

THE MAINTENANCE OF POLICE OFFICER HEALTH THROUGH

A MANDATORY WELLNESS PROGRAM

SCHOOL OF POLICE STAFF AND COMMAND

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An applied research project submitted to the Department of Interdisciplinary

Technology as part of the School of Staff and command Program

ABSTRACT

This applied research project examined the effectiveness of law enforcement agencies in responding to the physical and mental well being of police personnel. Private sector and police department policies, employee assistance programs, as well as risk management actions were examined and compared.

The intent of this research was to evaluate past and present methods that police agencies utilize in regards to police officer wellness, and to investigate and offer realistic alternatives and methods for addressing these issues. The research I conducted identified some of the causes of police stress and related health issues (psychologically and physically). I have also reviewed innovative techniques pertaining to stress management and have presented a logically based program to address these most concerning issues.

Although law enforcement agencies have made progress in addressing employee wellness issues, few regularly monitor or educate their officers relative to these concerns. My research did however, identify a number of law enforcement agencies that have fashioned and use very progressive and innovative programs pertaining to police officer wellness. These agencies unfortunately are not the norm but the exception.

Through the implementation of a program, which regularly and consistently monitors the physical, and mental well being of police officers, I believe that many of the health issues, which are frequently associated with police officers, can be dramatically reduced.

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INTRODUCTION

According to a study completed in 2000 by the National Center for Health Statistics, the average age that a male at birth can expect to live is 76.9 years. A female at birth can expect to live 79.5 years. Why is it then that a police officer can only expect to live an average of 66 years? (Violanti, 1996). Police officers compared to others in the general public have an increased incidence of heart disease and cancer. In addition, police officers experience alarmingly high rates of divorce, alcoholism and suicide.

The desired outcome of any preventative maintenance program is to eliminate or arrest problems before they become issues of a major concern. Police departments perform regular maintenance on firearms, vehicles and other equipment, and therefore recognize the importance of this process. Why is it then that a regular maintenance program for the officers themselves seems to elude most police agencies?

The research that I conducted clearly indicated that a wellness program is cost effective, actually returning a profit on the money invested. (Chart 1). This is based on reduced absenteeism and health care costs and claims. (Chart 2). It can also be presumed that a mentally and physically fit officer will respond more appropriately in a variety of situations that they encounter which would lessen or eliminate excessive force actions and complaints, therefore reducing liability claims. The actual costs associated with a wellness program can be defrayed by partnering with insurance companies and other businesses that benefit directly and indirectly from such a program.

Most large metropolitan police agencies have a risk management and/or Human resources division. One of the functions of such a division is to monitor employee health issues. This can include injuries requiring leave from work as well as other health

concerns. I believe that the accountability for creating and maintaining a wellness program should be in part, the responsibility of these divisions. I find it hard to believe that coordinators within these sections do not understand the dynamics and benefits of a wellness program.

My own agency, the Wayne County Sheriff's Department, has approximately 1500 officers. The department has no wellness program. Some of the divisions of the Sheriff's department do have weight and exercise equipment, which was either bought with money from the union or donated by individual officers. The police union has also negotiated nominal fees for health club memberships. Major insurance companies periodically sponsor health screenings, however the information pertaining to the screenings is not consistently forwarded to employees.

Many factors correlate to one's health and longevity, including hereditary traits, stress exposure levels, as well as lifestyle choices (smoking, drinking, lack of exercise).

As a police recruit, emphasis is placed on both physical and mental fitness. The initial hiring process mandates certain physical fitness requirements as well as a psychological testing process. Few police agencies however, continue with an assessment of the well being of its officers throughout their career. Current methods to address police officer wellness (Employee Assistance Programs, voluntary fitness programs) are inherently flawed.

The impact of an unhealthy or mentally impaired police officer has implications not only for the individual officer, but society as a whole. Officers operating under severe and chronic stress are at greater risk for error, accidents and overreaction, which can

compromise their performance, jeopardize public safety and pose significant liability costs to the organization.

