exposure—repeated and extreme in the case of responders—to death, serious injury, or sexual violence. As a result of experiencing single or multiple events. Witnessing this happening to others or exposure to these elements—with emergency responders collecting bodies and law enforcement's exposure to details of child abuse given. (p. 271)

Psychologists accept that mental illness is associated in the United States (Cavanagh et al., 2003; Goldsmith et al., 2002) with depression being a common attribute (Richard-Devantoy et al., 2013). Mental illnesses associated with suicide are major depressive disorder, borderline personality disorder, nicotine dependence, and PTSD (Bolton & Robinson, 2010). Nicotine dependence is a component of a tobacco-use disorder, which is a diagnosable psychiatric disorder in the *DSM-5* (APA, 2013). In the O'Hare et al. (2013) study of 371 patients with mental illness, a significant number who attempted suicide reported a traumatic event—lifetime physical abuse, self-injury, and trauma secondary to alcohol use—contributing to their distress (O'Hare et al., 2013).

The stress response may negatively alter perception, comprehension, and response to threats, resulting in a lack of insight into one's condition (Amador et al., 1994; Kontos et al., 2016; Yanos et al., 2016). If responders are unaware of their mental illness, they cannot or do not seek treatment.

Between 4.34% and 30% of paramedics suffer PTSD (Alexander & Klein, 2001; Bennett et al., 2004; Clohessy & Ehlers, 1999; Fjeldheim et al., 2014; Grevin, 1996; Jonsson et al., 2003; Michael et al., 2016; Regehr et al., 2002; Streb et al., 2013). These

statistics compare to 8.7% of the U.S. population working as law enforcement officers, firefighters, or EMS providers that "increases the risk of traumatic exposure" (APA, 2013, p. 276). Between 7% and 37% of firefighters have PTSD (Berger et al., 2012; Del Ben et al., 2006), and between 7% and 19% of law enforcement officers have PTSD (Chopko & Schwartz, 2012; Gersons, 1989; Maia et al., 2007; Robinson et al., 1997), with 10% having subclinical traumatic symptomology (Chopko & Schwartz, 2012).

Violanti (2010) contrasted several studies, finding a marginally significant relationship ($p = 0.059$) between education and depression; as education increases, depression decreases. Violanti (2010) also suggested that depression, gender, and marital status were factors of police officer stress, finding differing levels within males and females.

According to Chae and Boyle (2013), the Violanti (2010) study lacked strength by using random sampling and gender as the preliminary variable, allowing for a level of depression and suicide to be rendered for each gender in the sample. Creswell and Creswell (2018) claimed that random sampling increases the validity and over-sampling of women in the efficacy of female officer attributes. Creswell and Creswell (2018) put forth that gender differentiation occurs within study samples that use male and female participants.

Education and Copying with Stress

Education can affect reactions to chronic trauma (Cross & Ashley, 2004; Welle & Graf, 2011). Welle and Graf (2011) studied stress in college students ($N = 459$), finding that while they experienced a higher level of stress than noncollege students, stress and coping in healthy ways increased with their years of college.

College-educated officers are exposed to the behavioral sciences, completing an introductory psychology course, general theories course, and a principles course (Ramchand et al. 2018). According to Cross and Ashley (2004), officers' barrier to stress is the recognition of the trauma reaction, which is linked to a formal educational level. College-educated officers are more knowledgeable and are acutely aware of the symptoms of stress because of formal training (Cross & Ashley, 2004; Welle & Graf, 2011).

Concept of Psychache and Psychache Within the Police Culture

Studies of emotional pain, negative affective states, and musculoskeletal pain among firefighters and paramedics have shown that depressive pain intertwines with physical pain and they exacerbate each other (Airila et al., 2014; Beaton et al., 1996). In the extreme, physical and psychological pain is associated with suicidal ideation, suicide attempts, and deaths (Fishbain et al., 2014; Tang & Crane, 2006).

This pain, named "psychache" (Shneidman, 1993, p. 13), may be so intense that cognitive constriction occurs, believing the only relief is through death. Meerwijk and Weiss (2011) analyzed five psychache perspectives concluding that, "Psychological pain may be lasting, unsustainable, and unpleasant resulting from the negative appraisal of an inability or deficiency of the self" (p. 410). Medical brain imaging indicates that physical and psychological pain registers in the brain's cingulate cortex, a part of the brain situated in the medial aspect of the cerebral cortex (Yesudas & Lee, 2015). Brain changes decrease cognition and metacognition, damaging coping abilities (Yehuda et al., 2007) including management and the psychache response (Shneidman, 1993).

Culture means different things to different people, leaving anthropologists unable to agree on a universal definition of the term (Jordan, 2013). This researcher defines culture as the sum of a complex system of "knowledge, belief, arts, morals, law, custom, and any other capabilities and habits acquired" (Tyler, 1871 as cited in Scupin, 2012, p. 40) because of belonging to a particular society.

As officers near retirement, another threat appears—separation—from the camaraderie and protection of peers (Blue H.E.L.P., 2018; Brewin, 2010). Officers congregate, extending into subcultural, kinship groups, such as fraternal, athletic, and religious societies. Retirees reenter the communities they could have perceived as alien and hostile (Blue H.E.L.P., 2018). Although the benefits of subculture separation can be positive for many, it can be a frightful, alienating, and devastating prospect for others. Fear, disengagement, and loss of identity; aging; and loss of camaraderie, status, and self-definition, render some individuals vulnerable, in extreme cases, to suicide.

Chapter Summary

Law enforcement leadership plays a role in defining and communicating symptom recognition and prevention, and destigmatizing and removing cultural barriers to police officers accessing care (Yesudas & Lee, 2015). Officers need to be aware of and have access to improved and recurrent education on mental health (Zhang & Lester, 2008). Alleviating the stigma will address apprehension (Yesudas & Lee, 2015).

The IACP's 2013 national conference stressed breaking the silence regarding mental health and the stigma of PTSD (IACP, 2014). The 2015 President's Task Force suggested enhanced research on 21st century policing (Office of Community Oriented Policing Services, 2015). Zhang and Lester (2008) posited that an incentive is necessary

to educate law enforcement personnel regarding how stigma can affect PTSD symptoms and how learning from traumatic experiences can be constructive and progressive. Yesudas and Lee (2015) stated that awareness is essential for understanding acute stress disorder (ASD), traumatic brain injury (TBI), sleep deprivation, data on suicide, and underutilization or lack of support, leading to grievous consequences. Solomon and McGill (2015) found that "families compare their needs to those of soldiers returning from battle and [they] long for a resource like the Veterans Administration that provides long-term support and care for injured soldiers" (p. 160).

Parts of a police officer's shifts may not be in dealing with trauma, yet the potential for stress and adversity persists. If police officers feel there is danger, and they cannot control outside factors, it can induce stress (Johnson et al., 2005). Stress is unpredictable. Solomon and McGill (2015) found officers must control their emotions on and off duty.

Johnson et al. (2005) suggested that occupational stressors, individual strains (Brewin, 2010), and social supports (Messer, 1994) complicate anxiety. Stressed police officers may translate their stressors by ineffectively carrying out their duties.

The proliferation of organizational stressors among first responders, mainly PTSD and the spate of suicide among police officers, produces a critical question: Are there organizational hierarchies that are proactively and effectively recognizing and addressing first-responder occupational stress? Understanding the incremental processes, as prescribed by Roberts and Hyatt (2019), was the birth of this research study, that examined the coping strategies used by veteran police officers who were first responders, and who dealt with the stress in their professional roles.

Chapter 3: Research Design Methodology

Introduction

Police officers are at a higher risk of personal stress than any other profession (Bachmann, 2018). Suicide is so prevalent in the profession that the number of police officers committing suicide is more than triple that of officers fatally injured in the line of duty (Bachmann, 2018). Researchers are attributing these statistics to the unique combination of easy access to deadly weapons, intense stress, and human devastation (Nock et al., 2010).

Perhaps not so evident is that 13 out of every 100,000 individuals who die by suicide increases to 17 out of 100,000 for police officers (Ramchand et al., 2018). During the 2018 calendar year, 167 law enforcement officers tragically took their own lives in the United States (Ramchand et al., 2018). Research suggests that these data do not reflect the actual number of suicides, as some families choose not to report the cause of death or, instead, describe the death as "seemingly accidental" (Turecki & Brent, 2016, p. 14).

Law enforcement from California, Florida, New York, and Texas suffer from the highest rates of PTSD-related suicide with each reporting 10 police suicides, minimum, in the calendar year 2019 (Ramchand et al., 2018). Moreover, the NYPD received national attention during the 2018 calendar year for its high officer suicide rate. At least six of the nine deaths in the NYPD involved a gun, with many police officers using their own service weapon (Ramchand et al., 2018).

The Chicago Police Department (PD) experienced a similar situation in 2019 and was compelled to confront its epidemic of police suicides. With the second-largest force in the nation, consisting of over 13,000 officers, Chicago's police suicide rate was 60% higher than the national law enforcement average (Ramchand et al., 2018). The tragedy experienced by the NYPD and Chicago PD sparked the launch of a new mental-health campaign that included doubling the number of clinicians and therapists available to officers as well as a video campaign showing senior officers admitting to their struggles with mental health (Ramchand et al., 2018). President Donald Trump also authorized $7.5 million in grant funding for police suicide prevention, mental-health screenings, and training as departments across the country worked to decrease the numbers of police officer suicides (Roberts, 2019).

Research suggests that there is never one factor that causes someone to take their life (Chae & Boyle, 2013; Lindsay & Shelley, 2009; Milner et al., 2017;). Instead, it is frequently a combination of many things, along with an inability to cope with life's stressors, that cause people to take their lives (Roberts, 2019). The work of those in law enforcement often entails going into harm's way, dealing with people in crisis and with criminals, helping people at what may be the most challenging moment of their lives, and sometimes seeing the worst of humanity (Maple et al., 2017). Therefore, it is imperative that each police officer has a plan to manage these events and develop healthy ways to cope (Roberts, 2019). A qualitative approach was used to elicit the coping strategies from veteran (retired) police officers with 20 years of law enforcement active duty.

This chapter provides an overview of the research method, appropriateness of the research design, and the population description. Methods to validate this instrument, as

well as provide for the protection of the identity of the participants, were put into place. The following research questions informed the study:

1. What are the lived experiences described by retired New York City police officers in dealing with stress and occupational burnout?
2. What are the coping strategies and mechanisms, including organizational support, that retired New York City police officers utilized to deal with occupational stress?

Research Design

To better understand the gravity of stress encountered by New York City police officers, this study sought the perceptions of retired officers and detectives regarding stress, burnout, and lack of perceived organizational support. Schaible and Gecas (2010) argued that despite declarations of ethical research practices and confidentially, active police officers are reluctant to participate in research that may potentially endanger their opportunities for advancement and create stigmas within the police department. As such, this study was shaped as a qualitative research of retired police officers to offer a true understanding of stress, burnout, and perceived organizational support in policing while simultaneously eliminating biases that frequently surface with active duty officers

Research Context

The NYPD is the largest, and one of the oldest, police departments in the United States, with approximately 36,000 police officers and 19,000 civilian employees. Of the almost 36,000 uniformed service members, about 15.2% are Black, 29.0% are Hispanic, 8.6% are Asian, 0.1% are Native American, and the remaining 47.1% are White. For

civilian employees, the racial breakdown is 48.6% Black, 23.0% Hispanic, 12.8% Asian, 0.2% Native American, and 15.4% White (Finest FAQ, 2020).

Organizational stress is manifested in physical and mental illnesses among any organizational member. Among first responders, though, PTSD is on the rise and has reached epidemic proportions (Arble & Arnetz, 2017). The problem has been magnified by the recent suicides of New York City police officers: 10 in 2019. More police officers commit suicide every year than are killed in the line of duty, and since 2014, New York City has averaged five officer suicides annually (Sandoval & Southall, 2019). In addition to individual exposure, occupational stress also affects the responders, the organization, the community, and loved ones.

With exposure to aversive events, law enforcement employees suffer more health problems than the general population (Burris et al., 2017). Donnelly et al. (2015) found that police officers experience increased alcoholism rates, substance abuse, family problems, domestic violence, PTSD, suicide, heart attacks, ulcers, and weight gain. Proactive emotional care is lacking, and there is scant preventive treatment for depression, anxiety, stress, and PTSD (Kosor, 2017).

Haas (2016) found that despite their training, the portrayal of being heroic in the media and entertainment may cloud officers' need to seek mental health help. The tough-guy culture in law enforcement certainly makes for psychologically hearty police officers (Violanti, 2018). Still, when overwhelmed by trauma, loss, or a period of mental illness, this tough exterior can prevent an officer from reaching out and getting much-needed support and treatment (Violanti, 2018).

Officers may be reluctant to discuss issues relating to stress and PTSD or the underlying impairment, fearing that such disclosures will permanently damage their careers. This reluctance of police officers to openly discuss personal distress or to seek help for this distress may be the biggest challenge that police counselors face in their attempt to evaluate officers at risk (Janik & Kravitz, 1994).

While stressors vary, the coping styles and factors influencing mental health support are not understood. The empirical literature has broadened the understanding of traumatic events, but the research regarding police officer and first-responder stress is insufficient (Haas, 2016).

The police department's hierarchies are mandated to pay attention to the force's health and welfare to improve the prevailing situation (Tyagi & Dhar, 2014). Haugen et al. (2012) found that the traditional, reactive strategy, that is, diagnosis and treatment, has not been effective.

Research Participants

Schaible and Gecas (2010) argued that despite assurances of ethical research practices and confidentially, active police officers have shown reservations about participating in research that may potentially endanger their employment and opportunities for advancement. Accordingly, this qualitative phenomenological study of retired police officers investigated a greater understanding of the ideas of stress, PTSD, and perceived organizational support in policing while simultaneously removing biases that frequently surface with active-duty officers (Jabr, 2011). Retired police officers were ideal candidates for this study because they would be able to shed light on a topic that active duty officers are hesitant, reluctant, or fearful of discussing while actively serving

because of the potential for reprisals or other negative connotations (Miller, 1995). The perception and perspective of retired police officers is essential and was of great value to this study given that the participants did not fear reprisals from their former departments or fear the lack of support from their union when candidly discussing how stress and PTSD affected them (Miller, 1995).

The purpose of this study was to investigate the most significant stressors affecting police officers in New York City. Moreover, this study sought to identify how retired police officers coped with the stress and stressors while in service. The participants were recruited in a nonarbitrary manner from NYPD retired police officers, and they were not compensated for their participation.

The participants were veteran (retired) police officers/detectives who had completed 20 years of service or more in the NYPD. The population from which the sample was drawn had a minimum of 5 years of patrol experience and they could have no more than 10 years in retirement.

The 12 participants who volunteered for this study consisted of varying narrative demographics. All the participants had over 20 years of law enforcement experience, averaging 24.25 years. Nine participants were male and three were female. All of the participants served their entire police career in the NYPD, all participants spoke English as their first language. Demographic data on each officer, including, assignment, years of service, gender, age, race, marital status, and education level are presented in Table 3.1.

Table 3.1

Participant Demographic Information (N = 12)

Pseudonym	Gender	Age	Ethnicity	Education	Marital Status	Years of Service	Highest Rank
Anthony	Male	59	African American	Bachelor's Degree	Married	28	Detective
Hector	Male	48	Hispanic American	Bachelor's Degree	Divorced	20	Police Officer
Jan	Female	53	African American	Bachelor's Degree	Divorced	28	Police Officer
Jimmy	Male	59	White	Associate Degree	Never Married	30	Police Officer
John	Male	58	African American	Bachelor's Degree	Widowed	23	Police Officer
Marie	Female	55	White	Associate Degree	Divorced	27	Detective
Ray	Male	55	White	Master's Degree	Divorced	26	Detective
Rob	Male	51	White	Bachelor's Degree	Divorced	27	Police Officer
Romy	Female	53	African American	Master's Degree	Married	23	Police Officer
Steve	Male	61	White	Associate Degree	Married	35	Police Officer
Teddy	Male	56	Asian American	Master's Degree	Never Married	26	Police Officer
Tony	Male	49	African American	Graduate Student	Married	26	Police Officer

Participant "Anthony" had 28 years of experience, including 14 years as a detective. He found that experience hardens and toughens and individual or it breaks them. He felt that the weak are weeded out and usually resign or quit the force, and the strong survive.

This participant believed that he effectively managed the onset of stress by "stopping the bleeding" and addressing the psychological impact as soon as possible by recognition, assessment, and response. After experiencing a traumatic event, he

communicated with his police partner and his spouse, who was also a police officer, asking for help or assistance or just an empathetic ear. If any negative feelings or emotions persisted, he reached out to the police union or health services and was guided by them.

Participant “Hector” had 20 years of experience in patrol, and he was assigned to community policing and highway patrol. He found that he tried to address any specific stressors as they occurred, finding it better prepared him to move forward.

He found that having a support system helped; finding it too difficult to explain his day to family and friends, it was vital that he maintained a support systems outside of the PD. He stated that the people who care will notice your stress before you even will. His family was not afraid to talk about feelings, and that communication was important. His family, a good group of friends or a community from church or volunteer projects can be a strong pillar of support. He stated that when officers only have friends on the force—it is their whole world, and it is unhealthy. He loved the people he worked with; they were wonderful. But he always maintained friends outside of work. He had a great partner and friend, who was a person he came to know and trust.

Participant “Jan” had 28 years of experience in patrol in high-crime precincts. This participant had experience in successfully managing police stress by proactively engaging in catharsis, and not waiting for the effects to fester and take hold. She also sought help that was provided by police support groups and effectively utilized learned coping strategies.

Participant “Jimmy” had 30 years of experience as a police officer, successfully employing stress management techniques and lifestyle habits that were conducive to minimizing his psychological stress.

He found that when something was getting to him, he sought out a professional to talk to, stating that occasionally an issue needs more work than talking with friends or family can accomplish. He saw two psychologists, and it helped a great deal. The PD had a professional on staff to talk to, but when he was nervous about sharing things that were close to or affecting his job, he went through his private doctor instead, who referred him to an excellent psychologist who was covered under his health insurance. Additionally, he found that psychological therapy was valuable and could be a wheel to set in motion even before one hits a breaking point. Officers have a lot of courage when it comes to physical violence, but that did not mean they were brave enough to admit they needed help.

Participant “John” had 23 years of experience as a police officer on patrol, and he was an undercover narcotics officer; the latter assignment required extensive investigative experience but it resulted in increased stressful situations and encounters. This participant related that frequent self-reflection and wellness checks were essential in coping with police-related stress. In addition, he revealed he had a passion for the work that he did. John iterated that speaking with his “police family” and senior officers regarding stressful events was extremely effective in developing resiliency and managing stress.

Participant “Marie” had 27 years of experience as a law enforcement officer and detective, effectively managing stress by developing resilience through a physical

exercise regimen and communicating with and through her peers. After her partner was killed in the line of duty, it became apparent that she may have developed a drinking problem, so she availed herself of the employee assistance program and at the time of her interview was healthier, retired, and on to a second career.

Participant "Ray" had 26 years of experience, including 11 years as a detective. His experience taught him to address specific stressors as they arise, as well as remembering how he handled stressful situations that he encountered during his patrol duties.

He practiced gratitude, finding it helpful to get in a habit of repositioning his mindset to one of gratitude. What helped him was reminding himself of what a privilege it was to be a police officer—that people looked to him to help them. He said that while a good bust was hard to match in terms of thrill, the best thing about being a police officer, in the end, were the people one helps. He reminded himself that that was one of the main reasons he became a police officer.

In managing stress that he experienced "on the job," he developed a lifestyle that included: not eating high-calorie fast food, scheduling vacations and personal downtime, seeing a doctor regularly for checkups, reducing the amount of overtime, and keeping his civilian friends to help him get away from the job. When he socialized with police friends, he made a point not to talk about work on downtime.

Participant "Rob" had 27 years of experience in patrol, including a community police officer, and 3 years as a police academy instructor. His experience taught him not only to focus on job-related stress but focus on relationship issues and the effects of police work on his home life which would better equip him in managing police stress.

In practicing community policing, he felt that police officers deal with the worst of society. He found that when interacting with the average citizen on the job, he normally did not see them at their best, meeting someone right after their house was burglarized or telling them a loved one had been killed, he said that you are not seeing them on a good day. Getting to know people in his community, outside of the calls he got as an officer, meant a huge difference in how he felt on patrol.

He needed reinforcement to remind him that the majority of people out there are good, law-abiding people who know the police are trying to make things safer. He got out into the community and talked to people. Even when he was busy, he got out of his patrol car once in a while and got to know people—it shaped his perspective.

In managing his stress, experience taught him the following: take the time to work out a plan to ensure there is a balance in his life, and there is more to life than "the Job." He ensured he got enough sleep and limited his consumption of caffeine and other unhealthy eating habits. He was conscious of his limits and only set realistic goals. He set aside time for exercise and leisure activities. He found that is was best to have a good attitude and find the upside to whatever situation life might throw at you.

Participant "Romy" had 23 years of experience as a police officer. Upon starting her career, she tended to absorb stress and move on. Unfortunately, over the years, it took a toll. Eventually, she learned to reach out and seek help and decompress as soon as possible after experiencing an event, discovering that proactive self-evaluation was vital and managing stress in policing over two decades became innate. Romy was able to reflect upon specific ways to manage stress associated with policing including a healthy

diet, exercise, and developing mental resiliency to reduce the affiliated problems created by stress such as: heart disease, obesity depression, etc.

Participant “Steve” had 35 years of experience in patrol. As a retired law enforcement officer, he related that experience enabled him to be more open and discuss stressors and pitfalls associated with police work and explore any past and current difficulties faced by him. He stated that camaraderie is the key. However, he found some officers still had difficulty being open with their peers when they felt stress—or when they noticed it in each other. A lot of young officers felt like people could not understand them. Even beyond the public, it became a barrier between friends or family members. The job made me him feel vulnerable. Car accidents particularly can be so gruesome, and it made him realize things like that can happen any time. Any time his wife or kids were in a car, he worried. He found that this kind of stress is something other officers will likely understand, finding that young officers had trouble opening up to their coworkers and that it would help with the things you see on the job and how they impact them. He opined that police departments should be honest in addressing burnout symptoms to better support the officers. Advising that if one sees someone acting differently, they should say so and ask them what is going on with them. As he experienced stress, he addressed it. Initially, he was reluctant to seek help, but he availed himself of, among many resources, employee assistance programs, and he exercised, maintained a healthy lifestyle, and wore his bullet-resistant vest.

Participant “Teddy” had 26 years’ experience as a police officer, spending 5 years as a recruit training officer. His varied experience taught him to focus primarily on procedures for utilizing therapeutic services, finding that experience was the best teacher.