BACKGROUND AND SIGNIFICANCE

Life is stressful no matter what profession you are in. The daily issues that everyone encounters are a source of stress. Law enforcement personnel however, deal on a regular basis with an assortment of unique situations and stressors.

The physical and mental effects of stress are well documented. Similarly, the effects of a career in law enforcement have long noted that police officers are susceptible to the resultant consequences of both acute and chronic stress. Officers are at a greater risk to die from heart disease and certain forms of cancer. Police officers are six times more likely to commit suicide than a member of the general public (Violanti, 1996). Divorce rates among police officers are staggering.

Many of the veteran police officers, which I have been acquainted with, show signs of physical and mental impairment at some level. These observations are consistent with the maladaptive and resultant effects of chronic stress. Combat veterans of World War I and II were labeled as “shell shocked” for their responsive reactions to stress. We recognize this today as posttraumatic stress disorder (PTSD).

According to author Frank Parkinson in a 1993 book entitled Post-Trauma Stress, “the very real problems caused by a traumatic event may be hidden away for many years, only to emerge later with even more disturbing effects.” These shattered emotional experiences can cause problems that include;

- Damaged health

- A breakdown of relationships
- A lowered capacity to cope in all areas of life including marriages and the workplace

Psychological debriefing helps officers come to terms with their experiences and reduce the possibility of deeper psychological problems emerging at a later time.

In his book titled Post Traumatic Stress Disorder, author L. Ken Rogers outlines his experience as a Police officer who was involved in an on duty shooting which subsequently resulted in his diagnosis of PTSD. Rogers recalled “I was not feeling well. My stomach was constantly upset. I wasn’t eating or resting as I normally did, and normal now seemed so long ago. I was getting pains in my chest that certainly had me worried. It seemed to me the pains came out of no where. I wasn’t doing anything physically strenuous. But at the time, I was certain that physical pains came from physical injuries. It would be later when I learned just how connected the mind and the body are.”

Frequently, officers disconnect from their feelings, values and sense of self. Continuous low-grade stressors and the periodic major incident causes traumatic stress. (Table1).

In the past, a typical response to an officer with a problem (drinking) was to ignore the issue or maybe assign the officer to desk duties. My own observations at the beginning of my career, verified that this practice was still in place. I recall two officers specifically who would be intoxicated at work nearly everyday. Supervisors did nothing to address the problem. Another method used for dealing with these issues was to grant an officer leave.

The first in-house stress units began appearing around the 1970's. In a 1975 symposium sponsored by the National Institute of Occupational Safety and Health, psychological stress factors in policing and techniques for adapting to stress was studied. The preface of the report stated " research over the past several years has implicated psychological stress as an important casual factor in coronary heart disease, gastrointestinal malfunction, dermatological problems, severe nervous conditions, neurosis and various other physical and mental disorders. In comparison to other occupations, police officers seem to have unusually high rates of many apparently stress-related illnesses."

Police officer wellness programs began appearing in the 1980's. Employee assistance programs became prominent in the 1990's. The importance of critical incident debriefing was recognized and implemented. The agencies, which instituted such programs, were progressive examples of how police agencies should manage and care for their officers. Most departments today, still do not have a system to monitor or encourage police officer wellness.

Law enforcement has made some progress as it relates to addressing police officer wellness issues. However, there is much room for improvement. Many employee assistance programs seem to be more of a facade of help rather than being effective at assisting officers in distress. The programs are reactive as opposed to proactive. Additionally, the use of such programs is in many cases determined by the ability of supervisory staff to consult with and direct employees to the services available.

During my career, I have been exposed to three major critical incidents, two officer involved shootings and an aircraft disaster. The mechanism for debriefing was in place,

however the request for assistance was delayed based on the supervisor's lack of knowledge. There is a great deal improvement needed in this area.

Police stress issues involve both acute and chronic stressors. An officer can be thrust into a violent unexpected confrontation (burst stress) or have to deal with regular levels of stress which are unique to law enforcement personnel. These issues include being an authority figure, thinking about the consequences of making errors,(If a police officer is discharged from his/her job, it is unlikely that they will work in law enforcement again) and the fear associated with uncertainty. A "routine" dispatch call or occurrence can without warning, turn into a life or death situation.

Police are conditioned to respond to a variety of situations and be under complete emotional control while doing so. Officers suppress emotions like anger, fear, and grief. Psychotherapists generally advocate the expression of such emotions. Suppression of such emotions has negative consequences on the immune system. This conditioning, over time carries over into the private life of the officer.

The physical health of an officer declines as well. Many of the diseases affecting an officer have been associated with stress. Maladaptive behaviors like drinking, smoking and overeating contribute significantly to this deterioration.

Police agencies are recognizing the liability consequences of unfit police personnel. Departments can be liable for the retention of unfit personnel. The Levee District of the Louisiana Police Department states the following relative to the employment of Officers;

“An officer's well-being and general fitness encompasses a large part of liability: both to the officer and to the department in general. All officers must pass annual physical fitness tests as required. An officer found medically and physically unfit for duty

after an examination by a qualified physician shall be given a period of six weeks in order to make him/herself physically fit for active duty pending a physician's approval. Upon failure to render himself physically fit for duty the department may terminate the officer for not being able to fulfill the requirements set forth". The Saint Paul Minnesota police department outlines the following in its Physical Fitness program; "The Saint Paul police department established the Physical fitness program in July, 1981 for all sworn personnel. The program was established in response to mounting evidence of the benefit physically fit officers are to the department, the citizens of Saint Paul, and to the officers themselves. One of the main reasons the Department established and maintains a fitness program is out of an obligation to the community. A police department has an obligation to recruit and maintain officers that are properly trained and physically capable of responding to the needs of all citizens. Legal liability has become another justification for a physical fitness program. Departments without fitness programs may be held legally responsible for having unfit officers in public service. Departments may be liable in situations where citizens are injured because officers are unfit and incapable of adequately performing their duties. The Saint Paul Police Department also believes it has an obligation to the officers. The National Institute of Health and Occupational Safety reports that law enforcement personnel have a higher incidence of stress induced injury and illness, particularly cardiovascular and lower back problems, than the average population. Fitness programs have a direct impact on reducing the risk of these stress-related illnesses and improving job performance, overall alertness and responsiveness that can be directly save officer's lives". Further, U.S. Surgeon General Richard

Carmona, a former police officer stated the following in a memorandum to Law enforcement as detailed March 2, 2003 by CNN;

“being overweight or obese directly impacts job performance when your trying to defend the public safety. Remember that when you are called upon, you must be ready to back up your partner or a citizen. To me, failing at this calling when challenged would be a fate worse than death”. “After we got rid of the physical fitness standards, Carmona said, It was problematic for most of us because I saw many of my peers who didn’t do the exercise that they needed to. They didn’t stay in physical condition to be out on the streets. And the risk that you entertain is not only yourself and being not prepared to respond to the worst-case scenario call, but also the potential harm that you put your fellow officers in because you’re not physically able to respond appropriately”.

These statements support the need for the mandatory monitoring of police fitness (physical and psychological). Police agencies have a responsibility not only to the public, but also to the individual officer for establishing and coordinating this initiative.

Fast food is a convenient and quick way to eat. A contributing factor for heart disease and a wide variety of other illnesses is an improper diet. Police officers are notorious for consuming a diet, which is high in fat. This type of diet is a contributing factor for the development of arteriosclerosis or hardening of the arteries. This occurs in part, due to an increase in LDL or “bad” cholesterol. Diet is obviously an individual choice, however proper education about nutrition can have an influence on what a person consumes. Most fast food restaurants currently offer many menu items, which are low in fat, sodium and cholesterol.

. The American Heart association recommends limiting fat consumption to less than 30 percent of daily calories. This translates into about 50-80 grams per day. Additionally, the AHA recommends no more than 300 milligrams of cholesterol per day.