Through this participant's experience in working in varied patrol assignments, he was able to reflect on stress management strategies he utilized throughout his career. In utilizing his experience as a police recruit trainer, he discussed the utility of social interaction with family and other non-law-enforcement acquaintances.

Participant "Tony" had 26 years of experience, and as he experienced stressful situations, it provided him with an opportunity to discuss his progress and adjustment to law enforcement. He stated he experienced some things that are beyond human understanding, such as sex crimes. They terrible crimes against children and they can affect one's worldview. He found his faith and belief helped. Faith made him more accepting of things that he could not control. When terrible things were happening, and he saw a world full of evil, he realized that it is not the end of things, and there is a brighter future.

Through experience he found that an effective way to manage stress was to learn to recognize it and address it as soon as possible. Unfortunately, the police mentality was to "suck it up" or "deal with it and move on." In his early years, it was more important to pay attention to what his peers thought of him than what he thought of himself.

Instruments Used in Data Collection

The purpose of this study was to examine the coping mechanisms used by retired NYPD police officers who were exposed to traumatic events. These instruments have been used in other studies investigating work-related and traumatic stress in law enforcement (Jansen, 2004). Jansen (2004) stated that

> One common mistake in students' projects is a lack of connection between the theoretical section, the purpose of which is to shed light on the empirical reality

and the actual research undertaken, with the result that both sections could stand on their own. (p. 102)

As posited by Creswell and Creswell (2018), the researcher used approved informed consent form for the participants' signatures prior to conducting any research and the researcher did not place any participants at risk. The informed consent form clarified the participants' rights, how the data collection process was conducted, and how the data are protected. The participants signed the form before the researcher continued (Creswell & Creswell, 2018).

The consent form includes, as suggested by Sarantakos (2005), the institution's identity, researcher's identity, research purpose, participant selection process, participation benefits, type and level of involvement, participant risk, confidentiality, assurance of right to withdraw, and names and contact information for questions (Creswell & Creswell, 2018). When conducting a research study, it is important for a connection to be established between the researcher and the participants (Cain et al., 2003). The rights of each participant were maintained regardless of the method in which the data were collected: interview, observation, survey, or experiment (Cooper & Schindler, 2003). The researcher provided each participant with documentation disclosing the intent of the study, the anticipated benefits, a copy of their informed consent, and details explaining their confidentiality and privacy rights. The participants were assured that their anonymity would be maintained and that they would be assigned a pseudonym.

All research data are stored in a locked, fire-resistant, waterproof safety box, where they will remain for 7 years, and the researcher possesses the only key. The

interviews were conducted in a convenient, safe, and comfortable locations that encouraged open, honest, and free-flowing responses. The participants were informed that the research was being conducted in partial fulfillment of the academic requirements for the researcher's doctoral degree.

Procedures Used for Data Collection

Formal approval was obtained from the Florida Fraternal Order of Police (FOP) NY Lodge 3100 to recruit participants (Appendix A). A recruitment email was approved by the IRB at St. John Fisher College (Appendix B), and it was used to recruit the participants from the Florida FOP NY Lodge 3100. The 12 participants were screened via the IRB-approved screening criteria on the approved informed consent form (Appendix C), and all participants were interviewed by telephone. The informed consent forms were sent to each participant via email.

Each participant emailed the originally signed informed consent form back to the researcher, and they provided their written consent to being audio recorded. Telephone interviews were used to collect the qualitative data, Qualitative telephone interviews can render "high-quality data" (Lechuga, 2012, p. 1) that can allow for an accurate depiction of culture. Each interview was conducted by telephone as approved by the IRB. The participants preferred phone call interviews versus the Zoom teleconferencing format. The use of the telephone interviews is not prevalent in qualitative research versus face-to-face interviewing or a Zoom format, which allows the interviewees to feel more at ease, and they could possibly disclose sensitive information more easily when they are speaking face to face (Novick, 2008). Additionally, telephonic interviews can be more

formal versus in-person interviewing in that the former is more cost-effective and has no geographical boundaries (Block & Erskine, 2012).

The interviews were recorded utilizing a Sony model UX560 voice recorder. Each audio recording was transcribed by the researcher utilizing Google Dictate speech software. All transcripts were reviewed by the researcher at least twice utilizing the voice recordings to ensure correctness. Transcriptions were then presented for review to the interviewees to ensure veracity and to address ethical research concerns (Mero-Jaffe, 2011). All transcripts were approved by the interviewees.

Qualitative research involves a methodical and operational data collection protocol (Ranney et al., 2015). Data collection is accomplished in analyzing interview transcripts thus effectively developing identified themes in how retired officers effectively managed police stress during their police career. Through data analysis involving the software Dedoose and triangulation with field notes, eight themes were identified.

Procedures for Data Analysis

The data analysis technique applied in this study was pattern matching (Yin, 2013). The pattern matching technique involves synthesizing multiple findings from case study investigations and then identifying and comparing the emerging patterns from the data that can strengthen internal validity (Almutairi et al., 2014; Yin, 2009). The pattern matching technique was selected to address the research questions in this study and, as a result, this technique provided the opportunity to compare data associated with the emerging themes.

Pattern matching enables researchers to bring diverse results together in qualitative case studies (Almutairi et al., 2014), and it was used throughout the process of analyzing all relevant data in this study. Patterns were then identified regarding effectively managing police stress through the learned experiences of successful retired police officers. The patterns discovered during this process helped to establish themes involving the stress-management strategies that were most effective for the police officer participants as the officers coped with the stress commonly associated with policing.

To be accepted as reliable, qualitative researchers must demonstrate that their data analysis has been conducted in a precise, consistent, and exhaustive manner through recording, systematizing, and disclosing the methods of analysis to inform the reader that the process is sound (Nowell et al., 2017)

Qualitative research can help researchers garner the thoughts and opinions of research participants, and qualitative research aids in the development of an understanding of the meaning that people ascribe to their experiences (Sutton & Austin, 2015). In analyzing the qualitative data, it is necessary to read and transcribe many transcripts, looking for similarities or differences, and subsequently identifying themes and emerging categories (Wong, 2008).

Analysis can aid the researcher in interpreting data in qualitative research and in theme identification (Ranney et al., 2015). Agnew's (1985,1992) general strain theory was used to guide the analysis of the themes discovered regarding effectively managing police stress over a successful police career. The interview transcripts were uploaded to the data analysis software Dedoose, which is a is a cloud-based technology that can be used to access, code, and analyze data Salmona et al., 2019).

Summary

The results of this study are statistically reliable because this research strategy can determine if one idea or concept is better supported by evidence than the alternatives (McMillan & Schumacher, 2001). The researcher is an adjunct professor at a local college and has access to a Criminal Justice Department Chair who was familiar with the area under study, and who possessed extensive practical and academic research experience in policing at both the local and national level. At the time of this study, the researcher's committee member was an adjunct professor in criminal justice, an NYPD lieutenant commander, and a St. John Fisher EdD Program alum who is knowledgeable in both police operations and research methods.

Chapter 4: Results

Introduction

The purpose of this qualitative study was to develop a deeper understanding of effective stress-coping strategies used by police officers who retired successfully from policing. A qualitative approach was used to elicit coping strategies from veteran (retired) police officers with 20 years of law enforcement active duty. Data were gathered for this study through qualitative multiple-case study interviews with retired police officers, and themes on effectively managing police stress were developed.

This study was an exploration of effective stress coping strategies to reduce stress in policing, as police officers' anxiety levels can cause harmful stress resulting in medical and psychological problems for police (Aaron, 2000; Hassell & Brandl, 2009; Lieberman et al., 2002).

Triangulation, through the merging of information in multiple case studies, was applied to each case study using the data from each participant to ensure validity (Carter et al., 2014; Houghton et al., 2013). This study was an exploration of the effective stress-coping strategies that aided in reducing stress in retired police officers and detectives and in policing, as excess stress from this profession can result in health and psychological issues for many police officers (Bishopp & Boots, 2014; Clark-Miller & Brady, 2013).

The literature review provided insight into what is known regarding managing police stress. Pattern matching in this current study enabled the researcher to compare what is known and what is not known regarding effectively managing police stress

throughout a successful police career through analyzing the themes that emerged in this study that are likened to the existing literature.

The use of coping styles by police emerged from Agnew's (1985, 1992) general strain theory, with origins in Durkheim's (1893, 1969) anomie, a breakdown of moral and social norms resulting in social problems and job stress ramifications. Merton (1978) used anomie to develop a strain theory specific to work satisfaction and trauma, implying individuals are in anomie due to an emphasis on success and the lack of a legitimate means to achieve such success. Merton (1978) posited that it is the adjustments by group members (e.g., police officers) that lead to high anomic levels and suicide ideation.

Research Questions

Two research questions informed the study:

1. What are the lived experiences described by retired New York City police officers in dealing with stress and occupational burnout?
2. What are the coping strategies and mechanisms, including organizational support, that retired New York City police officers utilized to deal with occupational stress?

This phenomenological study was an exploration of the lived experiences and perspectives of 12 retired police officers, who were previously employed by the NYPD, to better understand the retired officers' experiences involving stress, and burnout, as well as how willing the officers were to pursue and accept help. The willingness to pursue and accept the department's assistance programs was examined during this study.

To draw conclusions associated with these research questions, qualitative interviews were conducted with experienced, retired police officers to collect data.

Understanding the incremental processes as prescribed by Roberts and Hyatt (2019) was the birth of this research study, which examined coping strategies used by veteran police officers, who were first responders, and who dealt with the stress in their professional roles. This chapter an evolving theme table and a discussion of the key findings on effectively managing police stress throughout a police career.

In addition, this chapter contains a review of the data that emerged from participant interviews. The eight primary themes that emerged from this current study were: (a) co-worker support/work support, (b) communication, (c) experience, (d) family support, (e) meditation/mental health, (f) personal time, (g) physical health, and (h) training. In addition, triangulation of the themes that emerged through participant interviews was compared to previous literature (Creswell, 2014).

Data Analysis and Findings

Through a qualitative multiple case study, the perspectives and experiences were captured from 12 veteran, retired law enforcement officers on effectively managing stress throughout their successful police careers. All 12 participants had at least 20 years of law enforcement experience. Three of the participants attained the rank of detective/investigator, three of the participants were retired with a minimum of 23 years of law enforcement experience each, and each of the participants had experience in law enforcement in the City of New York. Several of the participants continued in the criminal justice field, others chose alternate careers, and some completely retired. Each of the participants had experience in managing inherent police stress.

The interviewees provided many examples of how these themes helped them manage stress throughout their police careers. The emerging themes are provided in Table 4.2.

Table 4.2

Research Questions and Themes

Research Question	Themes
1. What are the lived experiences described by retired New York City police officers in dealing with stress and occupational burnout?	Physical health Communication Experience
2. What are the copy strategies and mechanisms, including organizational support, that retired New York City police officers utilized to deal with occupational stress?	Coworker/work support Training Meditation/mental health Family support

As a result, themes were developed through the lens of the Agnew's (1985, 1992) general strain theory and codes emerged involving the effective ways to manage police stress throughout a successful police career. The themes that emerged in this study were prioritized through weighting the frequency of the excerpts captured in Dedoose, based on the narratives of the participants, which are provided in Table 4.3.

Table 4.3

Emerging Themes Ranked by Frequency and Percentage

Theme	Frequency	Percentage (%)
Meditation/mental health	34	24
Communication	27	19
Experience	4	3
Family support	9	6
Coworker support/work support	19	13
Personal time	14	10
Physical health	34	23
Training	3	2
Total	144	100

This analytic approach led to themes that emerged from the research questions and saturation was confirmed through data analysis. Saturation is indicated based on the data that have been collected/analyzed, therefore, further data collection and/or analysis is unnecessary (Ramchand et al., 2018). Table 4.4 exhibits saturation for this study's data.

Table 4.4

Demonstration of Saturation for the Study Data

Themes	A	H	Ja	Ji	Jo	M	Ra	Ro	Rom	S	Te	To
Coworker/Work support	X	X	X	X	X	X	X	X	X	X	X	X
Communication	X	X	X	X	X	X	X	X	X	X	X	X
Experience					X	X				X		
Family support			X	X			X	X	X	X	X	X
Meditation/mental health	X	X	X	X	X	X	X	X	X	X	X	X
Personal time	X	X	X	X	X		X	X	X	X	X	X
Physical health	X	X	X	X	X	X	X	X	X	X	X	X
Training			X			X			X			

Note. A = Anthony; H = Hector; Ja = Jan; Ji = Jim; Jo = John; M = Marie; Ra = Ray; Ro = Rob; Rom = Romy; S = Steve; Te = Teddy; To = Tony

Research Question 1

What are the lived experiences described by retired New York City police officers in dealing with stress and occupational burnout?

Three themes emerged in association with Research Question 1 from the interview narratives of the respondents, revealing their perspectives on their lived experiences regarding the efficacy of communication, experience, and physical health. The interview questions helped to explore how the successful retired police officer participants managed the stress that related to their past and present experiences with traumatic events that occurred during policing.

Through data analysis of the participant responses to Research Question 1, three themes emerged comprising communication, experience, and physical health. The participant responses pertaining to communication universally demonstrated strong support for communication as an effective stress-coping strategy in addressing police-related stress.

Communication was most effective to and with peers at the initial stages and after stressful encounters/events, and communication was particularly effective in increasing resiliency. Communication with peers regarding work-related stress may support psychological resilience by developing coping skills and providing shared support in a conducive atmosphere (Agarwal et al., 2020).

Theme 1: Communication. Based on participant responses, the theme of communication was developed through and with fellow police officers who had experienced comparable traumatic events. Communication was identified as communication and interaction among coworkers by discussing and diffusing stress

through sharing individual experiences and perspectives relating to the traumatic events in which each officer was involved. The participants detailed specific traumatic events that elicited stress associated with policing that emerged from Agnew's (1985, 1992) general strain theory. Peer support through communication was an emerging theme, and it was employed to reduce the stress associated with specific traumatic events experienced during policing (Jones et al., 2022).

The importance of communication was revealed in a statement by John, who stated: "In managing and surviving stress, communication is key, especially with coworkers. Officers with little time in service tend to be introverted, do not trust, and are suspicious of people, [they] withdraw and do not interact with fellow officers."

John's sentiment was echoed by participant Teddy who stated "certainly, talking about it (venting) was invaluable. I sometimes found myself, for fear of embarrassment, not doing so. I quickly found that keeping my feelings to myself only made things worse."

The theme of communication was reiterated throughout the responses of supporting fellow officers who were reacting to experiences following a traumatic event. For example, participant Tony described:

> Following a traumatic event and to reduce the impact of stress associated with experiencing a traumatic event, you talk about what went on, what part I played/saw. It was clear peer support through communication [that] reduces stress. Talking about it and working through it with somebody that has been through it or somebody that can deal with those types of situations is invaluable. Communicating with peers seems to reduce reluctance to talk to someone about

> the traumatic event the officer experienced. Peer support is effective as you are communicating with people that you know, which makes discussing the situation less formal and intrusive. When you to talked to a shrink or someone outside of the department, that was looked at a sign of weakness or something you had to do.

Peer support through communication was identified by all the participants as a critical-incident, stress-management strategy. John elaborated:

> Some of the most stressful occurrences—officer killed in the line of duty, killing someone in the line of duty, etc. It is common for an officer to ask [for] immediate help such as counseling, peer support, etc. I learned, early-on in my career, that repressing emotions, alcohol consumption, and not seeking professional medical help was counterproductive. Coping mechanisms such as: releasing pent-up emotions, managing hostile feelings, meditating, etc., were very effective.

Steve further stated:

> Camaraderie is the key. But some officers still have trouble being open with their coworkers when they feel stress—or when they notice it in each other. A lot of young officers feel like people don't understand them. Even beyond the public, this can be a barrier between friends or family members. The job made me feel vulnerable. Car accidents particularly can be so gruesome. It makes you realize things like that can happen [at] any time. Anytime my wife or kids are in a car, I'm worried. This kind of stress is something other officers will likely understand. A lot of young officers have trouble opening up to their coworkers and that it will help with the things you see on the job and how they impact you. Police

> departments should be honest in addressing burnout symptoms to better support the officers. If you see someone acting differently, say so, and ask them what's going on with them?

Following a traumatic event and to reduce the impact of stress associated with experiencing a traumatic event, participant Jimmy described:

> In my career, I was usually calm in most high-stress situations. I did have a callous attitude, suspicious of people and motives. I believe that my work taught me to cope with stress even better than the average person. The stress and pressures of the job did affect my personality and relationships at times. However, it is the ability to develop coping mechanisms and the ability to communicate that made the difference and helped me achieve my career goals.

Support through communication with peers, family, etc. is effective in reducing stress (Horan et al., 2021). Participant Jimmy also revealed:

> Fortunately, before it was too late, I reached out to employee relations, and I received help in managing my job or field stress which included: cynicism and suspiciousness, emotional detachment from various aspects of my daily life, and withdrawal. Moving forward, I employed strategies, such as wellness checks, communication with peers, as well as mental health professionals and a healthy lifestyle.

Participant Ray further explained:

> Senior officers appeared to tolerate/manage stress better than junior officers. It's as if the job hardens you or shields you against future harm. I don't think that the senior officers realized the physical and psychological toll it was having on them,

> coworkers, and family members. If they did not communicate their feeling to and with peers, family, friends, who was to know, what they had experienced? I learned to reach out communicate, relate, and seek help.

Anthony explained:

> After experiencing a traumatic event, I communicated with my police partner and my spouse, who was also a police officer, asking for help or assistance or just an empathetic ear. If any negative feelings or emotions persisted, I reached out to the police union or my health services and were guided by them.

The participants explained that peer support should be available outside of work for officers or from fellow officers after someone experiences a traumatic event so they can describe their experience and be supported. For instance, participant Rob explained:

> I find that having a support system helps. Though it might be hard to explain your day to family and friends, it is vital that you maintain your support systems outside of the PD. People that care about you will notice your stress before you even will. My family was not afraid to talk about our feelings, and that communication is so important. My family, a good group of friends, or a community from church or volunteer projects can be a strong pillar of support for you. Some officers only have friends on the force—it's their whole world. I don't think that's healthy. I loved the people I worked with; they were wonderful. But I always had friends outside of it.

Steve further stated:

> In managing my stress that inevitably [was] experienced "on the job," I developed a lifestyle that included not eating high-calorie fast food, scheduling "away"

> vacations from peers and other personal downtime, seeing a doctor regularly for checkups, reducing the amount of overtime, keeping my civilian friends to help me get away from the job. When I socialized with police friends, I made a point not to talk about work on our downtime and, in socializing with non-police friends, police-related subjects were conspicuously avoided.

Theme 2: Experience. The theme of experience in policing also helped to answered Research Question 1 in that the lived experiences of the retired police officer participants aided in their dealing with stress and occupational burnout. Police employees' experiences help to address and possibly mitigate the psychological trauma, stress, and/or subsequent mental health issues sustained during the course of work in the police and emergency services sector (Patterson et al., 2014).

Stogner et al. (2020) expressed that cumulative events on officer stress, mental health, resiliency, and misconduct inures insight from experience including reactions to the HIV epidemic that occurred over two decades earlier than the terrorist attacks of September 11, 2001, which served as significant stressors for officers and deepened the organizational and overall stress associated with the profession.

In citing experience, Teddy recalled:

> My experience has taught me to focus primarily on procedures for utilizing therapeutic services, I found that "experience was the best teacher." It's like that philosopher said, "What doesn't kill you make you stronger." Also, the rookies have a more difficult time managing stress!

In 1996, the NYPD, along with the City Council and the private sector, established the Police Organization Providing Peer Assistance (POPPA). The New York City Department of Investigation (2019) publication stated:

> POPPA has become one of the most used support resources. It is a volunteer police support network committed to providing a confidential, safe, and supportive environment for police officers and retirees. Operating 24/7, POPPA assists current and retired officers in coping with stress related to their personal lives, and/or related to the law enforcement profession. POPPA focuses on preventing and reducing PTSD, intimate relationship problems, substance abuse, and suicide. (p. 15)

Younger police officers might be more inclined not to participate at first, but regarding these younger officers availing themselves of these services, Teddy further stated, "Most senior officers, including myself, tended to endure the stress and move on pretty much. Where junior officers attempted to deal with stress and when they had a tough time managing stress, reached out for help and services." Jan further explained how experience aided her in coping with stress:

> As you experience stress, deal with it. Talk about your experience, and if you are experiencing after effects or symptoms, don't wait until it boils over, and don't take it home. Initially, I sought medical assistance to be assessed mentally and physically. Then I found that being transparent and reaching out to my peers and family for support helped a lot. Experience serves to educate you on what you're supposed to do when you are adversely affected by stress. The more experience

> you have, the better your chances of survival. In retirement, I am still self-monitoring to be alert to these signs.

Participants Steve and Bill explained the theme of experience helps reduce stress because experienced officers know how to manage situations. Participant Steve explained:

> Experience has enabled me to more open and discuss my stressors and pitfalls associated with police work and exploring any past and current difficulties faced by me. As I experienced stress, I addressed it. Initially, I was reluctant to seek help, but I availed myself of, among many resources, employee assistance programs, and exercised, maintained a healthy lifestyle, and wore my vest! With 35 years' experience, I found that knowing yourself and what affects you the most (recognize your triggers), [I] found ways I love to relax, relying on my friends and on a support group, and seeking professional help—You're Not Alone. In my retirement, I often speak to groups relating my experience(s) in the hope it will aid them in addressing stress in a proactive manner.

Marie further explained:

> I found that discussing my experience, in how I have handled stressful situations that I encountered during my patrol duties, helps. As I progressed in my career, I found it easier to open up and talk about my experiences and found that my fellow officers were there for me and extremely empathetic.

Participant Jimmy also confirmed the theme of experience as he particularized that:

> I felt that there was a difference in that senior officers and officers who are military veterans are better equipped to cope/handle stress than junior officers. Experience helps reduce stress as experienced officers know how to handle

> situations. An experienced officer, he has less stress in that situation because he is going in with a lot of knowledge as far as how the situation is going to [be] handled. My experience as a police officer taught me to successfully employ stress management techniques and lifestyle habits that are conducive to minimizing my psychological stress. In my career, I was usually calm in most high-stress situations.

Participant Tony found job experience aided him in coping with stress as follows:

> I found, through experience, that an effective way to manage stress was to learn to recognize it and address it as soon as possible. Unfortunately, the police mentality was to "suck it up" or "deal with it and move on." In my early years, it was more important to pay attention to what my peers thought of me than what I thought of myself.

In terms of experience and how it can be used to help younger officers, Steve communicated:

> Most senior officers tended not to address stress concerns, while junior officers tended to be affected and suffer[ed] more but sought help to manage their stress. Camaraderie is the key. But some officers still have trouble being open with their coworkers when they feel stress—or when they notice it in each other. A lot of young officers feel like people don't understand them. Even beyond the public, this can be a barrier between friends or family members. The job made me feel vulnerable. Car accidents particularly can be so gruesome. It makes you realize things like that can happen any time. Anytime my wife or kids are in a car, I'm worried. This kind of stress is something other officers will likely understand. A

> lot of young officers have trouble opening up to their coworkers and that it will help with the things you see on the job and how they impact you. Police departments should be honest in addressing burnout symptoms to better support the officers. If you see someone acting differently, say so, and ask them what's going on with them.

Participant Ray explained how stress is mitigated through the theme of experience:

> My experience has taught me to address specific stressors as they arise, as well as remembering how I have handled stressful situations that I have encountered during my patrol duties. In managing my stress that [I] inevitably experienced "on the job," I developed a lifestyle that included not eating high-calorie fast food, scheduling vacations and personal downtime, seeing a doctor regularly for checkups, reducing the amount of overtime, [and] keeping my civilian friends to help me get away from the job. When I socialized with police friends, I made a point not to talk about work on our downtime. Before the events of 9/11, I thought I had thought I had seen and experienced it all. Prior to that day, I had coped with stress by basically experiencing it, toughening up and moving on. In fact, when fellow police officers had a hard time coping, I was known as someone you could comfortably talk to and feel better. After 9/11, it became apparent that I needed employee assistance, and I contacted that resource and got effective, professional help. I was able to halt my downward spiral and successfully retire.

Participant Rob further touted the benefits of experience in coping with stress, stating:

> My experience has taught me not only to focus on job-related stress but focusing on relationship issues and the effects of police work on my home life [that] will

better equip me in managing my police stress. Ensuring I get enough sleep and limiting my consumption of caffeine and other unhealthy eating habits. Being conscious of my limits and only setting realistic goals. Setting aside time for exercise and leisure activities. Having a good attitude and finding the upside to whatever situation life might throw at you.

Anthony expounded on the benefits of time/experience declaring:

> I found that experience hardens and toughens you or breaks you, simple as that. Experienced police officers cope with some of the most stressful police work events, like killing someone while on duty, witnessing a fellow officer killed, being physically attacked, and seeing abused and battered kids, by initially surrounding themselves with fellow officers seeking comradery, support, and empathy. In the long term, you develop and maintain resiliency by confronting your fears or negative reactions, dealing with immediate effects, and preparing for future events.

Romy contrasted experienced officers' strategy in dealing with stress versus younger officers as follows:

> As I experience stress, I don't keep it bottled up. I manage it by talking about it. If the younger police officers or "rookies/newbies" do not effectively manage stress, they burnout quickly and leave. Generally, I found that if you manage stress by addressing it medically and psychologically, you increase your resilience. I also found that I coped best with the constant physical threats, lack of organizational support, and constant pressure by being open and sharing my experience and

feelings with fellow officers, especially rookies, and if needed, addressing my mental and physical well-being.

Theme 3: Physical Health. The importance of the theme of maintaining physical health in response to and to maintain resilience as a positive coping strategy was substantiated by all the participants. To effectively manage and cope with police stress, a myriad of programs to promote health, wellness, and safety have been employed. Those programs concentrate on fitness, nutrition, weight management, musculoskeletal conditioning, resilience to trauma, and so on (Acquadro Maran et al., 2019). As stated by (Kuhns et al., 2015) most programs concentrate on improving physical conditioning and health with police officers working on fitness, diet and exercise, and mental wellness, working on the ability to manage negative emotion through, for example, meditation.

John emphasized the role maintaining physical and mental health, as a successful coping strategy, when he stated:

> I employ proactive measures, such as resilience training, to prepare for the eventuality of stress and its outcomes, such as long-term mental and physical effects. In that case, in the reactive phase, attention to employee assistance programs and resources. In the post-event phase, a healthy diet, exercise in the pre- and post-stress scenarios. My career goal was to serve and protect the public, as I was sworn to do, and successfully retire with an unblemished record of service, and of healthy mind and body. As I said before, I experienced stress and did what I had to do to survive and stay healthy.

Teddy stated that the five most effective stress management techniques that officers use to help them successfully manage stress throughout their career are, “healthy

diet and lifestyle, peer group communication, down time to unwind, exercise." Jimmy candidly acknowledged:

> My experience as a police officer taught me to successfully employ stress management techniques and lifestyle habits that are conducive to minimizing my psychological stress. When you know something is getting to you, find a professional to talk to. Sometimes an issue needs more work than talking with friends or family can accomplish. I saw two psychologists, and it helped a lot. Our police department had a professional on staff to talk to, but when I was nervous about sharing things that are close to or affect my job, then I went through my doctor instead. My doctor referred me to an excellent psychologist covered under my health insurance. Therapy is so valuable and could be a wheel to set in motion even before you hit a breaking point. Officers have a lot of courage when it comes to physical violence. But that doesn't mean they are brave enough to admit they need help. On an emotional level, releasing pent-up emotions, managing hostile or negative feelings, meditating, prayer, and talking about it.

Tony concurred in stating:

> The healthy coping strategies that I employed (proactively) (exercise, sleep, eating healthy, family support, police support, prayer) were very effective. Honestly, I did, early in my career, in reaction to stress, employ unhealthy mechanisms (alcohol, tobacco, eating snack foods, caffeine, expressed anger, repressed anger). This led to health problems, low self-esteem, aggression to[ward] my wife and family as well aggression to my police partner. I continually self-monitored and self-regulated to be aware of and reduce negative

emotions, and other mental and physical indicators of stress. I then increased the use of effective coping strategies such as a healthy lifestyle. Talk about it, maintain a healthy and positive attitude, don't lose faith in people, exercise, take time off for yourself, take up a hobby.

Ray, in employing positive coping skills, offered:

> Positive coping skills help you tolerate, minimize, and deal with stressful situations in police work and life. Addressing and managing your stress well can help you feel better physically and psychologically, and it can impact your ability to perform your best and have a long, productive police career and retirement.

Rob employed this strategy, stating:

> In managing my stress, experience taught me the follow: taking the time to work out a plan to ensure there is a balance in my life, there's more to life than "the job." Ensuring I get enough sleep and limiting my consumption of caffeine and other unhealthy eating habits. Being conscious of my limits and only setting realistic goals. Setting aside time for exercise and leisure activities. Having a good attitude and finding the up side to whatever situation life might throw at you. It is also important to maintain physical, as well as mental, health in order to better prepare and weather future stressful events and your post-police (retirement) life.

Romy, in touting a proactive health-based strategy, including police department wellness programs, stated:

> I found, through the police department health program, that you can properly address stress by a healthy diet, exercise, and developing mental resiliency. You can reduce other problems due to stress such as heart disease, obesity, depression,

> etc. I successfully retired a healthy, well-balanced individual, attaining a master's degree, becoming an educator. I could not have successfully retired if I did not effectively confront the ever-present stress of policing.

Marie elaborated:

> Physical exercise is one of the most important preventative measures you can take against stress and burnout. Aerobic exercise reduces stress while also preparing you better for your job. Frequent exercise keeps you alert and helps you feel better about yourself. Good physical fitness also helps you heal faster after an injury; it's no fun being out of commission.

Research Question 2

What are the coping strategies and mechanisms, including organizational support, that retired New York City police officers utilized to deal with occupational stress?

Five themes emerged in association with Research Question 2 from the interview narratives of the respondents, revealing their perspectives on their lived experiences regarding the efficacy of coping strategies and mechanisms regarding coworker/work support, family support, meditation/mental health, personal time, and training. The interview questions helped to explore how the successful retired police officer participants managed the stress that was related to their past and present experiences with traumatic events that occurred during policing.

Through the data analysis of the participants' responses, five themes emerged comprising coworker/work support, family support, meditation/mental health, personal time, and training. The participant responses collectively acclaimed the efficacy of coworker/work support in promoting resilience and mitigating the negative effects of

police stress. Peer support, though, was identified by all the participants as a critical-incident, stress-management strategy.

In assessment studies of peer support, specific types of social support, that is, peer support, projected to buffer the psychological and physical health effects of trauma. Peer support, assessed as the content and context of communication, the ease of talking about traumatic experiences, constructive communications about work, moderate the effects of stress for stress affected police officers (Jones et al., 2022; Stephens & Long, 2000). Anderson et al. (2020) stated that "peer supported wellness services included varied training for critical incident stress debriefing, critical incident stress management, peer support, psychological first aid, and trauma risk management" (p. 2).

The valuable addition of work-support programs and initiatives in reducing police stress was universally iterated by the participants. The delivery modes and descriptions of work-supported wellness programs are stated on the NYPD (2022) website at the External Resources location:

Theme 4: Co-Worker/Work Support. This theme, as experienced by all of the participants, evoked memories of support from coworkers, referred to by the participants as coworkers, partners, peers, etc., and work, which was referred to by the participants as the job, supervisors, management, institution, etc.

John stated that he found a stress-coping practice helpful after experiencing a traumatic event in the field:

> After experiencing a traumatic event, I found that talking about it to my police family, especially my partner and senior officers, and sometimes to my home-family was "cathartic." Manage stress in a timely fashion, sometimes by venting

> to coworkers and seeking your sergeant's advice, [is] key to stress management. I tried to address a situation or something that bothered me as soon as possible. Sooner or later, you are going to think or obsess about it and, maybe, relive it.

Teddy also found that:

> The senior officers encouraged open communication, reminding younger officers that it is okay to seek help when you experience a stressful event, are feeling overwhelmed, or are feeling the job isn't for you. Yet, most senior officers, including myself, tended to endure the stress and move on pretty much. Where junior officers attempted to deal with stress, and when they had a tough time managing stress, reached out for help and services to the job, which I found very responsive and helpful. Certainly, talking about it (venting) was invaluable. I sometimes found myself, for fear of embarrassment, not doing so. I quickly found that keeping my feelings to myself only made things worse. Stress [is] accumulative, It's like you are a balloon filling with air. Some people can take more air than others, but all balloons will eventually pop if they don't find a way to let air out and relieve the stress. Some officers will struggle to the point of just giving up without ever talking to a coworker or seeking therapeutic services offered by the job.

Jan, in assessing work support, stated:

> The biggest stressor for a lot of police officers is the work environment, oddly enough. It's the politics, poor supervision, things coming down from administration that don't make sense, and so on. Many police officers can't deal with the politics or the public and the work-related stress. Many officers expect to

> feel stress on the street but facing it in the department can be overwhelming. You have the normal problems any organization might have, like favoritism, or bad managers, but on top of that, you also have restrictions that are confusing and sometimes unreasonable.
>
> When I began my career, my post-traumatic strategy was to keep my feelings to myself and move on. Eventually, I became withdrawn, then angry, and so, fortunately, I sought help and learned coping mechanisms, such as speaking about the incident, helped a lot. I successfully dealt with the inherent stress associated with policing by taking advantage of employee assistance programs and interventions, which enabled me to function with a clear mind and healthy body, thus enabling me in achieving my career goals.

Interventions by organizations to ease police work and emotional stresses are effective in thwarting familial disharmony and mental fatigue in police officers (Hall et al., 2010).

Steve extolled the value of seeking coworker support, but he admitted that his failure to seek work support ultimately affected his health and well-being, regretfully, stated:

> During my 35-year career, I experienced many stressful occurrences and situations, which negatively affected my mental and physical health, and as I said before, I just spoke to and confided in my partner and peers and thought that was enough. After the events of 9/11, I took the same reaction and approach and thought I was okay, unaware of how that event and the cumulative effects of previous incidents and encounters affected me. Just before retirement, I was evaluated physically and mentally and learned that I had coronary heart disease

and PTSD. If I would have taken advantage of the employee assistance programs and interventions, I probably would not have developed these illnesses.

Participant Hector stated:

> I tried to keep everything in perspective. One of the first stressors that I found hard to deal with was shift changes. Then my job went to steady tours, that helped a lot. I had a great partner and friend, who was a person I came to know and trust. Maintaining good physical and mental health also went a long way in reacting to and managing job-related stress.

Marie, in seeking help from coworkers and the job, stated:

> In reaction to over 20 years on patrol, I suffered from the cumulative effects of unchecked and unmanaged stress. Fortunately, before it was too late, I reached out to employee assistance and availed myself of a full mental and physical evaluation and was given a strategy to recognize and address stress as it occurred, which saved my life, into a healthy retirement. As I progressed in my career, I found it easier to open up and talk about my experiences and found that my fellow officers were there for me and extremely empathetic.

Participant Ray benefited from work support when he availed himself of intervention, touting its benefits, stating:

> My law enforcement career opened my eyes to the inability of many people to cope with everyday life. In many ways, it has made me more tolerable, and in other ways, it has made me more intolerable. [It] kept things in perspective and made me realize how lucky I am. I became more sensitive in certain situations. Generally, through intervention, I was able to cope with stress more effectively,

> but it hardens you to things that others would find disagreeable or tragic. It made me more cynical. If anything, I was more tolerant of people because of my career in law enforcement. As far as coping, it prepared me to deal effectively with emotions, maintain discipline, integrity, and fairness and achieve my career goals.

Romy stated that support programs offered by the police department aided her in coping and managing the initial and long-term effects of police stress, leading to a productive retirement in the following ways:

> I successfully retired [as] a healthy well-balanced individual, attaining a master's degree, becoming an educator. I could not have successfully retired if I did not effectively confront the ever-present stress of policing. I managed my stress by taking advantage of services offered by the police department, which equipped, educated, and prepared me to deal and manage police stress and achieve my career goals.

Theme 5: Family Support. This theme encompasses the support emanating from parents, siblings, spouses, significant others, and children, and its function in developing strategies that are most effective for police officers as the officers cope with the stress commonly associated with policing, thus mitigating the negative outcomes associated with psychological, physiological, and behavioral complications occurring from police stress if not properly coped with throughout a police career. Eight participants' recollections cited familial support as a valuable addition in helping cope with emergent, inherent police stress. John, in recommending relying on family and relatives for support, stated:

> For me, releasing pent-up emotions, redirecting anger,\ and negative emotions, meditation, exercise, taking personal time, and interacting with family and friends was very effective as a coping mechanism. Through their understanding, love, and support, I was able to better cope with [the] negative effects of police stress. Speaking to family and friends gave me great relief and peace of mind and a valuable outlet for my frustrations and doubts.

Participant Steve elaborated on the benefits of family support stating:

> I found that knowing yourself and what affects you the most [recognizing your triggers] found ways I love to relax, relying on my family and friends as a support group to vent and seek moral support. I found that family and friends were not judgmental and tended to be more understanding of the difficulties and challenges I was facing in reacting to and dealing with police stress. They reassured me that I could always rely on them for comfort, aid in reassurance, and that I was not alone.

For example, participant Jan, in coping with stress when dealing with the most stressful aspects of police work and the role of family, stated: “Initially, I sought medical assistance to be assessed mentally and physically. Then I found that being transparent and reaching out to my peers and family for support helped a lot.” Hector iterated the benefits of family support when stating:

> My family was not afraid to talk about our feelings, and that communication is so important. My family, a good group of friends, or a community from church or volunteer projects, can be a strong pillar of support for you. Some officers only have friends on the force—it’s their whole world. I don’t think that’s healthy. In

my career, many times, I reached out to fellow officers, rallying and bonding together. Sometimes that sufficed, but in other instances, I found it important to spend more time and vent to and with family and friends. My career goal was "20 and out." I did [it] with the help of God, fellow officers, family and friends, and effectively dealing with stress before it occurred and after, I successful[ly] retired.

Participant Tony credited his spouse with helping him cope with police-related stress "outside of the job," offering:

> I credit my wife with unwavering support, particularly when I was in my most difficult circumstances, often verbally and mentally abusing her and the children. She was non-judgmental, patient, and extremely understanding, often just listening and providing an emotional outlet for me. My children, principally raised and nurtured by my wife, were ardent supporters and grew to be well-adjusted and successful in their own right. My wife was and is my "rock."

Participant Rob opined the coping benefits of family and off-duty activities as:

> I coped/dealt with the effects of stress on the job by spending a lot of time with my family, coaching my kids' soccer and softball team, and taking short vacations frequently. With coping, I became less suspicious of people and more trusting, in general. I was able to be more focused on my work and achieve my career goals. I'm not as emotional as I was before I became an officer. I learned to separate work stress from home stress. During my off-duty hours, I preferred to be away from people [with] the exception being participation in sports with people I approve of and small parties with those I chose. I believe that this job directly affected my personal relationships [including marriage].

Anthony further iterated the efficacy of the theme of family support regarding effectively managing police stress, explaining:

> Of course, my police family [fellow police officers] were important to me because I was taught, and feel, that my survival and the survival of my fellow police officers depended on our camaraderie, loyalty, and respect. However, my family [wife, children] were always more important than anything else, and I took the responsibility for their support and upbringing extremely seriously. Like my police family, my personal family depended on me every minute of every day, and I never let any of them down.

Theme 6: Meditation/Mental Health. Underscoring the utilization of a proactive strategy of recognition, assessment, and intervention, the participants universally iterated the mental health benefits that included increased mental well-being, increased effective coping strategies, and decreased maladaptive coping strategies. John, in stating how he proactively managed the stress that occurred in the field, advocated:

> Manag[ing] stress in a timely fashion is the key to stress management. I tried to address a situation or something that bothered me, psychologically, as soon as possible. If you do not recognize and address it, sooner rather than later, you are going to think about it or maybe obsess about it, and, maybe, relive it. I have seen fellow police officers, who did not address it by seeking psychological help, develop disorders, such as depression, anxiety, alcoholism, post-traumatic stress disorder, broken marriages, relationships etc. In some cases, resulting in physical health issues such as heart disease, etc.

John cited that some of the most effective stress management techniques that officers use to help themselves successfully manage stress throughout their career, as, "for me, releasing pent-up emotions, redirecting anger and negative emotions, meditation, exercise, taking personal time." Participant Teddy revealed:

> Seeking immediate help, including peer support [and] employee assistance, which may include psychological and medical assistance, is paramount. Many times, officers who are suffering the mental effects of stress and need psychological help fear that seeking help will unfairly stigmatize them as unfit to carry out the job. Additionally, they fear they will be ostracized and viewed as weak or not dependable. Hopefully, this view by fellow police officers has dissipated and officers will seek and avail themselves of effective interventions to deal with the ever-present stress and negative psychological effects of such.

Jan advocated the mental health benefits of addressing stress in a timely manner when she stated:

> When I was active, I learned the mental and physical warning signs of unattended stress, such as anger, fatigue, withdrawal, sleeplessness, overeating, self-diagnosing, and medicating, etc., and when these signs presented, I sought to address them in a timely manner, seeking the assistance of coworkers, supervisors, and interventions offered by the job. The mental benefits of coping strategies and mechanisms, [as] well as life-style modifications that I learned and incorporated into my daily routines were invaluable. I learned to engage in "quiet time" and meditation to ease negative thoughts and emotions. These strategies

improved my work, social and familial relationships, and, I believe, contributed to my overall well-being and career success into retirement.

Steve, as stated previously, had a long and successful career in the police department, serving 35 years; however, by not seeking and addressing stress in a timely and proactive manner, he suffered the accumulated mental and physical effects of unattended stress. He frankly stated:

> I did have a successful 35-year career achieving my career goals. Unfortunately, as I stated before, because I did not recognize and treat the long-term effects of stress, I was wounded mentally and physically. I developed diabetes, coronary heart disease, post-traumatic stress disorder [PTSD[, and depression. If I would have taken advantage of the employee assistance programs and interventions, I probably would not have developed these illnesses. Additionally, I withdrew, became angry, our marriage suffered, going through two separations. Fortunately, I did attend marriage counseling and anger management, thus salvaging my marriage and mental health.

Hector, in successfully managing mental stressors that occurred to him, stated:

> My initial strategy, learned early in my career, was to smoke tobacco, eating high-fat or high-sugar snack foods, [and] drink caffeine. Mental adverse reactions resulted in letting loose with angry outbursts, vulgarity, disrespect for my coworkers and citizens. In trying to bottle up or repress anger, it just got worse. When it resulted in negative job performance and began to affect my personal relationship, as well punitive action, I sought out help through intervention. Before it was too late, I learned that employing healthy coping mechanisms, i.e.,

talking about the experience, diet and exercise, etc. was a more effective strategy. Maintaining good physical and mental health also went a long way in reacting to and managing job-related stress [for] a more successful career and personal life.

Marie offered some stress-coping practices that she found helpful after experiencing a traumatic event in the field:

> After suffering the effects of 20 years of stress in policing, and after my partner was killed in the line of duty, I availed myself of employee assistance when it became apparent that I may have been developing a drinking problem. I volunteered to be placed into rehabilitation and availed myself of alcohol counseling. As a result, I am now retired, healthy, and on to a second career. Don't ignore your feeling or withdraw. Talk about it. [If you] begin to suffer physically or mentally, seek help sooner than later. Dealing with stress helped me be a more confident, positive, well-adjusted, happy, and healthy police officer, enabling me to enjoy a good police career and retirement.

Jimmy, in describing his encounters with and reaction to police-related stress, openly stated:

> To be honest, I employed healthy and unhealthy coping mechanisms [such as coworker/work support, religion, alcohol, repressed emotions, self-criticism, and other self-destructive behaviors]. I found that the unhealthy coping mechanisms of alcohol consumption and repressed emotions (act as if nothing is bothering me) just made it worse. My work and family and almost everyone around me were negatively affected. Fortunately, before it was too late, I reached out to employee relations, sought and received intervention and help in managing my job and field

stress. which included cynicism and suspiciousness, emotional detachment from various aspects of my daily life, and withdrawal. Moving forward, I employed strategies, such as wellness checks, communication with peers as well as mental health professionals, and a healthy lifestyle, which included diet and exercise.

Tony described some of the incidents and stressors encountered in the field that affected him, his reaction(s), and the coping mechanisms/strategies that he employed:

> As I experienced stressful situations, it provided me an opportunity to discuss my progress and adjustment to law enforcement with fellow police officer, supervisors, and family. It occurred to me that police officers that operate under stress well, manage it differently than officers who struggle with job stress, often resulting in early separation from the police service. You see, some things that are really beyond human understanding, like sex crimes; terrible crimes against children, and man's inhumanity to man, it can affect your perception of society, and I began to question my existence as a police officer, to the point of considering leaving the force. Fortunately, I confided in my partner and sergeant and was referred to mental health counseling, I also turned to my pastor. In addition to the psychological remedies I received, I realized that having faith or belief helps. Faith made me more accepting of things I can't control. And when terrible things are happening, and I see a world full of evil, I realize that it's not the end of things, and there's a brighter future. It also made me more accepting and resilient to my situation and what the future was to hold. No doubt, an officer that effectively deals with distress will be a healthier [mentally and physically],

well adjusted, happier, and more productive,[a] valued member of the police department, contributing to a successful police career.