Fast food is also high in sodium content. The Food and Nutrition Board of the national Academy of science Research council has estimated that an “adequate and safe” intake of sodium is 1,100 to 3,300 milligrams a day, the equivalent of approximately ½ to 1 ½ teaspoons of salt. Americans on average, consume at least twice the amount-2, 300 to 6900 milligrams of sodium daily. High sodium intake can result in high blood pressure.

One aspect of a competent wellness program is nutritional education and health screenings. This component can include blood pressure testing, cholesterol analysis and heart stress testing.

LITERATURE REVIEW

The study of police stress and stress reduction techniques was presented in a 1975 symposium conducted by the U.S. Department of Health, Education, and Welfare. Although this study occurred over twenty-five years ago, much of the information contained within the report is accurate and informative by today’s standards as it relates to police stress issues. Unfortunately, these early findings have influenced only a few police agencies today who have implemented a wellness program.

A book titled “Stress and the Police Officer” (Ellison, 1983), outlined many innovative stress reduction techniques which are current by today’s standards. These techniques included biofeedback, meditation, as well as progressive relaxation.

“Wellness, in the workplace, How to plan, implement and evaluate a wellness program” (Sherman, 1998) outlined successful components of a wellness program which

was supported by studies which documented the cost effectiveness and benefits of a workplace wellness program.

The Institute of Heartmath is a nonprofit organization, which conducts studies and research into physiological and psychological stress and the effectiveness that certain self-management skills, has in coping with stressors. A study (McCrary, R., Institute of Heartmath,publication 99-075) completed by Heartmath titled “ The impact of self-management skills program on physiological and psychological stress in police officer’s” demonstrated the effectiveness of stress reduction techniques as it pertained to a variety of stress incidents that an officer is likely to encounter. Sixty four Police officer’s were studied over a sixteen week period in a variety of stress induced scenarios. The officers were taught various coping skills which were developed by Heartmath. Officer’s improved in their responses to the stressors by 58%-83%. It was evident by the results of this study that certain stress related responses can be mitigated to some level with proper stress reduction and management techniques. Therefore, it is appropriate for these type of management skills to be incorporated into a wellness program.

A total of twelve individual police officer wellness plans were reviewed for this research. Three separated corporate wellness plans were examined. The corporate wellness programs were far more comprehensive than even the best law enforcement plans. Even though a great amount of supportive research has been available for quite some time, most law enforcement agencies today either have no wellness program or have a wellness program, which is inadequate in all of the essential components needed for a competent program.

Author and former police officer L. Ken Rogers outlined in his book “ Post traumatic Stress Disorder: A Police Officer’s Report,(Rogers 1999) the tremendous psychological and physical toll that a critical incident (shooting) can have on an officer. Some police departments still believe that Officers should not suffer from reactions to critical events. These stress reactions are normal responses to abnormal events. The current acceptance of this theory has improved with education and acknowledgement relating to critical incident response by emergency personnel.

The research has supported the assessment that law enforcement is generally far behind corporate America relative to wellness program implementation and competency. Ironically, the tremendous stressors, which accompany law enforcement personnel in their career, appear to have no bearing on the utilization of a wellness program.

PROCEDURES

The primary source of material, which was reviewed relative to this research of Police wellness, was current police and private sector wellness programs and policies. Secondary sources of analysis were from related Internet web sites, books, articles and research studies. Additionally, I spoke by telephone to a total of four wellness coordinators from two police agencies (Los Angeles Police Department and the Dallas Police Department) and two Private sector corporate representatives (Paychex and Coors).

Police officers and police agencies are under increased scrutiny to provide quality services to the citizens that they serve. The analysis and questioning of police actions will continue to be an issue as law enforcement proceeds into the 21st century.

The process of hiring and maintaining qualified and competent personnel is a critical area of importance.

Accordingly, police agencies and Risk management divisions of municipalities must formulate strategies, which ensure the education and physical/mental health of police personnel. A comprehensive and mandatory wellness plan is an important component of such a plan.