Ray elaborated on the effect of mental stressors of policing on officers that he witnessed and offered these recapitulations:

> At the 9/11 terror attack, and the line-of-duty death of a fellow officer, I've personally experienced and witnessed people completely break down and be emotional. Thinking it was the normal response, most people, including myself, took it all in and moved on, not realizing the how it adversely affected our mentality. After intervention and psychological debriefing/evaluation, I realized it is because I, we, they were traumatized. I also learned we must make an assessment and obviously assess if this is someone relieving stress and trying to communicate or is this someone who is in crisis that we need to assess for other services? Moving forward with this knowledge, it was suggested that I intervene or have a supervisor do so, and provide intervention services. In my opinion, the intervention and providing of mental health interventions and periodic wellness checks were great strides in coping with inherent police stress.

Rob, in his management of mental stressors, offered these observations:

> I found that when senior officers managed stress, they did so personally and sometimes with the help of their peers, management, interventions, and support groups. Junior officers tended to go within and outside the department to peers, family, friends, and employee assistance resources to address and reduce the risk of other problems due to stress. It was important to consistently monitor and be alert to the warning signs of stress. Addressing these warning signs with

> interventions from peers, management, and healthcare professionals through employee assistance is vital to your psychological well-being. Stress is an ever-present fact of life in policing and beyond [that] you cannot self-correct or cure, it just is not enough.

Anthony, in the experience of and addressing the psychological impact of police stress and effective coping strategies, offered:

> Stop the bleeding or address the psychological impact of police stress as soon as possible by recognition, assessment, and response. If any negative feelings, emotions, thoughts or reactions, presented or persisted, I reached out to my partner, supervisor, police union, or my health services and were guided by them. To my view, senior officers, like myself, initially tended to self-manage or deal with stress by not reaching out and not communicating their emotions, negative feelings, etc., to any one person or entity; that's just not what most veteran/senior officers did. Contrast [that with] junior officers who connected with support people and groups, practiced stress reduction techniques such as diet and exercise. I learned to effectively deal with police stress by availing myself of help and assistance, intervention, which was offered by the police department employee assistance. This consisted of addressing stress as it emerged with effective coping strategies that I learned and utilized, in effect, developing my resiliency in response to certain future stress. Thus, I achieved my career goal of being promoted to detective, obtaining my bachelor's degree, and retiring [as] a healthy individual, adapting successfully to civilian life. If you effectively learn to deal

with stress, you will be better mentally and physically thus positively affecting your police career.

Romy posited that addressing police stress can have a positive effect on one's overall well-being, stating:

> If the younger police officers or "rookies/newbies" do not effectively manage police stress, they tend to burnout quickly and leave. Generally, I found that if you manage stress by proactively, addressing it medically and psychologically, you increase your resilience. Address and manage it as it occurs. Don't brood about it or allow it to fester; like a boiling pot, it will soon spill over and may cause more serious or long-term physical and psychological damage. I managed my stress by taking advantage of health programs and mental health services and interventions offered by the police department, which equipped, educated, and prepared me to deal and manage police stress and achieve my career goals. I found that I coped best with the constant physical and psychological threats, lack of organizational support, and constant pressure by being open and sharing my experience and feelings and, if needed, addressing my mental and physical well-being. Effectively, proactively dealing with police stress contributes to your mental and physical well-being and longevity, enabling you to enjoy a positive, well adjusted, and productive police career and retirement.

Theme 7: Personal Time. This theme involves conducting activities and having a life, personality, and mindset, outside of policing, The participants shared how it can help reduce negative outcomes of psychological, physiological, and behavioral problems over

an officer's career (McDowall & Lindsay, 2014). To effectively manage police stress John explained how his life outside policing aided him in coping with police stress:

> Okay, your cop life and private life are separate and distinct, starting with the people, atmosphere, conversation, the way you conduct yourself, and your mindset. You can't mix the two up or overlap the two. It's like you must have a complete makeover and wardrobe change when you transition from one to the other. But changing back and forth is easier said than done. No matter how hard you try some of your cop personality spills over to your civilian life. It can be the police argot, mannerisms, looking and assessing and judging people and their actions, like a cop or hypercritically. It's just hard to leave the cop personality at work; it just doesn't come off with the uniform. However, when I successfully shed my cop personality and mingled with and engaged in activities out of the police mindset, it helped me cope with the ever-present stress of my police life. I advise, as you experience stress, deal with it. Talk about your experience, and if you are experiencing after effects or symptoms, don't wait until it boils over; try to leave it at work with the job, and don't take it home with you to your family or friends.

Steve suggested the value of personal time and friends outside of policing in coping with stress when he stated:

> I found that knowing yourself and what affects you the most [recognize your triggers] found ways to unwind, vent, and decompress. I love to relax, think of anything other than the job, leave work at work, relying on my non-police friends and on a church support group, and seeking esteem and admiration from people in

> my private life. On your days off, you need to take a "mental vacation" from work. Some examples of habits that I can't seem to change are how I "combat park" my civilian car or how I must sit in a restaurant or other room facing the door. As I suggested before, talk to and connect with others on and off the job, connect with your community- or faith-based organizations, eat healthy, be healthy, avoid drugs and alcohol.

Relaxing leisure was found to be the strongest positive predictor of coping with stress, while social leisure and cultural leisure significantly predicted greater mental or physical health (Iwasaki et al., 2005). Hector, in iterating the benefits of interacting with people and resources outside of the job, posited:

> In my career, many times I reached out to fellow officers, rallying and bonding together. Sometimes that sufficed, but in other instances, I found it important to spend more time and vent to and with family and friends. I find that having a support system helps. Though it might be hard to explain, your family and friends and people outside of the job, it is vital that you maintain your support systems outside of the PD. People that care about you will sometimes notice your stress before you even will. My family was not afraid to talk about our feelings, and that communication is so important. My family, a good group of friends, or a community from church or volunteer projects, can be a strong pillar of support for you, often bringing you and supporting you through the tough times. Don't disregard the power of faith. Some officers only have friends on the force—it's their whole world. I don't think that's healthy. I loved the people I worked with;

they were wonderful, but I always had many friends that I could count on for a resource outside of it [work].

Marie stated the strategic coping value of balancing on- and off-duty time, social, and recreational activities, in the following statement:

> Reconcile work and home time; maintain an exercise regimen [with a] healthy diet limiting alcohol, caffeine, and other stimulants; connect with a supportive individual or group outside of work; take time off from work for yourself, family, and loved ones. I found this helped to relieve and cope with the accumulated stress suffered at work. Just getting away from the environment was the catalyst for effective coping, and when you return to work, you are reenergized and more resilient to manage the mentally and physical stressors that are sure to present.

During the interview, Jimmy also stated the benefits of communication and interaction with people and resources outside of the job, sharing:

> I talked to colleagues and friends/family outside of the police and related my experiences; I practiced meditation, yoga, stress, and reduction exercises [got] adequate sleep; got and bonded with a dog; took more time off from the job; travelled; and did seek counseling from my pastor, also getting help from employee assistance programs and interventions.

Participant Tony shared the value of extracurricular activity pursuits as an effective coping mechanism:

> Talk about it, maintain a healthy and cheerful outlook, don't lose faith in people, exercise, take time off for yourself, do volunteer work, take up a hobby. I started stamp collecting, cooking, volunteered in a soup kitchen and a homeless shelter,

became an extraordinary minister in my church. I also converted part of my basement into a gym with an elliptical trainer, taking mini-breaks to exercise and destress. No doubt an officer that effectively deals with distress will be a healthier [mentally and physically], well adjusted, happier and more productive, valued member of the police department, contributing to a successful police career and be better prepared to enter civilian life.

Regarding the theme of having another life and persona apart from policing, participant Ray suggested:

> It is important for officers to prepare themselves [for] retirement and re-entry into the civilian world. I did this by going back to college and pursuing a master's degree. I immersed myself in academic pursuits mingling with fellow students, expanding my social skills, knowledge, and credentials. Just being away from the police environment was an enlightening, invigorating experience. The incursion back into college life and the attainment of and prestige of an advanced degree also boosted my self-esteem and confidence, better preparing me for retirement and pursuits, plans and objectives, and opportunities in civilian life.

Participant Rob, when describing his interactions in dealing with the civilians in the community and private life, posited:

> My experience has taught me not only to focus on job-related stress but focusing on relationship issues and the effects of police work on my home life will better equip me in managing my police stress. I learned to separate work stress from home stress. During my off-duty hours, I preferred to be away from people [with] the exception being participation in sports with people I approve of, and small

parties with those I chose. I believe that this job directly affected my personal relationships [including marriage]. In practicing "community policing," I needed reinforcement to remind me that the majority of people out there are good, law-abiding people who know you are trying to make things safer and to be more open-minded and not rush to judgment. I got out in the community both in the job and off, talked and listened to people. Even when I was busy, I got out of my RMP [radio mounted patrol] occasionally and got to know people—it shaped and broadened my perspective. In managing the stress that occurs in the field experience taught me to take time to work out a plan to ensure there is a balance in my life; there's more to life than "the job." Personal and professional relationships and open communication with people is a great coping strategy to deal with, survive, and establish resiliency in encountering stressful situations and their aftermaths in police work.

Anthony explained the benefits of balancing his job and personal life interactions and responsibilities:

> To my view, senior officers, like myself, tend to self-manage or deal with stress by not reaching out and not communicating their emotions, negative feelings, etc. That's just not what veteran/senior officers did. Versus junior officers, who connected with support people and groups, practiced stress reduction, diet and exercise. As I progressed through my career, my strategy to address and cope with emerging stress was to balance job and family, [have] a good diet and exercise regimen, maintaining open communication and regular mental and physical assessments, addressing any emerging mental or physical conditions. As I

approached retirement, I felt I was better prepared to transition from my police life and identity to my civilian life and identity.

Romy further elaborated on the efficacy of a job versus personal life balance in effectively dealing with police stress:

> When encountering, experiencing, and dealing with the ever-present police stress, I learned to reach out and seek help and decompress as soon as possible after experiencing the event. Strike a healthy balance between work and non-work activities and relationships, maintain a healthy lifestyle and diet, exercise, maintain a positive attitude, talk about your problems and fears. Effectively dealing with police stress contributes to your mental and physical well-being and longevity, enabling you to enjoy a positive, well-adjusted, and productive police career into retirement.

Theme 8: Training. Police executives provide resources to ensure officer safety and physical fitness standards, such as firearms training and physical fitness, yet they do little to invest in the support of officers' mental wellness (Stanley et al., 2016). Resilience training programs typically contain components such as self-awareness, positive attitude, emotional management, and interpersonal skills (McCraty & Atkinson, 2012). Programs have been developed of the design of the resilience and wellness teams or P.I.T.S.TO.P./PitStop (personal skills, interaction, time out, sleep, thoughtful eating, on the move, and purpose), which monitor, evaluate, and appropriately respond to the evolving needs of officers throughout their careers (Wade, 2021).

Pertinent to this study was the importance of the training theme and its efficacy in mitigating and managing the initial and long-term insidious effects of stress that were

revealed by the participant interviews. The interview questions delved into how the participants effectively coped with stress throughout their police careers into retirement and civilian life. The importance of training was revealed in a statement by John, who stated:

> Throughout my career, I and many of my fellow officers experienced systemic officer stress, mental health issues, misconduct, and lack of organizational support. . . . I learned, through training, that repressing emotions, alcohol consumption, and not seeking professional medical help was counterproductive, perpetuating the debilitating behavior and effects of stress. The coping mechanisms that I learned, such as releasing pent-up emotions, managing hostile feelings, meditating, etc., were very effective in managing my stress, and I have utilized them up to this day.

Teddy elaborated on resilience and on the benefits of resilience training on police stress:

> When I began my career, going back to the police academy, the bulk of the training consisted of procedural and tactical training. To my recollection, there was no proactive or resilience training provided that could have prepared me for the inherent psychological stressors of police work.

The stigma of mental illness and obtaining professional help is a force in the law enforcement culture and it cannot be underestimated (IACP, 2014). McKoy (2011) found that officers are trained to ensure comrades' safety, but they are unprepared to personally identify or respond to trauma, mental illness, to include that created by extreme cases. Despite the health-related consequences of stressors, police officers hesitate to seek treatment (Gharibian, 2015). Weakness is disguised or not discussed because of the fear

of losing peer support or one's career (Larned, 2010). Non-law enforcement organizations recognize and seek mental health treatment for trauma and mental illness, law enforcement organizations, characteristically, do not (Roberts & Hyatt, 2019). Teddy elaborated:

> Psychological services aka "psych services" were available, but there was a stigma attached to that service, and from the moment you admitted you were "in need," your duty status was modified, your firearms were removed, and your personnel record was noted. Obviously, because of this label, there was, to say the least, a reluctance if not a refusal to seek help, even if warranted or needed. That was the prevalent mindset up to the events of 09/11. Then the police enacted much needed proactive measures such as resilience training to prepare for the eventuality of stress and its outcomes such as long-term mental and physical effects. In that case, in [the] initial and reactive phase, attention to employee assistance programs and resources, such as interventions and resilience training, were put in place, promoted, and encouraged. In addition to the stigma being removed, most of the personnel administering this service were our peers. Undoubtedly, dealing proactively and effectively with stress will increase job satisfaction, longevity, and quality of life.

Jan further commented on the genesis of peer-administered resilience training and its catalytic effect on members seeking assistance:

> An obvious reason for [the] recent spate of suicides and other mental health issues among police officers is the stigma associated with seeking assistance in addressing systemic police stress. The creation of internal peer-support-

> administered training programs was a step forward to positively address these serious, latent mental health issues affecting many police officers. It was an idea whose time had come, and it certainly had a positive impact on my career. I felt comfortable being transparent and reaching out to my peers for support and it helped a lot. I also used the training [to] reduce the risk of other problems and behaviors due to my stress such as withdrawal, anger, overeating, depression, etc. When I was active, I learned that when these signs presented, I sought to address them in a timely manner. In retirement, I am still self-monitoring to be alert to these signs. There's no way to be an effective law enforcement officer unless you continuously train, learn, and remember.

Marie metaphorically posited that training geared toward resilience and effective coping with stress was another "defensive weapon to arm us against stress," stating how it helped her navigate through successful police career into retirement in the following ways:

> Peer support is more than "shop talk"; rather, I found it key in demystifying my experience with mental health issues such as depression, anger, alcohol, and other negative coping mechanisms. It also helped me and many other police personnel in coming forward and contributed to removing the stigma of mental illness. Effectively dealing with stress can help your mind and body adapt [resilience]. Without it, your body might always be on high alert, which leads to serious health problems, sickness, reduced productivity, and burnout. Effectively dealing with stress improves your health, relationships, and quality of life and career in policing.

Romy further elucidated:

> I was comfortable with and had confidence and trusted in training offered by my peers in the police department. I was taught that if you manage stress by addressing it medically and psychologically, you increase your resilience, therefore you are better prepared to confront, deal with, and cope effectively with stress. I remember that you can spot senior officers who, for the most part, did not manage stress and did not trust the people [civilians, healthcare professionals] or services provided by the department and, as a result, they tended to keep to themselves, not display emotions or appear weak, were generally not physically fit. or did not maintain a healthy lifestyle. Where junior officers tended to seek help, communicating their reactions and emotions, and maintained a healthier lifestyle by diet and exercise.

Romy echoed the sentiment of her fellow interviewees, stating, "there were many advantages of the resilience training, in addition to reducing the adverse effects of stress; and resilience building, it improved my health and performance." In a historical context, the participant responses cited the modes of peer communication stated on the NYPD (2022) website at the Internal Resources location:

> **Employee Assistant Unit (EAU)**
>
> EAU peer support counselors, both uniform and civilian, officer 24/7 support to fellow members of the department. They accept third-party referrals and also provide support to family members, and retirees. They can also provide guidance on seeking external assistance too. (para. 1)

Chaplain's Unit

> NYPD's Chaplain's Unit provides spiritual help and guidance regardless of our member's faith or beliefs. (para. 2)

Police Organization Providing Peer Assistance (POPPA)

> POPPA is independent from the NYPD but supported by the department. POPPA consists of volunteer peers as well as professionals offering support to uniformed members and retirees. They are available 24/7. (para. 3)

These peer-support services provide opportunities for stress-affected officers to engage with fellow officers, sharing their stressful experiences in a supportive atmosphere. These peer-support officers provide services that increase resilience and wellness. The peers and the resources are available to affected officers from the outset of their careers, and they are well monitored, evaluated, and appropriately responded to as their needs evolve throughout their careers (Wade, 2021). As noted previously, the participants shared their experiences with stress and the benefits of communication as an effective coping strategy.

Communication was universally identified by the participants as an effective coping strategy; however, a common theme demonstrated by some of the participants, particularly senior officers, was their reluctance to communicate with anyone other than peer officers. It should be noted that junior officers were more likely to communicate more readily and with peers as well as people outside of the department. Historically, the police culture has been reluctant to seek and communicate their need for mental health support services from outside the police department due to issues of peer perception, confidentiality, confidence, and fear of stigmatization (Wheeler et al., 2018).

Consistent with extant literature, police officers have historically refrained from seeking professional mental health services; however, the participant interviews indicated that due to advancements in wellness initiatives and programs offered by police organizations and supported by police support groups, the trend is for officers to avail themselves of support (Karaffa & Koch, 2016).

The theme of experience and its role in reducing police stress emerged from analysis of participant responses. Amassing life experience helped the officers manage stress over a successful police career as it availed them of the opportunity to seek and get help using the available resources (Kyron et al., 2020).

The commonality of police stress being mitigated as one's police career progresses was posited by the participants' interview responses. The participants' accounts nearly all expressed experience as an effective coping mechanism to prepare, react, and respond to, as well as reduce, police stress, increase resilient coping, and increase coping strategies.

The participants openly shared how experiencing stress taught them to seek and utilize therapeutic services, and that experience prepared and strengthened them for the future. The participants' responses shared how experienced senior officers tended to endure the stress and its consequences and move on, where junior officers attempted to deal proactively with stress, and when they had a difficult time managing stress, they reached out for help and the wellness services. Experiencing stressful events was expressed by participants as a coping mechanism to effectively confront fears, deal the immediate effects such as negative reactions, and prepare for eventual stressful events. Some described experience as "hands -on training" for stress. The participants cited some

of the most effective remedies were initially surrounding themselves with peers to comradery, support, and empathy. In the long term, individuals develop and maintain resiliency by confronting their fears or negative reactions, dealing with the immediate effects and preparing for future events.

The participants' responses cited an additional positive consequence of experience with stress as building confidence and self-esteem. Confidence affects one's ability to function in stressful situations and, conversely, stressful situations affect confidence (Goette et al., 2015). The theme of experience was also posited by the participants to influence job confidence over time. McCarty and Lawrence (2106) stated that,

> With high self-esteem people are relatively immune to some stresses. Generally, a high level of self-esteem is related to the ability to cope constructively with frustrations and threats, in general, an increased emphasis on professionalism can contribute to police officers' self-esteem. (p. 12)

The use of positive coping behaviors such as resilience, seeking peer support or approval is associated with fewer symptoms of distress (Webster, 2013). European scientists found how stress actually affects our degree of confidence. They believed stress can even be a cause of social inequality, rather than just a consequence of it (Allison et al., 2019).

The theme of experience was further revealed by the participant interviewees as they discussed the efficacy of peer group discussions in which they were encouraged to discuss their common experiences. They reflected on the positive effects as being cathartic, educational, thought provoking, enlightening, and therapeutic. Role playing

was also effective in sharing and gaining experience to help prepare for the police officers for the innate police situational stress.

Ma et al. (2015) cited the association between shift work, assignments, days-off, and police stress. Wirth et al. (2017) found that stress can be associated with physical symptoms such as circadian rhythm manifesting in sleep abnormalities and hormone secretion. Specifically, a stressor in police work can be the monotonous work or assignments such as foot patrol, guarding prisoners, having a fixed post, etc.

Further relating to the theme of experience, the participants found that a change within their precinct assignment, title, promotion, location, or work shift was effective in coping with stress. Several of the participants mentioned that when the NYPD went to steady tours or shifts, it was a great stride in normalizing their work and family life and thus relieved the inherent stress associated with rotating shifts.

Police officers experience potentially traumatic incidents and extreme stress over the course of their careers (Papazoglou & Tuttle, 2018). Furthermore, Rudofossi (2009), a police psychologist with the NYPD, estimated that police officers might be exposed to at least 900 potentially traumatic incidents over the course of their careers. However, experience can effectively help the officers manage stress over their successful police careers (Dingman, 2020).

The participant interviews revealed some experiences with stress that led to negative emotional coping strategies and increased the risk of police misconduct such as excessive force, misplaced anger, and negative relations with coworkers, friends, and family. Agnew's general strain theory provides a construct between officer strain and negative emotions such as anger, depression, and burnout (Bishopp et al., 2019).

Physical health universally emerged from the data analysis of the participants' responses as an effective coping strategy when responding to and managing police stress. Each participant interviewed called attention to good physical health in promoting resilience to diminishing outcomes of physiological and behavioral problems. The findings from investigations on the impact of physical and wellness programs have shown a decrease in the level of perceived stress, increases in the level of positive emotions, the ability to successfully cope with police related stress, and improved mental health (Anshel et al., 2013; Chu et al., 2014; Watanabe et al., 2016). The primary mode expressed by the participants in effectively managing stress by developing resilience was through a physical exercise regimen. It appears from the participant responses and the extant literature that cardiorespiratory fitness moderates the correlation between occupational stress, cardiovascular risk, and mental health (Fucigna, 2019; Schilling et al., 2019).

Organizational support, education, and resource allocation in making employees physically and psychologically more resilient against stress are therefore two major public health concerns (Schilling et al., 2019). In a study by Gerber et al. (2014), police officers who maintained good physical fitness revealed increased mental health and reported good sleep, contrasted by poor sleepers who revealed decreased mental health outcomes. Physical fitness and good sleep function as stress resilience resources among stress affected police officers. Manifold programs including stress management, sleep hygiene, and physical fitness are essential components of organizational health and wellness initiatives (Meyer et al., 2018). In summary, the participants universally

acclaimed that attention tot heir physical well-being in the police profession improved their sleep quality, productivity, and psychological well-being.

FINEST CARE

The FINEST CARE program at New York-Presbyterian offers uniformed members of service access to free, confidential mental health services. The program allows officers to speak with a psychologist and psychiatrist within our expansive network of clinicians. FINEST CARE is available for all kinds of emotional challenges, and all uniformed members of service who are experiencing challenges are encouraged to call.

With this confidential no-cost service, our clinicians can offer:

24-hour telephone-based counseling services

Comprehensive evaluation and mental health assessments

Medication management and psychotherapy services

Counseling referral services. (para. 1)

NYC Well

NYC Well provides 24/7 support via phone, text, and computer chat in 200+ languages to provide support people in crisis. (para. 2)

Crisis Text Line

Crisis Text Line is independent of the NYPD offering crisis counseling services via text messaging. Their volunteers have exchanged more than 100 million messages to support people in crisis. (para. 3)

National Suicide Prevention Lifeline

The lifeline provides 24/7 support for people in distress, prevention, and crisis resources for anyone in crisis. (para. 5)

American Foundation for Suicide Prevention

Know the suicide risk factors and warning signs as well as other important information by visiting their site. (para. 6)

National Alliance on Mental Illness

NAMI is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. (para 7)

The participants consistently stressed that if police stress is not effectively addressed/managed, it might lead to negative outcomes, such as police misconduct, and it validates the beneficial impact that police peer support programs can have on reducing stress and preventing misconduct. The supportive data from this study's interviews and the extant data suggests that organizational leaders and police personnel believe peer support wellness programs, if implemented properly, can improve officer wellness, and decrease the likelihood of officers engaging in misconduct (LeFort, 2020).

The theme of family support emerged from data analysis of the participant responses as effective in reducing stress and in increasing resilience in affected police officers. The participants unanimously endorsed family as a significant resource in addressing insidious police stress.

The Roberts et al. (2013) study examined associations between officers' job stressors and spousal relationships, citing that if stress is not addressed, it can have a

deleterious effect on the marriage relationship and family. The interviews with the participants emphasized the initiatives, coping skills, and strategies their spouses effectively employed to maintain their relationships and support their careers. The participant discussions revealed communication, transparency, quality time, and intimacy were effective coping skills to deal with systemic police stress and maintain harmony between spouses and within the family (Dinsmore, 2013).

The participants working in varied patrol assignments were able to reflect on stress management strategies they utilized throughout their careers. One, in his role as a police recruit trainer, discussed with recruits the utility of social interaction with family, friends, and other non-law enforcement acquaintances in effectively addressing the job stress they were likely to encounter. Another participant posited how he successfully dealt with stress by coping as he regularly reminded himself that relationships (spouse, family issues) and the decisions surrounding issues needed to be dealt with in non-law enforcement ways and settings. The participants also found it helpful to balance job and family responsibilities, finding that coping with the effects of stress on the job by spending time with family, coaching their kids' soccer and softball teams, and taking short vacations frequently were effective because they were able to decompress and maintain accord in their marriages. In general, they were more stable, able to be more focused on work, and achieve their career goals. Ahmad and Islam (2019) supported that work and family imbalance impact the satisfaction of police officers.

Mutually, the interviewees' responses demonstrated their families' prominent supportive role in rallying to the police officers' aid in effectively reducing systemic police stress and inherent after effects. This is noteworthy because Karaffa et al. (2015)

posited that police work is a catalyst for distinctive marital discord and possible adversarial encounters, relationships, and outcomes. Manifold factors can contribute to strife in police officers' marriages, including varying shifts and schedules and blurred lines between work and mental instability among officers. When police-related stress changes into the familial realm, it can have a negative effect on family behavioral dynamics and long-term effects on family relationships (Karaffa et al., 2015).

Tuttle et al. (2018) found that police stressors were associated with such significantly affected marital harmony and stability. Negative social and emotional outcomes of work-related stress result in abnormal emotions and relations within law enforcement marriages (Telisak, 2019). These outcomes can serve as a catalyst for negative marital relationships and thus validate an emotional process by which police stress and can adversely impact marriage (Roberts & Levenson, 2001). At this writing, the literature on the effects of stress on spousal relationships is developing, however, gaps remain in the existing literature (Telisak, 2019).

This theme of meditation/mental health emerged from the data analysis of the participant responses and prevalent in the extant literature indicates that police officers benefit from interventions that address work-related psychological stress and possible prospective psychological disorders, if these interventions are ongoing (Lees et al., 2019). Utilizing a proactive strategy of recognition, assessment, and intervention, the participants generally cited a myriad of mental health benefits that included increased mental well-being, increased effective coping strategies, and decreased maladaptive coping strategies.

The participants shared how the access to, and utilization of wellness programs underscored the likelihood of increased resilience (Craig, 2017). They candidly revealed how their exposures could have resulted in a variety of adverse and debilitating mental reactions including PTSD, acute and long-term depressive disorders, and anxiety disorders.

The participants' responses indicated frustration with their organizations' inability to effectively address police stress arising from involvement in critical incidents and their associated inability to deliver effective programs or solutions in their wellness programs and initiatives. The interviewees' responses indicated that if they were suffering the mental effects of stress and needed psychological help that the fear of being unfairly stigmatized as mentally unfit to carry out the job, and many other negative perceptions, dissuaded them from seeking much needed services. Additionally, they feared they would be ostracized and viewed as weak or not dependable. However, some of the participants felt that their organizations were initiating and making strides in promoting, destigmatizing wellness initiatives programs, and that this latent view by fellow police officers would dissipate, allowing officers to seek and avail themselves of effective interventions to deal with the ever-present stress and negative psychological effects of such.

In addition to the destigmatizing-seeking intervention, initiatives by organizations to foster accessibility, sanction, and thus increase enrollment in wellness programs have included peer counselors in their wellness program staffing. Undoubtedly, dealing proactively and effectively with stress will increase job satisfaction, longevity, and quality of life. According to some recent studies, the rates of PTSD among police officers

may be lessening, attributing to the positive effect of resilience and wellness training offered and administered by policing organizations that prepare the officers for their careers and beyond (Regehr et al., 2021).

The theme of personal time emerged from data analysis of the participants' common responses as having friends, acquaintances, and behaviors outside of police work, in the near term, as a stress coping technique, and in the long term, to prepare themselves for transition from police life to retirement and civilian life. Eleven of the participants cited the significance of the theme of having a life, personality, and mindset separate from policing. The benefits of these restoration activities extended beyond their off-duty time and fortified resiliency in dealing with future stressful events and encounters (Hartig et al., 2013).

The participants endorsed activities outside of work, such as meditation, exercise, taking personal time, and interacting with family, as effective stress-coping mechanisms. With their family's time, love, and support, they were able to better cope with the negative effects of police stress, being comfortable in a setting outside of policing. Speaking to family afforded great relief and peace of mind and a valuable outlet for the participants when expressing frustrations and doubts.

The participants advocated social interaction with family and friends outside of law enforcement as a positive coping mechanism to reduce police stress. In managing stress, the participants credited experience for knowing how to take the time to work out a plan to ensure they had a work-life balance, and to understand that here is more to life than the job.

The participants shared that addressing stress proactively, with support systems inside and outside of the police department, to address any specific stressors as they occurred, prepared them to transition into civilian life and retirement. The participants further elucidated that outside support systems were predominantly effective, finding it easier to explain tribulations to family and friends, and the utility of maintaining support systems outside of policing. One participant stated that people that care about someone will notice the stress before that person even will.

The positive effects of family support were further clarified by the participants by sharing that family was receptive and non-judgmental in talking about feelings, and that open communication, as a positive coping strategy, is vital when addressing emerging police stress. The participants felt a good group of friends, or community and faith groups, can be strong pillars of support. Engaging in volunteer projects and donating time in assistance of those in need were also positive coping strategies. Many participants stated that officers only had friends on the police force, and that the police force was their whole world, which they deemed as unhealthy and it limited wellness resources and restricted personal growth. The police officers participants loved the people they worked with; they were wonderful, but they recommended maintaining friends and resources outside of policing.

The participants responses reflected on positively coping with the effects of stress on the job by embracing a hobby, coaching, or partaking in sports or other leisure activities. In those realms, they assumed other roles, identities, or egos and became a "Coach Jones" or a carpenter, mechanic, painter, teacher, mentor, etc. Interacting within these venues, activities, and roles, they became more self-confident, assured, less

suspicious of people, and more trusting. Ultimately, building a police work-life balance enabled the participants to react to and positively cope with police stress, enabling them to be more focused on their work and achieve career and retirement goals.

Training emerged from the data analysis of the participants' responses as a both a proactive and reactive measure to prepare and increase the resilience the officers for the eventual onset of stress that would be brought about by policing. Training helped the participants manage stress aftermaths such as long-term mental and physical effects.

The role of training in reducing police stress and supporting officers' mental wellness cannot be overstated. Particularly, the efficacy of resilience training programs has been demonstrated to have a beneficial impact on occupational stress, job satisfaction, and psychological well-being (Chitra & Karunanidhi, 2021). Specifically, in the pre- and post-phase, attention was given to training programs, interventions, and resources.

The participants cited the efficacy of utilizing peer officers as trainers because they can assist police officers with post-disaster-related stress. Stress-affected officers who are usually unwilling to admit personal problems or stress-related symptoms may be more receptive to discuss such issues with trained volunteer peers. The peer-assisted response to help affected officers were used to develop future programs that were needed to address the long-term needs of NYPD officers (Piotrkowski & Telesco, 2011). Peer-assisted training emanates, largely, from fellow officers, who speak from experience and speak the same language (police jargon) to great effect. As one participant stated, "Bottom line is you are with friends, and it is an atmosphere conducive to learning and wellness."

The importance of training was revealed by the participants who eventually experienced stress, mental health issues, misconduct, and lack of organizational support. They learned, through training, that negative coping strategies and not seeking professional medical help, was counterproductive, propagating debilitating behavior and the effects of stress. They learned and utilized positive coping mechanisms that were very effective in managing stress in the short and long term.

The participants valued training as a valuable addition in their arsenal of effective coping mechanisms. The various mode(s) of stress and resilience training were infographics, animations, group discussions, role playing, lectures, and videos. Reality-based training using archived incidents was extremely effective. Group discussions where the participants were encouraged to discuss their experiences were cathartic, enlightening, and therapeutic. Role playing enabled them to experience and prepare for stressful encounters. The participants touted the benefits of training in assisting them to "survive and stay healthy" and remember that "practice makes perfect." Illustrative of effective training is simulation training that is administered in police academies to recruits and in-service training that are administered by peer officers (Webster, 2013).

The literature supports that training in physicality and wellness positively affects stress and increases well-being. The participants garnered mental health benefits and learned positive and assimilated positive coping strategies, while divesting themselves of negative coping strategies. Acquadro Maran (2018) stated that wellness training appears to effectively reduce the risk of the negative mental and physical effects of continuous exposure to distress.

Summary

The purpose of this qualitative study was to develop a deeper understanding of effective stress coping strategies that were utilized by police officers who had retired successfully from policing. A qualitative phenomenological approach was used to elicit the coping strategies used by veteran (retired) NYPD police officers with 20 years of active-duty law enforcement. Data were gathered for this study through qualitative multiple case study interviews with retired police officers. Themes on effectively managing police stress were developed from the data gathered from the answers to the interview questions. In this study, an evaluation of evidence and analysis of the emerging themes was established based on triangulation of the participant responses. In addition, triangulation of the themes that emerged through participant interviews was compared to previous literature (Creswell, 2014). Through data analysis involving the Dedoose software and triangulation with transcribed notes, eight themes were identified. Interviewees provided many examples of how the themes helped them manage stress throughout their policing career.

Agnew's (1985, 1992) general strain theory, with origins in Durkheim's (1893, 1969) anomie, was used to guide the analysis of the themes discovered regarding effectively managing police stress over a successful policing career. The use of coping styles by police emerged from Agnew's general strain theory. Merton (1978) used anomie to develop a strain theory specific to work satisfaction and trauma, implying that individuals are in anomie due to an emphasis on success and the lack of a legitimate means to achieve such success. Merton posited that it is the adjustments by group members (e.g., police officers) that lead to high anomic levels and suicide ideation.

It was further demonstrated that this study contributed to the discernment of Agnew's (1985, 1992) strain theory in that the salient themes emerging from the analysis in this study played a prominent role in mitigating the strain linked with the general strain theory and its association with the stress that occurred from negative encounters experienced by the participants (Bishopp et al., 2019). The themes were consistent with and succinctly responded to the two research questions that focused the interviews. The eight themes identified in the data analysis were paralleled with research on general strain theory to garner further discernment into the key conclusions of this present study. Additionally, the participant responses in this study further developed Agnew's general strain theory in that the responses provided a construct between officer strain and negative reactions and emotions such as anger, depression, and burnout (Bishopp et al., 2019).

Chapter 4 presented an informed, literary, unabashed, factual discussion of the participant iterations resulting in key findings on effectively managing police stress throughout a successful policing career. Through the participant responses eight prominent themes emerged: (a) communication, (b) experience, (c) physical health, (d) coworker/work support, (e) family support, (f) meditation/mental health, (g) personal time, and (h) training. In addition, triangulation of the themes that emerged through the participant interviews was compared to the existing literature (Archibald, 2016). From the interview responses and the extant literature, it is apparent that dealing proactively and effectively with stress will increase job satisfaction, longevity, and quality of life.

Chapter 5: Discussion

Introduction

The purpose of this qualitative study was to examine the lived experiences of 12 retired police officers from the NYPD. The respondents comprised officers whose time in service ranged from 20 to 35 years. These individuals were chosen for participation over active-duty personnel to better understand what specifically contributed to their long careers while they may have potentially experienced burnout, stress, and a lack of perceived organizational support. Chapter 4 presented an analysis of the interview data, and participants revealed their individual job demands, roles performed, and lack of perceived organizational support, which may or may not have inhibited them from seeking out organizational resources for these concerns. Chapter 5 includes with the conclusions and implications of this current study, and recommendations are given.

Implications of Findings

The purpose of this qualitative methodology and phenomenological research design was to investigate the impressions and lived experiences of stress, burnout, and perceived organizational support that influenced the behavior of 12 retired NYPD police officers. Insofar as the lived experiences and perceptions of occupational, operational, organizational, stress, and burnout, the retired officers voiced their opinions to inform active officers about coping mechanisms. Data collection approaches for this study included, specifically, a series of open-ended questions conducted through semi-structured interviews via telephone conversations.

Coinciding with Clark (2006), Adams and Manen's (2008) phenomenological research explored the proficiency of individuals about themselves under certain working conditions to understand the behavior specific to the group being studied. Creswell (2009) advanced the idea that an individual's lived experiences and perceptions to generate overall useful information. The samples of participants for this study was generated through a purposive sampling strategy. Data collection through interviews continued until no new information emerged.

The specific data analysis process utilized qualitative computer software to categorize and code phrases, words, and detailed explanations. As recommended by Creswell (2009), a qualitative approach should be utilized to obtain descriptions of a specific phenomenon and using a phenomenological design provides better insight into the viewpoints of the participants.

Channuwong (2009) theorized that absenteeism related to illness and stress costs large organizations billions of dollars every year. Information and literature was examined regarding the lack of perceived organizational support in the NYPD and how the police subculture affects an officers' inclination or reluctance to utilize mental health services for stress-related events when actively serving. This study may contain worthwhile information for officers who experience greater incidences of stress.

Creswell et al. (2007) advanced the fact that qualitative analysis may not generate quantifiable results, but instead, it may produce personal opinions, judgments, and trends that affect behavior. As such, this study utilized the flexibility afforded by qualitative methodology as it allowed for ideal open-ended questions in a semi-structured interview fashion. An advantage of qualitative methodology over quantitative methodology is its

usefulness when researching complex subjects such as this current topic. According to Creswell (2009), semi-structured interviews with open-ended questions can engender new knowledge from small samples of the population. A disadvantage of such methodology identified by Morales-Adams (2007) is the inability to analyze qualitative data arithmetically, rather than managing one's interpretations.

Limitations

Limitations to this study were relatively common for some qualitative social science research, which is that the specific results were not generalizable because of the small sample size and the subjective nature of the data collection (Durand & Chantler, 2014). In total, 12 retired police officers participated in this study and, hence, the results are not being generalizable to the population of police agencies regionally, and certainly not nationally.

This current study was contingent upon the idea that interviewees would be honest when the retired police officers responded and that their answers would not be wrought with only socially acceptable responses. This current study did not acclimatize for stressors that police officers may have experienced outside of work-related stress during their time in service. Finally, there was insufficient funding available at the doctoral level for a larger study on police stress, burnout, and perceived organizational support.

Wuestewald and Steinheider (2006) speculated that crafting a law enforcement environment where leaders can recognize external and internal problems and react to them in a timely manner is a challenge for leadership. The ability of police leaders to identify the negative aspects of police subculture influencing officers' performance and

health, according to Wuestewald and Steinheider (2006), is important to the overall organizational well-being. Frontline leaders constantly confront problems resulting from internal and external stress that affects their officers. Violanti (2007) described productivity and performance as indicators of organizational health. As such, this study may be important to leadership as its focus on the hindering factors related to a subculture and mental health options.

Recommendations

This qualitative phenomenological study was an exploration of the lived experiences of 12 retired police officers from the NYPD who were previously employed in the rank of police officer or detective. Perhaps not so evident was the idea that retired officers were chosen for participation rather than active-duty officers to better understand what contributed to their long careers while experiencing stress, burnout, and lack of perceived organizational support. The idea was to allow for a delivery of candid responses devoid of fear of reprisals or job insecurity for their participation in the study.

As stated in Chapter 1, the research topic is timely, considering nationwide challenges between police and communities. Despite research from Berte (1989) analyzing police code, police subculture, and leadership styles, emergent research on perceived organizational support in large or small police organizations is deficient. Coping mechanisms and strategies for retired police officers separated from their departments and excluded from the subculture should be examined by future researchers. This qualitative phenomenological research study should be replicated to explore the lived experiences, beliefs, and behaviors that influence stress in police officers in an effort to explore differences in officers by agency, gender, ethnicity, age, education,

length of service, and other demographic factors. It should be replicated in other areas of the country, eventually including a much larger sample size of law enforcement officers.

In addition, with police agencies becoming increasingly diverse, a sample should be maintained, including a representative number from various genders and different ethnicities. A quantitative study may also be presented using surveys as instruments for analysis. A large sample of retired law enforcement officers could be selected on either a national or regional basis. The survey should be designed to ask participants questions regarding demographics, experiences with stress, leadership, support, and the existence of stress intervention services in the workplace.

A pilot study should be undertaken first, and the reliability and validity of the survey should be carefully tested and determined. The interview results could then be used to test for differences in experiences by gender, ethnicity, age, rank, and other demographic variables.

Conclusion

This qualitative study was conducted to help uncover how retired police officers with successful police careers effectively managed stress throughout their time working. The challenge associated with this study is that police officers are exposed to a significant amount of stress and this places officers at a higher risk of health problems and aggression (Hakan Can & Hendy, 2014). The problem of police stress also originates as some of the most common stress coping strategies for police stressors are not always associated with outcome improvement (Menard & Arter, 2014).

The problem of police stress was examined through the lens of the general strain theory (Menard & Arter, 2013). Numerous influences to general strain theory are

provided through this study. As such, the theory involves the loss of positively viewed stimuli, goals that are missed, and exposure to negative stimuli that results in strain (Yun & Lee, 2015). Contributions to this theory included validation of strain associated with police officers experiencing the loss of opportunity due to problems associated with stress, the loss of ability to control emotions, and loss of good health due to work-related stress.

Additional influences include validation of strain through the loss of goals as a result of work-related internal politics and personal injury. In terms of exposure to negative stimuli, this study contributed to the theory through validating the strain associated with veteran police officers with a 20+ year exposure to some of the most dire incidents known to humankind. The retired police officers interviewed in this study had experienced loss of life, exposure to traumatic events in the field, and the loss of personal safety. This current study is related to general strain theory and reveals the inherent strains associated with being threatened physically and being mistreated by others.

This study addressed the need to provide inferences through emerging themes of how officers can effectively manage job stress through the learned experience of the veteran police officer participants. These findings are noteworthy because officers may experience other problems if police-related stress is not properly managed. The purpose of this qualitative study on successfully managing police stress was an expansion of the knowledge on effective stress coping strategies utilized by officers who had successfully managed stress throughout the course of their police career. The knowledge gained through this study can help other police officers effectively manage police stress, and this

is important given that police stress is associated with major health problems, such as cardiovascular disease, which can lead to death (Eliason, 2011)

The research questions that guided the inquiry for this study provided eight themes: (a) coworker/work support, (b) communication, (c) experience, (d) family support, (e) medication/mental health, (f) personal time, (g) physical health, and (h) training. All of the participants had extensive experience in policing that ranged from 20 to 35 years.

Based on the information presented in preceding sections, this qualitative study provided a deeper understanding of effective stress-coping strategies used by officers who had a successful police career. A successful police career can be characterized by officers who enter a police career and remain healthy, have job satisfaction, and have the intention to remain in the police occupation until retirement (Annell et al., 2015). This qualitative model was applied with an inductive approach through a general strain theoretical framework to illuminate the inherent workplace stress associated with police work. Rigorous and systematic in nature, this study provides valuable insights and details about effective stress-management techniques used by police officers.

References

Aaron, J. D. K. (2000). Stress and coping in police officers. *Police Quarterly*, *3*(4), 438–450. https://doi.org/10.1177/109861110000300405

Abdollahi, M. K. (2002). Understanding police stress research. *Journal of Forensic Psychology Practice*, *2*(2), 1–24. https://doi.org/10.1300/J158v02n02_01

Acquadro Maran, D., Zedda, M., & Varetto, A. (2018). Physical practice and wellness courses reduce distress and improve wellbeing in police officers. *International Journal of Environmental Research and Public Health*, *15*(4), 578. https://doi.org/10.3390/ijerph15040578

Adams, C., & Manen, M. (2008). Phenomenology. In L. M. Given (Ed.), *The SAGE encyclopedia of qualitative research methods* (pp. 615–620). SAGE Publications.