In addition to the implementation of such programs, the public must be further educated about the physical and psychological impact that a career in law enforcement can have to officers. Risk management divisions should form alliances with insurance companies and private sector corporations to maximize the cost effectiveness of these programs.

RESULTS

Law enforcement as a whole is far behind corporate America as it relates to competent wellness programs for employees. Most large corporations employ wellness coordinators and possess a comprehensive wellness program.

My review of Michigan police agencies relative to wellness/fitness programs revealed that few have the necessary components to qualify as a competent wellness program. The agencies that were identified with some type of wellness program, generally offered a monetary incentive for participation in an annual fitness assessment which consisted of various fitness tests (push ups, sit ups, timed run). These police departments generally lack the components of health assessments, nutritional counseling, and other health related information. Some of the agencies did require officers to submit to an annual health physical.

I discovered several police agencies outside of Michigan, which have comprehensive wellness programs, which were comprised of the main components, which I outlined in this research. I was unable to find any police agency, which regularly assesses the mental well being of their officers. Employee assistance programs are utilized only after a problem becomes apparent. My belief is that regular mental health assessment and appraisals may reflect some of the same benefits that mandatory physical health assessments do. This being the detection of problems when they are in the early stages of development. The correlation is that the earlier the detection, the greater the chance for recovery.

Data was reviewed from established corporate wellness programs, which revealed that a wellness program is cost effective, frequently returning a profit on the funds spent to support the program. The benefits associated with this effectiveness included reduced health care claims and absenteeism as well as higher levels of employee productivity. The early detection of disease associated with regular health assessments has saved lives.

With the obvious benefits that coincide with a wellness program, it is disturbing that law enforcement agencies do not utilize or have policies relating to the health welfare of their officers.

DISCUSSION/IMPLICATIONS

The psyche of a police officer is not conducive to admitting a problem exists or seeking voluntary help. Police officers are trained to be in charge of their emotions at all times. When a police officer responds to a call for service, he/she is expected to solve the problem at hand. A perception of a loss of control or “chink in the armor” is disturbing to

the officer. It is for these reasons that I believe that in addition to the physical wellness issues, a regular and mandatory psychiatric evaluation and assessment of officers should occur. The reality is that the stigma associated with the acknowledgement of a problem (alcoholism, depression, and posttraumatic stress reactions) is still alive and wells in most police departments. When word gets out about these issues, officers are labeled as weak, defective or incapable of properly performing their duties. This further compounds the desire of an officer to voluntarily seek assistance. In many cases it is only when the problem reaches a monumental level that help is sought. By this time, the ability to treat or correct the issues associated with the problem are deeply ingrained.

With the research and information available, why aren't most police personnel afforded the benefits of a wellness program?

This brings to mind the Malice Green death, which occurred in the city of Detroit. The administrators were quick to cast blame on the veteran officer's who were involved in the incident. Not one of the administrators took responsibility for the lack of training and alternative force options which were unavailable to the officers at the time.

Protection and care of law enforcement personnel should be a top priority of every department. The effective development of professional police service demands this.

RECOMMENDATIONS

Law enforcement agencies can acquire a great deal of information regarding effective employee wellness issues/programs from corporate America. The majority of large companies now have some form of an employee wellness program. Even though there are

a number of issues, which are unique to law enforcement, the methods for dealing with these wellness issues are essentially the same.

The St. Paul Minnesota Police Department has maintained a progressive wellness Program since 1981. I have reviewed the content of the program and have found it to be a model program for law enforcement. The program includes medical screenings and testing, fitness assessment, and on duty exercise participation. The main headquarters of the police stations are fully equipped with treadmills, aerobicycles, stair climbers, universal gyms and free weights. Aerobics classes are offered every Monday, Wednesday and Friday. In addition to the emphasis on physical fitness, officers are offered various health promotion programs such as smoking cessation, weight loss, cholesterol control, and blood pressure management.

The program has resulted in reduced absenteeism, reduced health care claims, and better job performance. The medical screenings and evaluations have detected numerous, symptom-free cases of heart disease of which several immediate medical interventions were required (angioplasty, stent insertion, bypass surgery). The program has obviously saved lives.