Agnew, R. (1992). Foundation for a general strain theory of crime and delinquency. *Criminology, 30*(1), 47–88. https://doi.org/10.1111/j.1745-9125.1992.tb01093.x

Agnew, R. (1985). Revised strain theory of delinquency. *Social Forces*, *64*(1), 151–167. https://doi.org/10.1093/sf/64.1.151

Ahmad, R., & Islam, T. (2019). Does work and family imbalance impact the satisfaction of police force employees? A "net or a web" model. *Policing: An International Journal of Police Strategies & Management*, *42*(4), 585–597. https://doi.org/10.1108/PIJPSM-05-2018-0061

Airila, A., Hakanen, J. J., Luukkonen, R., Lusa, S., Punakallio, A., & Leino-Arjas, P. (2014). Developmental trajectories of multisite musculoskeletal pain and depressive symptoms: The effects of job demand and resources and individual factors. *Psychology & Health, 29*(12), 1421–1441. https://doi.org/10.1080/08870446.2014.945929

Alexander, D. A., & Klein, S. (2001). Ambulance personnel and critical incidents: Impact of accident and emergency work on mental health and emotional well-being. *British Journal of Psychiatry*, *178*(1), 76–81. https://doi.org/10.1192/bjp.178.1.76

Allison, P., Mnatsakanova, A., McCanlies, E., Fekedulegn, D., Hartley, T. A., Andrew, M. E., & Violanti, J. M. (2019). Police stress and depressive symptoms: Role of coping and hardiness. *Policing (Bradford, England)*, *43*(2), 247–261. https://doi.org/10.1108/pijpsm-04-2019-0055

Almutairi, A. F., Gardner, G. E., & McCarthy, A. (2014). Practical guidance for the use of a pattern-matching technique in case-study research: A case presentation. *Nursing & Health Sciences*, *16*(2), 239–244. https://doi.org/10.1111/nhs.12096

Amador, X. F., Flaum, M., Andreason, N. C., Strauss, D. H., Yale, S. A., Clark, S. C., & Gorman, J. M. (1994, October). Awareness of illness in schizophrenia and schizoaffective mood disorders. *Archives of General Psychiatry*, *51*(10), 826–836. https://doi.org/10.1001/archpsyc.1994.03950100074007

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Author. https://doi.org/10.1176/appi.books.9780890425596

Anderson, G. S., Di Nota, P. M., Groll, D., & Carleton, R. N. (2020). Peer support and crisis-focused psychological interventions designed to mitigate post-traumatic stress among public safety and frontline healthcare personnel: A systemic review. *International Journal of Environmental Research and Public Health*, *17*(20), 7645. https://doi.org/10.3390/ijerph17207645

Annell, S., Lindfors, P., & Sverke, M. (2015). Police selection – implications during training and early career. *Policing*, *38*(2), 221–238. https://doi.org/10.1108/PIJPSM-11-2014-0119

Anonymous. (2011). Code of silence. *Police Department Disciplinary Bulletin*, *19*(7), 7–8. https://www.proquest.com/docview/883158650

Anshel, M. H. (2000). A conceptual model and implications for coping with stressful events in police work. *Criminal Justice and Behavior*, *27*(3), 375–400. https://doi.org/10.1177/0093854800027003006

Anshel M. H., Umscheid D., & Brinthaupt T. M. (2013). Effect of a combined coping skills and wellness program on perceived stress and physical energy among police emergency dispatchers: An exploratory study. *Journal of Police Criminal Psychology*, *28*, 1–14. https://doi.org/10.1007/s11896-012-9110-x

Arble, E., & Arnetz, B. B. (2017). A model of first-responder coping: An approach/avoidance bifurcation. *Stress and Health, 33*(3), 223–232. https://doi.org/10.1002/smi.2692

Archibald, M. M. (2016). Investigator triangulation: A collaborative strategy with potential for mixed methods research. *Journal of Mixed Methods Research*, *10*(3), 228–250. https://doi.org/10.1177/1558689815570092

Agarwal, B., Brooks, S. K., & Greenberg, N. (2020). The role of peer support in managing occupational: A qualitative study of the sustaining resilience at work intervention. *Workplace Health & Safety*, *68*(2), 57–64. https://doi.org/10.1177/2165079919873934

Arter, M. L. (2008). Stress and deviance in policing. *Deviant Behavior*, *29*(1), 43–69. https://doi.org/10.1080/01639620701457774

Asmundson, G. J. G., & Stapleton, J. A. (2008). Associations between dimensions of anxiety sensitivity and PTSD symptom clusters in active-duty police officers. *Cognitive Behaviour Therapy*, *37*(2), 66–75. https://doi.org/10.1080/16506070801969005

Bachmann, S. (2018). Epidemiology of suicide and the psychiatric perspective. *International Journal of Environmental Research and Public Health*, *15*(7), 1425. https://doi.org/10.3390/ijerph15071425

Badge of Life. (2022). *Home* [Facebook page]. Facebook. https://www.facebook.com/BadgeOfLife/

Barr, L. (2020, January 2). Record number of US police officers died by suicide in 2019, advocacy groups says: The figure rose to 228 from 172 in 2018. *ABC News.* https://abcnews.go.com/Politics/record-number-us-police-officers-died-suicide-2019/story?id=68031484

Barrie, D. G., & Broomhall, S. (Eds.). (2012). *A history of police and masculinities, 1700-2010*. Routledge.

Bea, K., Krouse, W., Morgan, D., Morrissey, W., Redhead, C. S. (2003). *CRS report for Congress: Emergency preparedness and response directorate of the Department of Homeland Security.* Congressional Research Service, The Library of Congress. https://sgp.fas.org/crs/RS21367.pdf

Beaton, R., Murphy, S., & Pike, K. (1996). Work and nonwork stressors, negative affective states, and pain complaints among firefighters and paramedics. *International Journal of Stress Management*, *3*(4), 223–237. https://doi.org/10.1007/BF01857685

Becker, L. R., Zaloshnja, E., Levick, N., Li, G., & Miller, T. R. (2003). The relative risk of injury and death in ambulances and other emergency vehicles. *Accident & Injury Prevention, 35*(6), 941–948. https://doi.org/10.1016/S0001-4575(02)00102-1

Beehr, T. A., Johnson, L. B., & Nieva, R. (1995). Occupational stress: Coping of police and their spouses. *Journal of Organizational Behavior*, *16*(1), 3–25. https://doi.org/10.1002/job.4030160104

Belzer, K. L. (2017). Sleep and stress. In S. Wadhwa (Ed.), *Stress in the modern world: Understanding science and society* (pp. 257–265). Greenwood.

Bennett, P., Williams, Y., Page, N., Hood, K., & Woollard, M. (2004). Levels of mental health problems among UK emergency ambulance workers. *Emergency Medicine Journal*, *21*(2), 235–236. https://doi.org/10.1136/emj.2003.005645

Berger, W., Coutinho, E. S. F., Figueira, I., Marques-Portella, C., Luz, M. P., Neylan, T. C., Marmar, C. R., & Mendlowicz, M. V. (2012). Rescuers at risk: A systematic review and meta-regression analysis of the current worldwide prevalence and correlates of PTSD in rescue workers. *Society of Psychiatry and Psychiatric Epidemiology*, *47*(6), 1001–1011. https://doi.org/10.1007/s00127-011-0408-2

Berte, G. L. (1989). *The meaning that police officers make of their work: A phenomenological study of police occupational stress* [Doctoral dissertation, University of Massachusetts Amherst]. Scholarworks @ UMassAmherst https://scholarworks.umass.edu/dissertations/AAI9011701

Bigham, B. L., Jensen, J. L., Tavares, W., Drennan, I. R., Saleem, H., Dainty, K. N., & Munro, G. (2014). Paramedic self-reported exposure to violence in the emergency medical services (EMS) workplace: A mixed-methods cross-sectional survey. *Prehospital Emergency Care*, *18*(4), 489–494. https://doi.org/10.3109/10903127.2014.912703

Bishopp, S. A., & Boots, D. P. (2014). General strain theory, exposure to violence, and suicide ideation among police officers: A gendered approach. *Journal of Criminal Justice*, *42*(6), 538-548. https://doi.org/10.1016/j.jcrimjus.2014.09.007

Bishopp, S. A., Leeper Piquero, N., Worrall, J. L., & Piquero, A. R. (2019). Negative affective responses to stress among urban police: A general strain theory approach. *Deviant Behavior*, *40*(6), 635–654. https://doi.org/10.1080/01639625.2018.1436568

Block, E. S., & Erskine, L. (2012). Interviewing by telephone: Specific considerations, opportunities, and challenges. *International Journal of Qualitative Methods*, 428–445. https://doi.org/10.1177/160940691201100409

Blue H.E.L.P. (2020). *Law enforcement suicides: 578 known deaths: January 1, 2016 through June 31, 2019.* Author. https://bluehelp.org/wp-content/uploads/2019/08/2016-to-2019-.pdf

Bolton, J. M., & Robinson, J. (2010). Population-attributable fractions of axis I and axis II mental disorders for suicide attempts: Findings from a representative sample of the adult, noninstitutionalized U.S. population. *American Journal of Public Health*, *100*(12), 2473–2480. https://doi.org/10.2105/AJPH.2010.192252

Brewin, C. (2010). *Post-traumatic stress disorder: Malady or myth?* Yale University Press.

Brooks, S. K., Dunn, R., Amlôt, R., Greenberg, N., & Rubin, G. J. (2018). Training and post-disaster interventions for the psychological impacts on disaster-exposed employees: A systematic review. *Journal of Mental Health*, *15*, 1–25. https://doi.org/10.1080/09638237.2018.1437610

Burke, R. J., Shearer, J., & Deszca, G. (1984). Burnout among men and women in police work: An examination of the Cherniss model. *Journal of Health and Human Resources Administration*, *7*(2), 162–188. https://www.jstor.org/stable/25780191?seq=1

Burris, A. N. (2017). *Alexithymia and posttraumatic stress disorder in law enforcement* (No. 10641436) [Doctoral dissertation, University of the Rockies]. ProQuest Dissertations Publishing. https://www.proquest.com/docview/1970437399/

Bush, M. D., & Dodson, K. D. (2014). Police officers as peace officers: A philosophical and theoretical examination of policing from a peacemaking approach. *Journal of Theoretical & Philosophical Criminology*, *6*(3), 194–204. https://www.researchgate.net/publication/290394468_Police_Officers_as_Peace_Officers_A_Philosophical_and_Theoretical_Examination_of_Policing_from_a_Peacemaking_Approach

Cain, H. I., Harkness, J. L., Smith, A. L., & Markowski, M. L. (2003). Protecting persons in family therapy research: An overview of ethical and regulatory standards. *Journal of Marital and Family Therapy*, *29*(1), 47–57. https://doi.org/10.1111/j.1752-0606.2003.tb00382.x

Carlier, I. V. (1997). Risk factors for posttraumatic stress symptomatology in police officers: A prospective analysis. *The Journal of Nervous & Mental Disease*, *185*(8), 498–506. https://doi.org/10.1097/00005053-199708000-00004

Carter, N., Bryant-Lukosius, D., DiCenso, A., Blythe, J., & Neville, A. J. (2014). The use of triangulation in qualitative research. *Oncology Nursing Forum*, *41*(5), 545–547. https://doi.org/10.1188/14.ONF.545-547

Cavanagh, J. T. O, Carson, A. J., Sharpe, M., & Lawrie, S. M. (2003). Psychological autopsy studies of suicide: A systematic review. *Psychological Medicine*, *33*(3), 395–405. https://doi.org/10.1017/s0033291702006943

Chae, M. H., & Boyle, D. J. (2013). Police suicide: Prevalence, risk, and protective factors. *Policing*, *36*(1), 91–118. https://doi.org/10.1108/13639511311302498

Channuwong, S. (2009). Strategies for reducing stress among managers: An integrated physical and spiritual approach. *International Journal of Management*, *26*(2), 334–341. https://www.proquest.com/docview/233228819?pq-origsite=gscholar&fromopenview=true

Chitra, T., & Karunanidhi, S. (2021). The impact of resilience training on occupational stress, resilience, job satisfaction, and psychological well-being of female police officers. *Journal of Police Criminal Psychology*, *36*, 8–23. https://doi.org/10.1007/s11896-018-9294-9

Chopko, B. A., & Schwartz, R. C. (2012). Correlates of career traumatization and symptomology among active-duty police officers. *Criminal Justice Studies*, *25*, 83–95. https://doi.org/10.1080/1478601X.2012.657905

Chu, A. H. Y, Koh, D., Moy, F. M., & Müller-Riemenschneider, F. (2014). Do workplace physical activity interventions improve mental health outcomes? *Occupational Medicine*, *6*, 235–245. https://doi.org/10.1093/occmed/kqu045

Clark, Q. (2006). *A phenomenological case study of barriers for African American women in law enforcement* (No. 3220676) [Doctoral dissertation, University of Phoenix]. ProQuest. https://www.proquest.com/openview/8024de95aea28e54e43835d486ee7574/1?pq-origsite=gscholar&cbl=18750&diss=y

Clark-Miller, J., & Brady, H. C. (2013). Critical stress: Police officer religiosity and coping with critical stress incidents. *Journal of Police & Criminal Psychology*, *28*(1), 26–34. https://doi.org/10.1007/s11896-012-9112-8

Clawson, J. (2017, April 12). Best practices: Lights-and-siren hazards. *The Journal of Emergency Dispatch.* https://iaedjournal.org/lights-siren-hazards/

Clohessy, S., & Ehlers, A. (1999). PTSD symptoms, response to intrusive memories, and coping in ambulance service workers. *British Journal of Clinical Psychology*, *38*(3), 251–265. https://doi.org/10.1348/014466599162836

Cooper, D. R., & Schindler, P. S. (2003). *Business research methods* (8th ed). McGraw-Hill.

Craig, J. (2017). *Marriage and the law enforcement couple* (No. 10601761) [Doctoral dissertation, Azusa Pacific University] ProQuest. https://www.proquest.com/openview/693e9e1eb3663ef722ff50a07bb8abab/1?pq-origsite=gscholar&cbl=18750

Crank, J. P. (1998). *Understanding police culture.* Anderson.

Cranwell-Ward, J., & Abbey, A. (2005). *Organizational stress*. Palgrave Macmillan.

Creswell, J. W. (2009). Editorial: Mapping the Field of Mixed Methods Research. Journal of Mixed Methods Research, 3(2), 95–108. https://doi.org/10.1177/1558689808330883

Creswell, J. W. (2002). *Educational research: Planning, conducting, and evaluating quantitative and qualitative research.* Merrill Prentice Hall.

Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches* (4th ed.). SAGE Publications.

Creswell, J. W., & Creswell, J. D. (2018*). Research design: Qualitative, quantitative, and mixed methods approach* (5th ed.). SAGE Publications.

Creswell, J. W., Hanson, W. E., Clark Plano, V. L., & Morales, A. (2007). Qualitative research designs: Selection and implementation. *The Counseling Psychologist*, *35*(2), 236–264. https://doi.org/10.1177/0011000006287390

Crosby, A. E., & Sacks, J. J. (2002). Exposure to suicide: Incidence and association with suicidal ideation and behavior: United States, 1984. *Suicide and Life-Threatening Behavior*, *32*(3), 321–328. https://doi.org/10.1521/suli.32.3.321.22170

Cross, C. L, & Ashley, L. (2004). Police trauma and addiction: Coping with the dangers of the job. *The FBI Law Enforcement Bulletin*, *73*(10), 24–32. https://silo.tips/download/the-informer-police-trauma-addiction-coping-with-the-dangers-of-the-job

Davis, J. (2009). *The crime and deviance channel: Updates: Strain theory (Part 1).* 1–7. Online Classroom Ltd. http://www.sociology.org.uk/cc_pdf/cc_updates_strainp1.pdf

Del Ben, K. S., Scotti, J. R., Chen, Y. C., & Fortson, B. L. (2006). Prevalence of post-traumatic stress disorder symptoms in firefighters. *Work & Stress*, *20*(1), 37–48. https://doi.org/10.1080/02678370600679512

Dingman, R. C. (2020). Rotating work schedules and work-life conflict for police [Doctoral dissertation, Walden University]. Walden Dissertations and Doctoral Studies. https://scholarworks.waldenu.edu/dissertations/9557

Dinsmore, A. L. (2013). *An exploration of spousal support strategies utilized by female spouses of male police officers* [Doctoral dissertation, Massachusetts School of Professional Psychology].

Donnelly, E., Valentine, C., & Oehme, K. (2015). Law enforcement officers and employee assistance programs. *Policing: An International Journal of Police Strategies and Management*, *38*(2), 206–220. https://doi.org/10.1108/PIJPSM-11-2014-0116

Dowler, K. (2005). Job satisfaction, burnout, and perception of unfair treatment: The relationship between race and police work. *Police Quarterly*, *8*(4), 476–489. https://doi.org/10.1177/1098611104269787

Durkheim, E. (1893). *The division of labor in society* (G. Simpson, Trans; 1933 edition). Macmillan.

Durkheim, E. (1969). *The division of labor in society* (G. Simpson, Trans; 1933 edition). Macmillan.

Durand, M. A., & Chantler, T. (Eds.). (2014). *Principles of social research: Understanding public health* (2nd ed.). McGraw-Hill Education.

Eliason, S. L. (2011). Death in the line of duty: Game warden mortality in the United States, 1886-2009. *American Journal of Criminal Justice*, *36*(4), 319. https://doi.org/10.1007/s12103-010-9087-x

Everly, G. S., & Lating, J. M. (2008). *Personality-guided therapy for post-traumatic stress disorder.* American Psychological Association.

FBI National Press Office. (2014, May 12.). *FBI releases 2013 preliminary statistics for law enforcement officers killed in the line of duty.* Author. https://www.fbi.gov/news/pressrel/press-releases/fbi-releases-2013-preliminary-statistics-for-law-enforcement-officers-killed-in-the-line-of-duty

Federal Bureau of Investigation. (n.d.). *2017: Law enforcement officers killed and assaulted.* https://ucr.fbi.gov/leoka/2017

Finest FAQ. (2020). Retrieved November 16, 2020 from NYC.gov

Finn, P. (1997). Reducing stress: An organization-centered approach. *FBI Law Enforcement Bulletin*, *66(8)*, 20–26. https://www.ojp.gov/ncjrs/virtual-library/abstracts/reducing-stress-organization-centered-approach

Fishbain, D. A., Lewis, J. E., & Gao, J. (2014). The Pain Suicidality Association: A narrative review. *Pain Medicine*, *15*(11), 1835–1849. https://doi.org/10.1111/pme.12463

Fjeldheim, C. B., Nöthling, J., Pretorius, K., Basson, M., Ganasen, K., Heneke, R., Cloete, K. J., & Seedat, S. (2014). Trauma exposure, post-traumatic stress disorder, and the effect of explanatory variables in paramedic trainees. *BMC Emergency Medicine*, *14*(1), 11. https://doi.org/10.1186/1471-227X-14-11

Friedman, M., & Higson-Smith, C. (2003). Building psychological resilience: Learning from the South African police service. In D. Paton, J. M. Violanti, & L. M. Smith (Eds.). *Promoting capabilities to manage post-traumatic stress: Perspectives on resilience* (pp. 223–224). Charles C Thomas.

Fucigna, T. (2019). *Perceived organizational support, resilience and police stress: A quantitative analysis* (No. 27571836) [Doctoral dissertation, Stony Brook University]. ProQuest. https://www.proquest.com/openview/1b306d5855053fe6a97bec7128b8b311/1.pdf?pq-origsite=gscholar&cbl=51922&diss=y

Gerber, M., Kellmann, M., Elliot, C., Hartmann, T., Brand, S., Holsboer-Trachsler, E., & Pühse, U. (2014). Perceived fitness protects against stress-based mental health impairments among police officers who report good sleep. *Journal of Occupational Health*, *55*(5), 376–384. https://doi.org/10.1539/joh.13-0030-oa

Gershon, R. R. M., Barocas, B., Canton, A. N., Li, X., & Vlahov, D. (2009). Mental, physical and behavioral outcomes associated with perceived work stress in police officers. *Criminal Justice and Behavior*, *26*(2), 275–289. https://doi.org/10.1177/0093854808330015

Gersons, B. P. R. (1989). Patterns of PTSD among police officers following shooting incidents: A two-dimensional model and treatment implications. *Journal of Traumatic Stress*, *2*(3), 247–257. https://doi.org/10.1002/jts.2490020302

Gharibian, E. (2015). *Associations of job strain, health-related quality of life, mental health stigma, and seeking mental health treatment among police officer* (No. 3702910) [Doctoral dissertation, Alliant International University]. ProQuest. https://www.proquest.com/docview/1687191185/

Gibson, C. L., Swatt, M. L., & Jolicoeur, J. R. (2001). Assessing the generality of general strain theory: The relationship among occupational stress experienced by male police officers and domestic forms of violence. *Journal of Crime and Justice*, *24*(2), 9–57. https://doi.org/10.1080/0735648X.2001.9721133

Goette, L., Bendahan, S., Thoresen, J., Hollis, F., & Sandi, C. (2015). Stress pulls us apart: Anxiety leads to differences in competitive confidence under stress. *Psychoneuroendocrinology*, *54*, 115–123. https://doi.org/10.1016/j.psyneuen.2015.01.019

Goldsmith, S. K., Pellmar, T. C., Kleinman, A. M., & Bunney, W. E. (Eds.). (2002). *Reducing suicide: A national imperative.* The National Academies Press.