The Los Angeles California Police Department has a unique component to their Employee assistance program. Sgt. Michael Apodaco is assigned as a coordinator of various mental/physical health issues involving their officers. Sgt. Apodaco will visit officers who are in the hospital regardless of whether it is a duty-related injury or not. Sgt. Apodaco assists and facilitates with the work leave and health care process. Additionally, Sgt. Apodaco assists in various ways with the families of hospitalized Officers. Sgt. Apadaco (Apadoco, personal communication, July 23,2003) indicated to

me by telephone that to his knowledge, this type of program assistance was not being conducted to this level anywhere else. Sgt. Apadaco further stated that the program has been well received and appreciated by his officers.

The demands and expectations of police officers by the general public as well as the respective administration of the department are tremendous. It is therefore reprehensible that most law enforcement agencies do not have or do not properly use some form of a wellness program to assess and maintain an officers physical and mental well being. It is just as important to continue with the maintenance of an officer's health as it is to evaluate the fitness of an officer during the initial hiring process.

Police departments should have a clear policy, which relates at least to mandatory health information, evaluations, and screenings. At the present time, many of the wellness/fitness programs in place within law enforcement are of a voluntary nature. Many of these programs offer a monetary reward as an incentive to participate.

It is likely that such a policy would prevent further deterioration of the mental and physical well being of personnel as well as saving lives through early detection of disease. Additionally, law enforcement officers should undergo regular psychiatric screenings and debriefings to address the stress-related issues that officer's encounter on a regular basis. Employee assistance programs and/or Department psychological services units should be fashioned to accomplish this.

A police officer can not be forced to exercise, eat properly, and follow a healthy lifestyle. I do believe though, that if a competent wellness program is presented and maintained from the time a police recruit graduates from the academy and throughout his/or her career, the likelihood that physical and mental wellbeing can be maintained is

dramatically increased. The success of established corporate wellness programs supports this.

I believe that a standardization of policy and procedure relating to law enforcement wellness should be implemented. The evidence is clear regarding the benefits of a wellness program. Likewise, the evidence is clear as it pertains to the effects a career in policing can bring. A number of police and fire departments have provisions within their retirement systems, which presume a duty disability for heart related diseases.

The state of Massachusetts is one such entity, which acknowledges police and fire personnel stress as a contributing factor in the development and occurrence of heart disease. Section 32:Section 94. States in part; “Notwithstanding the provisions of any general or special law to the contrary affecting the non-contributory or contributory system, any condition of impairment of health caused by hypertension or heart disease resulting in total or partial disability or death to a uniformed member of a paid fire department, or of the police force of the Massachusetts Bay Transportation Authority, or of the state police, or any public building police, or to any employee in the department of corrections, if he/she successfully passed a physical examination on entry into such service, or subsequently successfully passed a physical examination, which examination failed to reveal any evidence of such condition, be presumed to have been suffered in the line of duty, unless the contrary can be shown by competent evidence”.

The common practice, which exists in law enforcement today, is to leave the decision of physical and mental conditioning and evaluation to the individual officer. This method

is clearly not working. Agencies must implement mandatory involvement of officers in physical and psychological maintenance and evaluation programs.

Agencies will undoubtedly be met with resistance from police unions and members, however the welfare of citizens, police agencies and the officers themselves are at risk without such a program. The component of mandatory health screenings alone can detect disease and also emphasize the importance and benefits of such a program.

Through my research, I have concluded that the following areas to be vital to a competent wellness program;

Health risk appraisals and assessments – This would include proactive monitoring of blood pressure, serum cholesterol, heart stress testing, hepatitis and other communicable disease testing, and other blood analysis which would indicate the functioning and health of an individual.