Grevin, F. (1996). Post-traumatic stress disorder, ego defense, and empathy among urban paramedics. *Psychological Reports*, *79*(2), 483–495. https://doi.org/10.2466/pr0.1996.79.2.483

Haas, C. N. (2016). Reproducible risk assessment. *Risk Analysis*, *36*(10), 1829–1833. https://doi.org/10.1111/risa.12730

Hall, G. B., Dollard, M. F., Tuckey, M. R., Winefield, A. H., & Thompson, B. M. (2010). Job demands, work-family conflict, and emotional exhaustion in police officers: A longitudinal test of competing theories. *Journal of Occupational and Organizational Psychology*, *83*(1), 237–250. https://doi.org/10.1348/096317908X401723

Hakan Can, S., & Hendy, H. M. (2014). Police stressors, negative outcomes associated with them and coping mechanisms that may reduce these associations. *Police Journal*, *87*(3), 167–177. https://doi.org/10.1350/pojo.2014.87.3.676

Hartig, T., Catalano, R., Ong, M., & Syme, S. L. (2013). Vacation, collective restoration, and mental health in a population. *Society and Mental Health*, 3(3), 221–236. https://doi.org/10.1177/2156869313497718

Hassell, K. D., & Brandl, S. G. (2009). An examination of the workplace experiences of police patrol officers: The role of race, sex, and sexual orientation. *Police Quarterly*, *12*(4), 408–430. https://doi.org/10.1177/1098611109348473

Haugen, P. T., Evces, M., & Weiss. D. S. (2012). Treating post-traumatic stress disorder in first responders: A systematic review. *Clinical Psychology Review*, *32*(5), 370–380. https://doi.org/10.1016/j.cpr.2012.04.001

Henry, V. E. (2006). Managing crime and quality of life using Compstat: Specific issues in implementation and practice. In *Resource material series no. 68* (pp. 117–132). Work Product of the 129th International Senior Seminar, "Crime Prevention in the 21st Century – Effective Prevention of Crime Associated with Urbanization Based Upon Community Involvement and Prevention of Youth Crime and Juvenile Delinquency." United Nations Asia and Far East Institute for the Prevention of Crime and Treatment of Offenders. https://www.unafei.or.jp/publications/pdf/RS_No68/No68_12VE_Henry2.pdf

Hodgins, S. (2001). The major mental disorders and crime: Stop debating and start treating and preventing. *International Journal of Law and Psychiatry*, *24*(4–5), 427–446. https://doi.org/10.1016/S0160-2527(01)00077-2

Hoffman, J. P., & Su, S. S. (1997). The conditional effects of stress on delinquency and drug use: A strain theory assessment of sex differences. *Journal of Research in Crime* and Delinquency, 34(1), 46–78. https://doi.org/10.1177/0022427897034001004

Horan, K. A., Marks, M., Ruiz, J., Bowers, C., & Cunningham, A. (2021). Here for my peer: The future of first responder mental health. *International Journal of Environmental Research and Public Health*, *18*(21), 11097–. https://doi.org/10.3390/ijerph182111097

Houghton, C., Casey, D., Shaw, D., & Murphy, K. (2013). Rigour in qualitative case-study research. *Nurse Researcher*, *20*(4), 12–17. https://doi.org/10.7748/nr2013.03.20.4.12.e326

Huppert, D., & Griffiths, M. (2015). Police mental health partnership project: Police ambulance crisis emergency response (PACER) model development. *Australasian Psychiatry*, *23*(5), 520–523. https://doi.org/10.1177/1039856215597533

International Association of Chiefs of Police. (2013). *About IACP: Mission and vision.* https://www.theiacp.org/about-iacp

International Association of Chiefs of Police. (2014). *IACP national symposium on law enforcement officer suicide and mental health: Breaking the silence on law enforcement suicides.* Office of Community Oriented Policing Services. U.S. Department of Justice. https://www.theiacp.org/sites/default/files/Officer_Suicide_Report.pdf

Iwasaki, Y., Mannell, R. C., Smale, B. J. A., & Butcher, J. (2005). Contributions of leisure participation in predicting stress coping and health among police and emergency response services workers. *Journal of Health Psychology*, *10*(1), 79–99. https://doi.org/10.1177/1359105305048557

Jabr, H. (2011). *Emotional labor and policing from the perspective of retired police officers: A preliminary study.* Capstone Project, Central Michigan University.

Janik, J., & Kravitz, H. M. (1994). Linking work and domestic problems with police suicide. *Suicide and Life-Threatening Behavior*, *24(*3), 267–274. doi:10.1111/j.1943-278X.1994.tb00751.x

Jansen, K. (2004). *Analysis of demographic variables and levels of stress in law enforcement officers* [Doctoral dissertation, Philadelphia College of Osteopathic Medicine]. Digital Commons @ PCOM. Paper 67. https://digitalcommons.pcom.edu/cgi/viewcontent.cgi?article=1066&context=psychology_dissertations

Jaramillo, F., Nixon, R., & Sams, D. (2005). The effect of law enforcement stress on organizational commitment. *Policing: An International Journal of Police Strategies and Management*, *28*(2), 321–336. https://doi.org/10.1108/13639510510597933

Johnson, L. B., Todd, M., & Subramanian, G. (2005). Violence in police families: Work-family spillover. *Journal of Family Violence*, *20*(1), 3–12. https://doi.org/10.1007/s10896-005-1504-4

Jones, K., Bright, K., Smith-MacDonald, L., Pike, A. D., & Bremault-Phillips, S. (2022). Peers supporting reintegration after occupational stress injuries: A qualitative analysis of a workplace reintegration facilitator training program developed by municipal police for public safety personnel. *Police Journal (Chichester)*, *95*(1), 152–169. https://doi.org/10.1177/0032258X211030896

Jonsson, A., Segesten, K., & Mattsson, B. (2003). Post-traumatic stress among Swedish ambulance personnel. *Emergency Medicine Journal*, *20*(1), 79–84. https://doi.org/10.1136/emj.20.1.79

Jordan, A. T. (2013). *Business anthropology* (2nd ed.). Waveland Press, Inc.

Joyner, R. L., Rouse, W. A., & Glatthorn, A. A. (2018). *Writing the winning thesis or dissertation: A step-by-step guide.* Corwin.

Karaffa, K., Openshaw, L., Koch, J., Clark, H., Harr, C., & Stewart, C. (2015). Perceived impact of police work on marital relationships. *The Family Journal*, *23*(2), 120–131. https://doi.org/10.1177/1066480714564381

Karaffa, K. M., & Koch, J. M. (2016). Stigma, pluralistic ignorance, and attitudes toward seeking mental health services among police officers. *Criminal Justice and Behavior*, *43*(6), 759–777. https://doi.org/10.1177/0093854815613103

Kaufman, G. M., & Beehr, T. A. (1989). Interactions between job stressors and social support: Some counterintuitive results. *Journal of Applied Psychology*, *71*(3), 522–526. https://doi.org/10.1037/0021-9010.71.3.522

Kenwright, D., & Whitehead, J. (2008). *Police stress: An examination of the effects of stress and coping strategies*(No. 1461328) [Doctoral dissertation, East Tennessee State University]. ProQuest. https://www.proquest.com/docview/304655128/

Kontos, N., Freudenreich, O., & Querques, J. (2016). 'Poor insight': A capacity perspective on treatment refusal in serious mental illness. *Psychiatric Services*, *67*(11), 1254–1256. https://doi.org/10.1176/appi.ps.201500542

Kosor, R. (2017). *Testing a psychological readiness training intervention on PTSD, depression, anxiety, & stress in first responders* [Doctoral dissertation, Walden University]. Walden University Scholar Works. https://scholarworks.waldenu.edu/cgi/viewcontent.cgi?article=4406&context=dissertations

Kuhns, J., & Knutsson, J. (Eds.). (2010). *Police use of force: A global perspective (global crime and justice).* Praeger.

Kuhns J. B., Maguire E. R., Leach N. R. (2015). *Health, safety, and wellness program case studies in law enforcement.* Office of Community Oriented Policing Services. U.S. Department of Justice. https://cops.usdoj.gov/RIC/Publications/cops-p332-pub.pdf

Kyron, M. J., Rikkers, W., O'Brien, P., Bartlett, J., & Lawrence, D. (2020). Experiences of police and emergency services employees with workers' compensation claims for mental health issues. *Journal of Occupational Rehabilitation*, *31*(1), 197–206. https://doi.org/10.1007/s10926-020-09909-8

Lab, S. P., Williams, M. R., Holcomb, J. E., Burek, M. W., King, W. R., & Buegrger, M. E. (2011). *Criminal justice: The essentials* (2nd ed.). Oxford University Press.

Larned, J. G. (2010). Understanding police suicide. *Forensic Examiner*, *19*(3), 64–71, 125. https://issuu.com/acfei.media/docs/fall2010/5

Lechuga, V. M. (2012). Exploring culture from a distance: The utility of telephone interviews in qualitative research. *International Journal of Qualitative Studies in Education*, *25*(3), 251–268. https://doi.org/10.1080/09518398.2010.529853

Lees, T., Elliott, J. L., Gunning, S., Newton, P. J., Rai, T., & Lal, S. (2019). A systematic review of the current evidence regarding interventions for anxiety, PTSD,

sleepiness and fatigue in the law enforcement workplace. *Industrial Health*, *57*(6), 655–667. https://doi.org/10.2486/indhealth.2018-0088

LeFort, N. (2020). *Officer safety and police legitimacy: Examining law enforcement leader perceptions of the impact of police peer support programs on occupational stress and police misconduct* No. 27738889) [Doctoral dissertation, The George Washington University]. ProQuest.

Lieberman, A. M., Best, S. R., Metzler, T. J., Fagan, J. A., Weiss, D. S., & Marmar, C. R. (2002). Routine occupational stress and psychological stress on police officers. *Policing: An International Journal of Police Strategies and Management*, *25*(2), 421–441. https://doi.org/10.1108/13639510210429446

Lim, C. S., Ong, C. N., & Phoon, W. O. (1987). Work stress of firemen as measured by heart rate and catecholamine. *Journal of Human Ergology*, *16*(2), 209–218. https://www.jstage.jst.go.jp/article/jhe1972/16/2/16_2_209/_pdf

Lindsay, V., & Shelley, K. (2009). Social and stress-related influences of police officers' alcohol consumption. *Journal of Police and Criminal Psychology*, *24*, 87–92. https://doi.org/10.1007/s11896-009-9048-9

Ma, C. C., Andrew, M. E., Fekedulegn, D., Gu, J. K., Hartley, T. A., Charles, L. E., Violanti, J. M., & Burchfiel, C. M. (2015). Shift work and occupational stress in police officers. *Safety and Health at Work*, *6*(1), 25–29. https://doi.org/10.1016/j.shaw.2014.10.001

MacVean, A., Spindler, P., & Solf, C. (2013). *Handbook of policing, ethics, and professional standards.* Routledge. https://doi.org/10.4324/9780203097403

Madonna, J., & Kelly, R. (2002). *Treating police stress: The work and words of peer counselors.* Charles C Thomas.

Maia, D. B., Marmar, C. R., Metzler, T., Nóbrega, A., Berger, W., Mendlowicz, M. V., Coutinho, E. S. F., & Figueira, I. (2007). Post-traumatic stress symptoms in an elite unit of Brazilian police officers: Prevalence and impact on psychosocial functioning and on physical, mental health. *Journal of Affective Disorders*, *97*(1–3), 241–245. https://doi.org/10.1016/j.jad.2006.06.004

Maple, M., Cerel, J., Sanford, R., Pearce, T., & Jordan, J. (2017). Is exposure to suicide beyond kin associated with risk for suicidal behavior? A systematic review of the evidence. *Suicide and Life-Threatening Behavior*, *47*(4), 461–474. https://doi.org/10.1111/sltb.12308

McCafferty, F. L., Domingo, G, D., & McCafferty, E. A. (1990). Posttraumatic stress disorder in the police officer: Paradigm of occupational stress. *Southern Medical Journal*, *83*(5), 543–547. doi:10.1097/00007611-199005000-00014

McCarty, W. P., & Lawrence, D. S. (2016). Coping, confidence, and change within the academy: a longitudinal look at police recruits. *Police Practice & Research*, *17*(3), 263–278. https://doi.org/10.1080/15614263.2014.958486

Mccraty, R., & Atkinson, M. (2012). Resilience training program reduces physiological and psychological stress in police officers. *Global Advances in Health and Medicine*, *1*(5), 44–66. https://doi.org/10.7453/gahmj.2012.1.5.013

McDowall, A., & Lindsay, A. (2014). Work-life management in the police: The development of a self-management framework. *Journal of Business and Psychology*, *29*, 387–411. https://doi.org/10.1007/s10869-013-9321-x

McKoy, K. D. (2011). *The impact of stress on first responders: A phenomenological study.* BibloLabs. https://www.betterworldbooks.com/product/detail/the-impact-of-stress-on-first-responders-a-phenomenological-study-1244636428

McMillan, J. H., & Schumacher, S. (2001). *Research in education: A conceptual introduction* (5th ed.). Longman.

Mechem, C. C., Dickinson, E. T., Shofer, F. S., & Jaslow, D. (2002). Injuries and assaults on paramedics and firefighters in an urban emergency medical services system. *Prehospital Emergency Care*, *6*(4), 396–401. https://doi.org/10.1080/10903120290938012

Meerwijk, E. L., & Weiss, S. J. (2011). Toward a unifying definition of psychological pain. *Journal of Loss & Trauma*, *16*(5), 402–412. https://doi.org/10.1080/15325024.2011.572044

Menard, K. S., & Arter, M. L.(2014). Stress, coping, alcohol use, and posttraumatic stress disorder among an international sample of police officers: Does gender matter? *Police Quarterly*, *17*(4), 307–327. https://doi.org/10.1177/1098611114548097

Mero-Jaffe, I. (2011). 'Is that what I said?' Interview transcript approval by participants: An aspect of ethics in qualitative research. *International Journal of Qualitative Methods*, *10*(3), 231–247. https://doi.org/10.1177/160940691101000304

Merton, R. K. (1978). Social structure and anomie. *American Sociological Review*, *3*(5), 672–682. https://doi.org/10.2307/2084686

Messer, I. R. (1994). *Tactical police officer stress: An empirical* investigation [Doctoral dissertation, Texas A&M University]. Texas A&M University Libraries. No. 1512477. https://hdl.handle.net/1969.1/DISSERTATIONS-1512477

Meyer, D., Jayawardana, M. W., Muir, S. D., Ho, D. Y.-T., & Sackett, O. (2018). Promoting psychological well-being at work by reducing stress and improving sleep: Mixed-methods analysis. *Journal of Medical Internet Research*, *20*(10), e267–e267. https://doi.org/10.2196/jmir.9058

Michael, T., Streb, M., & Häller, P. (2016). PTSD in paramedics: Direct versus indirect threats, post-traumatic cognitions, and dealing with intrusions. *International Journal of Cognitive Therapy*, *9*(1), 57–72. https://doi.org/10.1521/ijct.2016.9.1.57

Miller, L. (1995). Tough guys: Psychotherapeutic strategies with law enforcement and emergency services personnel. *Psychotherapy, 32*(4), 592–600. https://doi.org/10.1037/0033-3204.32.4.592

Milner, A., Witt, K., Maheen, H., & LaMontagne, A. D. (2017). Access to means of suicide, occupation, and the risk of suicide: A national study over 12 years of coronial data. *BMC Psychiatry*, *17*, 1–7, Article 125. https://doi.org/10.1186/s12888-017-1288-0

Mishara, B. L., & Martin, N. (2012). Effects of a comprehensive police suicide prevention program. *Crisis: The Journal of Crisis Intervention and Suicide Prevention*, 33(3), 162–168. https://doi.org/10.1027/0227-5910/a000125

Moore, J. (2019, October 9). NYPD suicides: Commissioner O'Neill says department is dealing with a 'mental health crisis.' *CBS New York.* https://newyork.cbslocal.com/2019/10/09/nypd-commissioner-james-oneill-on-officer-suicides/

Morales-Adams, N. (2007). Factors leading to promotions of Hispanic/Latino law enforcement officers: A phenomenological study (No. 3251380) [Doctoral dissertation, University of Phoenix]. ProQuest. https://www.globethesis.com/?t=1446390005466103

Moriarty, A., & Field, M. W. (1990). Proactive intervention: A new approach to police EAP programs. *Public Personnel Management*, *19*(2), 155–162. https://doi.org/10.1177/009102609001900204

National Law Enforcement Officers Memorial Fund. (2018). *2018 Mid-year: Preliminary law enforcement officers fatalities report.* https://valorfiles.blob.core.windows.net/documents/Clearinghouse/nleomf-2018_mid-year_officer_fatalities_report.pdf?sv=2017-04-17&sr=b&sig=TNCBuYbFvL1XMomvDJ9emb872S%2F4%2F4BR0b1xVV8iUDw%3D&se=2022-07-22T03%3A05%3A59Z&sp=r

New York City Department of Investigation. (2019, September). *An investigation of NYPD's officer wellness and safety services.* Office of the Inspector General for the NYPD. https://www1.nyc.gov/assets/doi/reports/pdf/2019/sep/REVISED_FINAL_DOIOIGNYPD_OfficerWellnessandSafety_9242019.pdf

New York City Police Department. (2022). *Mental health resources for NYPD members: NYPD internal resources.* Author. https://www1.nyc.gov/site/nypd/careers/human-resources-info/mental-health.page

Nock, M. K., Hwang, I., Sampson, N. A., & Kessler, R. C. (2010). Mental disorders, comorbidity, and suicidal behavior: Results from the National Comorbidity Survey Replication. *Molecular Psychiatry*, *15*(8), 868–876. https://doi.org/10.1038/mp.2009.29

Novick G. (2008). Is there a bias against telephone interviews in qualitative research? *Research in Nursing & Health*, *31*(4), 391–398. https://doi.org/10.1002/nur.20259

Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). Thematic analysis: Striving to meet the trustworthiness criteria. *International Journal of Qualitative Methods*, *16*(1). https://doi.org/10.1177/1609406917733847

Office of Community Oriented Policing Services. (2015). *The President's task force on 21st century policing implementation guide: Moving from recommendations to action.* Author. https://cops.usdoj.gov/RIC/Publications/cops-p341-pub.pdf

O'Hare, T., Shen, C., & Sherrer, M. (2013). Lifetime trauma and suicide attempts in people with severe mental illness. *Community Mental Health Journal*, *50*(6), 673–680. https://doi.org/10.1007/s10597-013-9658-7

Okada, N., Ishli, N., Nakata, M., & Nakayama, S. (2005). Occupational stress among Japanese emergency medical technicians: Hyogo prefecture. *Prehospital and Disaster Medicine*, *20*(2), 115–121. https://doi.org/10.1017/S1049023X00002296

Oquendo, M. A., Galfalvy, H., Russo, S., Ellis, S. P., Grunebaum, M. F., Burke, A., & Mann, J. J. (2004). Prospective study of clinical predictors of suicidal acts after a major depressive episode in patients with major depressive disorder or bipolar disorder. *The American Journal of Psychiatry*, *161*(8), 1433–1441. https://doi.org/10.1176/appi.ajp.161.8.1433

Ostapiuk, J. (2019, June 14). Commissioner says NYPD is in a 'mental health crisis' after latest suicide. *Advance Local Media LLC*, *silive.com.* https://www.silive.com/news/2019/06/commissioner-says-nypd-in-mental-health-crisis-after-latest-suicide.html

Papazoglou, K., & Tuttle, B. M. (2018). Fighting police trauma: Practical approaches to addressing psychological needs of officers. *SAGE Open*, 8(3), 1–11. https://doi.org/10.1177/2158244018794794

Paton, D., Violanti, J., Burke, K., & Gehrke, M. S. (2009). *Traumatic stress in police officers: A career-length assessment from recruitment to retirement.* Charles C Thomas.

Patterson, G. T., Chung, I. W., & Swan, P. W. (2014). Stress management interventions for police officers and recruits: A meta-analysis. *Journal of Experimental Criminology*, *10*(4), 487–513. https://doi.org/10.1007/s11292-014-9214-7

Pearlin, L. I. (1989). The sociological study of stress. *Journal of Health and Social Behavior*, *30*(3), 241–256. https://doi.org/10.2307/2136956

Perrin, C. L., & Perrin, R. D. (2007). *Child maltreatment: An introduction* (2nd ed.). SAGE Publications.

Pienaar, J., Rothmann, S., & van de Vijver, F. J. R. (2007). Occupational stress, personality traits, coping strategies, and suicide ideation in South African police service. *Criminal Justice and Behavior*, *34*(2), 246–258. https://doi.org/10.1177/0093854806288708

Piotrkowski, C. S., & Telesco, G. A. (2011). Officers in crisis: New York City police officers who assisted the families of victims of the World Trade Center terrorist attack. *Journal of Police Crisis Negotiations*, *11*(1), 40–56. https://doi.org/10.1080/15332586.2011.523310

Price, M. (2017). Psychiatric disability in law enforcement officers. *Behavioral Science & the Law*, *35*(2), 113–123. https://doi.org/10.1002/bsl.2278

Ramchand, R., Saunders, J., Osilla, K. C., Ebener, P., Kotzias, V., Thornton, E., Strang, L., & Cahill, M. (2018). Suicide prevention in U.S. law enforcement agencies: A national survey of current practices. *Journal of Police and Criminal Psychology*, *34*, 55–66. https://doi.org/10.1007/s11896-018-9269-x

Ranney, M. L., Meisel, Z. F., Choo, E. K., Garro, A. C., Sasson, C., & Morrow Guthrie, K. (2015). Interview-based qualitative research in emergency care Part II: Data collection, analysis and results reporting. *Academic Emergency Medicine: Official Journal of The Society for Academic Emergency Medicine*, *22*(9), 1103–1112. https://doi.org/10.1111/acem.12735

Regehr, C., Carey, M. G., Wagner, S., Alden, L. E., Buys, N., Corneil, W., Fyfe, T., Matthews, L., Randall, C., White, M., Fraess-Phillips, A., Krutop, E., White, N., & Fleischmann, M. (2021). A systematic review of mental health symptoms in police officers following extreme traumatic exposures. *Police Practice & Research*, *22*(1), 225–239. https://doi.org/10.1080/15614263.2019.1689129

Regehr, C., Goldberg, G., & Hughes, J. (2002). Exposure to human tragedy, empathy, and trauma in ambulance paramedics. *American Journal of Orthopsychiatry*, *72*(4), 505–513. https://doi.org/10.1037/0002-9432.72.4.505

Richard-Devantoy, S., Olié, E., Guillaume, S., Bechara, A., Courtet, P., & Jollant, F. (2013). Distinct alterations in value-based decision-making and cognitive control in suicide attempters: Toward a dual neurocognitive model. *Journal of Affective Disorders*, *151*(3), 1120–1124. https://doi.org/10.1016/j.jad.2013.06.052

Richmond, R. L., Wodak, A., Kehoe, L., & Heather, N. (1998). How healthy are the police? A survey of lifestyle factors. *Addiction*, *93*(11), 1729–1737. https://doi.org/10.1046/j.1360-0443.1998.9311172910.x

Roberts, C., & Hyatt, L. (2019). *The dissertation journey: A practical and comprehensive guide to planning, writing, and defending your dissertation.* Corwin.

Roberts, K. A. (2019). Correlates of law enforcement suicide in the United States: A comparison with Army and firefighter suicides using data from the National Violent Death Reporting System. *Police Practice and Research*, *20*(3), 64–76. https://doi.org/10.1080/15614263.2018.1443269

Roberts, N. A., & Levenson, R. W. (2001). The remains of the workday: Impact of job stress and exhaustion on marital interaction in police couples. *Journal of Marriage and Family, 63*(4), 1052–1067. https://doi.org/10.1111/j.1741-3737.2001.01052.x

Roberts, N. A., Leonard, R. C., Butler, E. A., Levenson, R. W., & Kanter, J. W. (2013). Job stress and dyadic synchrony in police marriages: A preliminary investigation. *Family Process*, *52*(2), 271–283. https://doi.org/10.1111/j.1545-5300.2012.01415.x

Robertson, E. W. (2019). Implementation of a standardized screening protocol to improve post-traumatic stress disorder surveillance in first responders. *Journal of Occupational & Environmental Medicine, 61*(12), 1041–1044. https://doi.org/10.1097/JOM.0000000000001732

Robinson, H. M., Sigman, M. R., & Wilson, J. P. (1997). Duty-related stressors and PTSD symptoms in suburban police officers. *Psychological Reports*, *81*(3), 835–845. https://doi.org/10.2466/pr0.1997.81.3.835

Rouse, L. M., Frey, R. A., López, M., Wohlers, H., Xiong, I., Llewellyn, K., Lucci, S. P., & Wester, S. R. (2015). Law enforcement suicide: Discerning etiology through psychological autopsy. *Police Quarterly*, *18*(1), 79–108. https://doi.org/10.1177/1098611114563083

Rudofossi, D. (2009). *A cop doc's guide to public safety complex trauma syndrome: Using five police personality styles (death, value, and meaning).* Baywood Publishing Company

Salmona, M. S., Lieber, E., & Kaczynski, D. J. (2019). *Qualitative and mixed methods data analysis using Dedoose: A practical approach for research across the social sciences.* SAGE Publications.

Sandoval, E., & Southall, A. (2019, August 13). Two more N.Y. police officers die by suicide, bringing total to 9 this year. *The New York Times.* https://www.nytimes.com/2019/08/13/nyregion/nypd-officer-suicide.html

Sarantakos, S. (2005). *Social research* (3rd ed.). Palgrave MacMillan.

Schaible, L. M., & Gecas, V. (2010). The impact of emotional labor and value dissonance on burnout among police officers. *Police Quarterly*, *13*(3), 316–341. https://doi.org/10.1177/1098611110373997

Schilling, R., Colledge, F., Ludyga, S., Pühse, U., Brand, S., & Gerber, M. (2019). Does cardiorespiratory fitness moderate the association between occupational stress, cardiovascular risk, and mental health in police officers? *International Journal of Environmental Research and Public Health*, 16(13), 2349. https://doi.org/10.3390/ijerph16132349

Scupin, R. (2012). *Cultural anthropology: A global perspective* (8th ed.). Pearson.

Shneidman, E. S. (1993). *Suicide as psychache: A clinical approach to self-destructive behavior.* Jason Aronson, Inc.

Solomon, K., & McGill, J. M. (2015). *The price they pay.* Solomon.

Soomro, S., & Yanos, P. T. (2019). Predictors of mental health stigma among police officers: The role of trauma and PTSD. *Journal of Police and Criminal Psychology*, *34*(2), 175–183. https://doi.org/10.1007/s11896-018-9285-x

Stanley, I. H., Hom, M. A., & Joiner, T. E. (2016). A systematic review of suicidal thoughts and behaviors among police officers, firefighters, EMTs, and paramedics. *Clinical Psychology Review*, *44*(March), 25–44. https://doi.org/10.1016/j.cpr.2015.12.002

Stephens, C., & Long, N. (2000). Communication with police supervisors and peers as a buffer of work-related traumatic stress. *Journal of Organizational Behavior*, *21*(4), 407–424. https://doi.org/10.1002/(SICI)1099-1379(200006)21:4<407::AID-JOB17>3.0.CO;2-N

Stevens, D. J. (2004). Origins of police officer stress before and after 9/11. *The Police Journal: Theory, Practice and Principles*, *77*(2), 145–173. https://doi.org/10.1350/pojo.77.2.145.39119

Stogner, J., Miller, B. L., & McLean, K. (2020). Police stress, mental health, and resiliency during COVID-19 pandemic. *American Journal of Criminal Justice: AJCJ*, *45*, 718–730. https://doi.org/10.1007/s12103-020-09548-y

Streb, M., Häller, P., & Michael, T. (2013). PTSD in paramedics and sense of coherence. *Behavioral and Cognitive Therapy*, *42*(4), 452–463. https://doi.org/10.1017/S1352465813000337

Sugimoto, J. D., & Oltjenbruns, K. A. (2001). The environment of death and its influence on police officers in the United States. *OMEGA: Journal of Death and Dying*, *43*(2), 145–155. https://doi.org/10.2190/5MXX-TY46-AYTQ-0X8W

Sutton, J., & Austin, Z. (2015). Qualitative research: Data collection, analysis, and management. *The Canadian Journal of Hospital Pharmacy*, *68*(3), 226–231. https://doi.org/10.4212/cjhp.v68i3.1456

Swatt, M. L., Gibson, C. L., & Piquero, N. L. (2007). Exploring the utility of general strain theory in exploring problematic alcohol consumption by police officers. *Journal of Criminal Justice*, *35*(6), 596–611. https://doi.org/10.1016/j.jcrimjus.2007.09.005

Tang, N. K. Y., & Crane, K. (2006). Suicidality in chronic pain: A review of the prevalence, risk factors, and psychological links. *Psychological Medicine*, *36*(5), 575–586. https://doi.org/10.1017/S0033291705006859

Taylor, G. (2018). *Behavioral health survival for law enforcement: An intervention* [Doctoral dissertation, California State University Fresno]. Research Gate. No. 328676438. https://www.researchgate.net/publication/328676438

Telisak, M. (2019). Law enforcement officers' romantic relationships strengths: A mixed methods analysis (No. 27545611) [Doctoral dissertation, St. Mary's University (Texas)]. ProQuest. https://www.proquest.com/openview/d1adda6a93e64ac242fe3f9f45139cc5/1.pdf?pq-origsite=gscholar&cbl=51922&diss=y

Toch, H. (2002). *Stress in policing.* American Psychological Association.

Tucker, J. M. (2012). *What shapes police officer willingness to use stress intervention services? An empirical study of current factors in Pennsylvania* [Doctoral dissertation, Temple University]. Temple University Theses and Dissertations. https://scholarshare.temple.edu/bitstream/handle/20.500.12613/4148/Tucker_temple_0225E_11068.pdf?sequence=1

Tuttle, B. M., Giano, Z., & Merten, M. J. (2018). Stress spillover in policing and negative relationship functioning for law enforcement marriages. *The Family Journal*, 26(2), 246–252. https://doi.org/10.1177/1066480718775739

Turecki, G., & Brent, D. A. (2016). Suicide and suicidal behaviour. *Lancet*, *387*(10024), 1227–1239. https://doi.org/10.1016/S0140-6736(15)00234-2

Tyagi, A., & Dhar, R. L. (2014). Factors affecting health of the police officials: Mediating role of job stress. *Policing: An International Journal of Police Strategies and Management*, *37*(3), 649–664. https://doi.org/10.1108/PIJPSM-12-2013-0128

Van Derbeken, J. (2004, March 4). Limiting cars' lights, siren use may prevent police crashes. *Police1*. https://www.police1.com/police-products/vehicle-equipment/sirens/articles/limiting-cars-lights-siren-use-may-prevent-police-crashes-WJpJ5JkaPIF0FkD1/

van der Ploeg, E., & Kleber, R. J. (2003). Acute and chronic job stressors among ambulance personnel: Predictors of health symptoms. *Occupational and Environmental Medicine*, *60*(1), 40–46. https://doi.org/10.1136/oem.60.suppl_1.i40

Vila, B. (2000). *Tired cops: The importance of managing police fatigue.* Police Executive Research Forum.

Violanti, J. M. (2018). Police officer suicide. *Criminology and Criminal Justice.* Oxford University Press. https://doi.org/10.1093/acrefore/9780190264079.013.87

Violanti, J. M. (2010). Police suicide: A national comparison with fire-fighters and military personnel policing. *Policing An International Journal of Police Strategies and Management, 33*(2), (2010), 270–286. https://doi.org/10.1108/13639511011044885

Violanti, J. M. (1996). *Police suicide: Epidemic in blue* (1st ed.). Charles C Thomas.

Violanti, J. M. (2007). *Police suicide: Epidemic in blue* (2nd ed.). Charles C Thomas.

Violanti, J. M. (2004). Predictors of police suicide ideation. *Suicide & Life-Threatening Behavior*, *34*(3), 277–283. https://doi.org/10.1521/suli.34.3.277.42775

Violanti, J. M, Andrew, M. E., Mnatsakanova, A., Hartley, T. A., Fekedulegn, D., & Burchfiel, C. M. (2016). Correlates of hopelessness in the high suicide risk police occupation. *Police Practice and Research*, *17*(5), 408–419. https://doi.org/10.1080/15614263.2015.1015125

Wade, L. J.. (2021). *Resilience & wellness teams: A comprehensive maintenance plan for law enforcement officers* [Doctoral dissertation, DePaul University]. College of Education Theses and Dissertations. 199. https://via.library.depaul.edu/soe_etd/199

Walker, S., & Katz, C. (2013). *The police in America: An introduction.* McGraw-Hill.

Watanabe, K., Otsuka, Y., Shimazu, A., & Kawakami, N. (2016). The moderating effect of health-improving workplace environment on promoting physical activity in white-collar employees: A multi-site longitudinal study using multi-level structural equation modeling. *Journal of Occupational and Environmental Medicine*, *58*, 178–184. https://doi.org/10.1097/JOM.0000000000000590

Wuestewald, T., & Steinheider, B. (2006). Shared leadership: Can empowerment work in police organizations? *The Police Chief*, *73*(1), 1–7. https://www.policechiefmagazine.org/shared-leadership-can-empowerment-work-in-police-organizations/

Webster, J. H. (2013). Police officer perceptions of occupational stress: The state of the art. *Policing: An International Journal*, *36*(3), 636–652. https://doi.org/10.1108/PIJPSM-03-2013-0021

Welle, P. D., & Graf, H. M. (2011). Effective lifestyle habits and coping strategies for stress tolerance among college students. *American Journal of Health Education*, *42*(2), 96–105. https://doi.org/10.1080/19325037.2011.10599177

Wheeler, C., Fisher, A., Jamiel, A., Lynn, T. J., & Hill, W. T. (2018). Stigmatizing attitudes toward police officers seeking psychological services. *Journal of Police and Criminal Psychology*, *36*(1), 1–7. https://doi.org/10.1007/s11896-018-9293-x

Wilson, F. C., Poola, A. D., & Trew, K. (2012). Psychological distress in police officers following critical incidents. *The Irish Journal of Psychology*, *19*(3), 321–340. https://doi.org/10.1080/03033910.1997.10558150

Wirth, M. D., Andrew, M. E., Burchfiel, C. M., Burch, J. B., Fekedulegn, D., Hartley, T. A., Charles, L. E., & Violanti, J. M. (2017). Association of shiftwork and immune cells among police officers from the Buffalo Cardio-Metabolic Occupational Police Stress study. *Chronobiology International*, *34*(6), 721–731. https://doi.org/10.1080/07420528.2017.1316732

Wong L. (2008). Data analysis in qualitative research: A brief guide to using NVivo. *Malaysian Family Physician: The Official Journal of the Academy of Family Physicians of Malaysia*, *3*(1), 14–20. PMID: 25606106; PMCID: PMC4267019.

Yanos, P. T., Vayshenker, B., Pleskach, P., & Mueser, K. T. (2016). Insight among people with severe mental illness, co-occurring PTSD, and elevated psychotic symptoms: Correlates and relationship to treatment participation. *Comprehensive Psychiatry*, *68*(July), 172–177. https://doi.org/10.1016/j.comppsych.2016.04.016

Yehuda, R., Golier, J. A., Tischler, L., Harvey, P. D., Newmark R., Yang, R. K., & Buchsbaum, M. S. (2007). Hippocampal volume in aging combat veterans with and without post-traumatic stress disorder: Relation to risk and resilience factors. *Journal of Psychiatric Research*, *41*(5), 435–445. https://doi.org/10.1016/j.jpsychires.2005.12.002

Yesudas, E. H., & Lee, T. M. C. (2015). The role of the cingulate cortex in vicarious pain. *BioMed Research International*, *2015*(1), 1–10. Article 719615. https://doi.org/10.1155/2015/719615

Yetkin, S., Aydin, H., & Özgen, F. (2010). Polysomnography in patients with post-traumatic stress disorder. *Psychiatry & Clinical Neurosciences*, *64*(3), 309–317. https://doi.org/10.1111/j.1440-1819.2010.02084.x

Yin, R. K. (2009). *Case study research design and methods* (4th ed.). SAGE Publications.

Yin, R. K. (2013). *Case study research design and methods* (5th ed.). SAGE Publications.

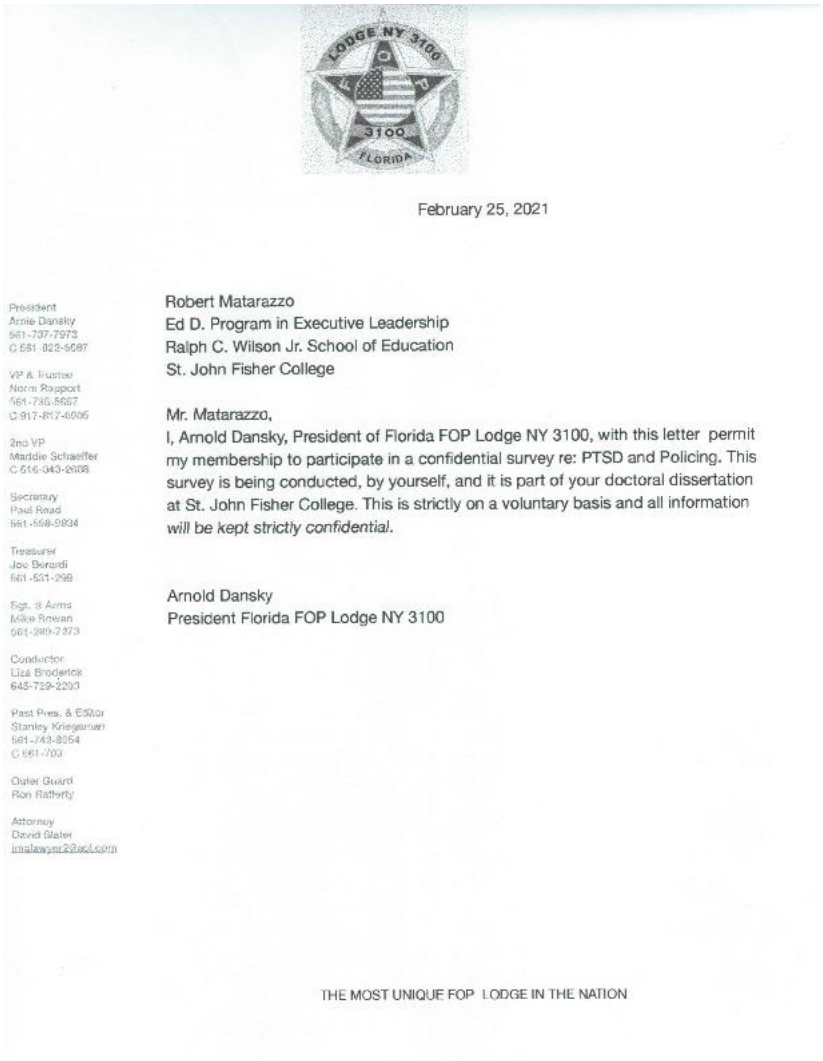
Young, K., & Cooper, C. (1997). Occupational stress in the ambulance service: A diagnostic study. *Health and Manpower Management*, *23*(4–5), 140–147. https://doi.org/10.1108/09552069710184418

Yun, I., & Lee, C.-H. (2015). Hazardous alcohol use among South Korean police officers: Examining predictions from general strain theory. *International Journal of Law, Crime and Justice*, *43*(2), 194–213. https://doi.org/10.1016/j.ijlcj.2014.08.002

Zhang, J., & Lester, D. (2008). Psychological tensions found in suicide notes: A test for the strain theory of suicide. *Archives of Suicide Research*, *12*(1), 67–73. https://doi.org/10.1080/13811110701800962

Appendix A

Formal Approval from FOP NY Lodge 3100 to Recruit Participants



February 25, 2021

President
Arnie Dansky
561-737-7973
C 561-822-5687

VP & Trustee
Norm Rapport
561-736-5667
C 917-817-6906

2nd VP
Maddie Schaeffer
C 516-343-2698

Secretary
Paul Read
561-558-9834

Treasurer
Joe Berardi
561-531-299

Sgt. @ Arms
Mike Rowan
561-289-7373

Conductor
Liza Broderick
645-729-2200

Past Pres. & Editor
Stanley Kriegsman
561-742-8054
C 561-703

Outer Guard
Ron Rafferty

Attorney
David Slater
[illegible]

Robert Matarazzo
Ed D. Program in Executive Leadership
Ralph C. Wilson Jr. School of Education
St. John Fisher College

Mr. Matarazzo,
I, Arnold Dansky, President of Florida FOP Lodge NY 3100, with this letter permit my membership to participate in a confidential survey re: PTSD and Policing. This survey is being conducted, by yourself, and it is part of your doctoral dissertation at St. John Fisher College. This is strictly on a voluntary basis and all information *will be kept strictly confidential.*

Arnold Dansky
President Florida FOP Lodge NY 3100

THE MOST UNIQUE FOP LODGE IN THE NATION

Appendix B

Recruitment Email for Participants Florida FOP NY Lodge 3100

DATE

SUBJECT: Research Study Entitled: *From Behind the Badge: Unearthing Perspectives of Retired Police Officers on Stress*

Dear FOP NY Lodge 3100 Member –

My name is Robert Matarazzo, I am a doctoral candidate at St. John Fisher College in the Ed.D. Program in Executive Leadership. I am also a retired police captain with the New York City Police Department (NYPD). I am conducting research as part of my doctoral studies on the perspectives of retired police officers on the concepts of stress, burnout, and the perceptions of organizational support by retired NYPD police officers.

I am reaching out to you to ask for your participation in my study. The study will be conducted by telephone during which time I will be asking 11 semi-structured questions. The interview will last for approximately 60-90 minutes and will be recorded using an audio device. If you are interested in participating, please contact me by e-mail at: _____@sjfc.edu. I will respond to you and send you a recruitment letter, demographic survey, and "Statement of Informed Consent for Adult Participant" form. Once these documents are completed, return them to me at my email address.

Thank you for your consideration and I look forward to hearing from you.

Kind regards –

Robert A. Matarazzo

Appendix C

SJFC Informed Consent Formed

From Behind the Shield: Unearthing Perspectives of Retired Police Officers on Stress

SUMMARY OF KEY INFORMATION:

- You are being asked to be in a research study of the perspectives of retired police officers on stress and perceptions of organizational support. As with all research studies, participation is voluntary.
- The purpose of this study is to examine the concepts of stress, burnout, and perceived organizational support, as well as the lived experiences that influenced the behavior of retired New York City Police Officers.
- Approximately 12-15 people will take part in this study. The results will be used for police leadership to develop a better understand the retired NYPD officer's experiences involving stress, and burnout, as well as how willing officers are to pursue and accept help offered by the organization.
- If you agree to take part in this study, you will be involved in this study for approximately 60-90 minutes. The interview will involve 11 questions and be conducted by telephone during April of 2022 and will be scheduled at a time convenient for the participant. It is anticipated that only one interview time will be needed.

- Retired officers who participate will be asked to complete a demographic survey which will be included with this form. More detail will be provided in the consent form.
- We believe this study has no more than minimal risk. 60-90 minutes will be required on one occasion to complete.
- You may not directly benefit from this research; however, we hope that your participation in the study may inform police organization leadership on issues of police officer stress and the perceptions of organizational support efforts.

DETAILED STUDY INFORMATION:

You are being asked to be in a research study of the perspectives of retired police officers on stress, burnout, and perceived organizational support. This study is being conducted by telephone. This study is being conducted by: Robert A. Matarazzo under the supervision of Dr. Kishon Hickman, in the EdD Program in Executive Leadership at St. John Fisher College. You were selected as a possible participant because you are a member of the Fraternal Order of Police (FOP), Lodge 3100 and are a retired veteran police officer of the New York City Police v. 82319 Department (NYPD) who has completed at least 20 years of service with a minimum of 5 years patrol experience and retired no more than 10 years. Please read this consent form and ask any questions you have before agreeing to be in the study.

PROCEDURES:

If you agree to be in this study, you will be asked to do the following:

You will be asked to participate in a semi-structured interview by telephone during the month of April of 2022. The interview will be a one-time interview and will last

approximately 60-90 minutes. Once we agree on a convenient interview date and time, I will send you an email with a meeting confirmation. I will also send you a reminder/confirmation email approximately 24 hours before our scheduled interview. I will contact you at the phone number you provided. During the course of the interview, you will be asked 11 questions related to this study. All participants in this study will be assigned a pseudonym to preserve confidentiality of the participants. In order to accurately document participant responses, I will record the interview using voice recording device. The recordings will be transcribed. You have a right to decline audio recording without any penalty. Agreeing to audio recording of the interview is a necessary condition of the study. Please see the Statement of Consent.

COMPENSATION/INCENTIVES:

You will not receive compensation/incentive.

CONFIDENTIALITY:

The records of this study will be kept private, and your confidentiality will be protected. In any sort of report the researcher(s) might publish, no identifying information will be included. Each participant will be assigned a pseudonym to preserve confidentiality. Identifiable research records and audio recordings will be stored securely and only the researcher(s) will have access to the records. All data will be kept in a locked filing cabinet in the researcher's office and on a password protected laptop computer by the investigator(s). Only the researcher will have access to this information. All study records with identifiable information, including approved IRB documents, tapes, audio recordings, transcripts, and consent forms, will be destroyed by shredding and/or deleting after 3 years.

VOLUNTARY NATURE OF THE STUDY:

Participation in this study is voluntary and requires your informed consent. Your decision whether or not to participate will not affect your current or future relations with St. John Fisher College. If you decide to participate, you are free to skip any question that is asked. You may also withdraw from this study at any time without penalty. v. 82319

CONTACTS, REFERRALS, AND QUESTIONS:

The researchers(s) conducting this study: Robert A. Matarazzo. If you have questions, you are encouraged to contact the researcher(s) at _____@sjfc.edu or by phone at (___) ___-____. You may also contact the dissertation committee chair, Dr. Kishon Hickman at (___) ___-____ or by email at _____@gmail.com. The Institutional Review Board of St. John Fisher College has reviewed this project. For any concerns regarding this study/or if you feel that your rights as a participant (or the rights of another participant) have been violated or caused you undue distress (physical or emotional distress), please contact the SJFC IRB administrator by phone during normal business hours at (585) 385-8012 or irb@sjfc.edu. If you experience emotional or physical discomfort due to participation in this study, please contact your personal healthcare provider or an appropriate crisis services provider.

STATEMENT OF CONSENT:

I am 18 years of age or older. I have read and understood the above information.

I consent to voluntarily participate in the study.

Signature:_____ Date: _____

Signature of Investigator:_____ Date: _____

Interviews will be conducted by telephone. Audio recording is a requirement of participation in this study.

By signing below, I agree to be audio recorded/transcribed _____ Yes ____ No

(If no, I understand that audio recording/transcribing is a requirement of this study).

Signature:_____ Date: _____

Signature of Investigator:_____ Date: _____

Your participation in this study is voluntary. If you decide not to participate or if you stop participation after you start, there will be no penalty to you. All interviews will be audio recorded and transcribed.

Please keep a copy of this informed consent for your records.