Mental Health evaluations – Regular mental health assessments of police personnel. This is a key component of a law enforcement wellness plan. Currently, mental health assessments are only made when a problem surfaces either from the officer or the officer's supervisor. The referral is made to some form of an EAP (Employee Assistance Program), however the mechanism for use is flawed. The knowledge and actions of individual supervisors frequently determine the use of such programs. Department policies frequently define critical incidents and mandate debriefing and diffusing sessions with involved officers. I believe that regular mental health evaluations are appropriate and necessary based on the regular stress levels encountered by law enforcement personnel and are essential to the well being of police personnel. It is not

only the effects of critical incidents that affect officers, but also the daily situations and stressors, which have an effect on mental well being.

Challenges to mandatory psychological evaluations have been made and defeated. (PBA local 319 v. Township of Plainsboro, New Jersey, Docket no. Mid-C-173-98, order dated 10/30/98, Judge Jack Litner) . The ruling held that “legitimate government interest is present” and that “the psychological test program is constitutional so long as the police officer is protected from constitutional violations of privacy”. *Tingler v. City of Tampa*, 400 So.2d146 (Fla. App.1981) also upheld regularly scheduled evaluations of all serving officers. Evaluations based on cause have been repeatedly upheld by the judicial system.

Nutrition and weight loss- This component would include proper dietary habits which have been shown to maintain optimum body weight with lower rates of the three major chronic diseases- heart disease, diabetes, and cancer.

Stress management- this area would focus on a variety of ways in which the effects of stress can be reduced. Some of the methods are;

Progressive neuromuscular relaxation- systematic tensing and relaxing muscle groups.

Meditation- method for centering one’s emotions for the purpose of evoking a relaxation response.

Breathing- trained, controlled breathing techniques which reduce anxiety and induce relaxation.

Biofeedback- training techniques in which people are taught to improve their health and performance by using signals from their own body. It is scientifically based and validated by studies and clinical practice.

Some examples of more progressive forms of stress management include;

Learned optimism- a persons reaction to adversity is a learned a trainable behavior. Reframing negative thoughts and images to better conform to reality and psychological usefulness. This could be beneficial to the common behavior among many Police personnel- cynicism and pessimism.

Neuro Linguistic programming – method of changing thinking process and beliefs which support unhealthy habits (smoking, drinking, overeating)

Emotional Freedom technique- systematic tapping of meridian points accompanied by verbal affirmations. In many cases has eliminated phobias, fears, post traumatic stress reactions and depression.

Hypnosis- altered state of consciousness that heightens suggestibility and weakens critical judgement.

Stress Inoculation training- Anticipation and preparation of stressful events to build resistance to actual future and on going stressors.

Thought stopping- Using the command “stop” when a negative or self defeating image comes into the mind and replacing it with a reassuring or self accepting statement.

The Institute of Heartmath has developed stress reduction training, which it has labeled as the “Freeze-frame” technique. This stress and emotional self-management program provides officers with practical, easy to learn techniques that can be used to recognize and transform inefficient mental and emotional responses to stress in a short period of time. The techniques are specifically designed to allow officers to intervene the moment that stress is experienced. In essence, the technique instructs people to

consciously disengage from negative mental and emotional reactions as they occur by shifting their attention to the area of the heart, then self generating a positive or neutral feeling state. This prevents or reverses the body's normal destructive stress response and changes the bodily feedback sent to the brain, thus arresting psychological wear and tear. With practice, the technique can be applied in less than a minute. The claimed benefits of the program are;

- Increased awareness and self management of stress reactions
- Reduced distress, anger, sadness and fatigue
- Reduced sleeplessness and physical stress symptoms
- Increased peacefulness and vitality
- Reduced competition, improved communication and greater cooperation within work teams
- Improved work performance
- Greater confidence, balance and clarity under acute stress
- Quicker recalibration following acute stress
- Improved listening and relationships with families

Tobacco use prevention and cessation- providing education and access to smoke cessation programs.

Alcohol and substance abuse education- providing officers and their families with important information regarding substance abuse issues. Most employee assistance programs offer this, however it is in many cases only after an employee is forced to attend such counseling.

Financial planning and management- police officers low pay frequently cause problems and concerns. This type of education could assist in assisting with the stress associated with financial issues.

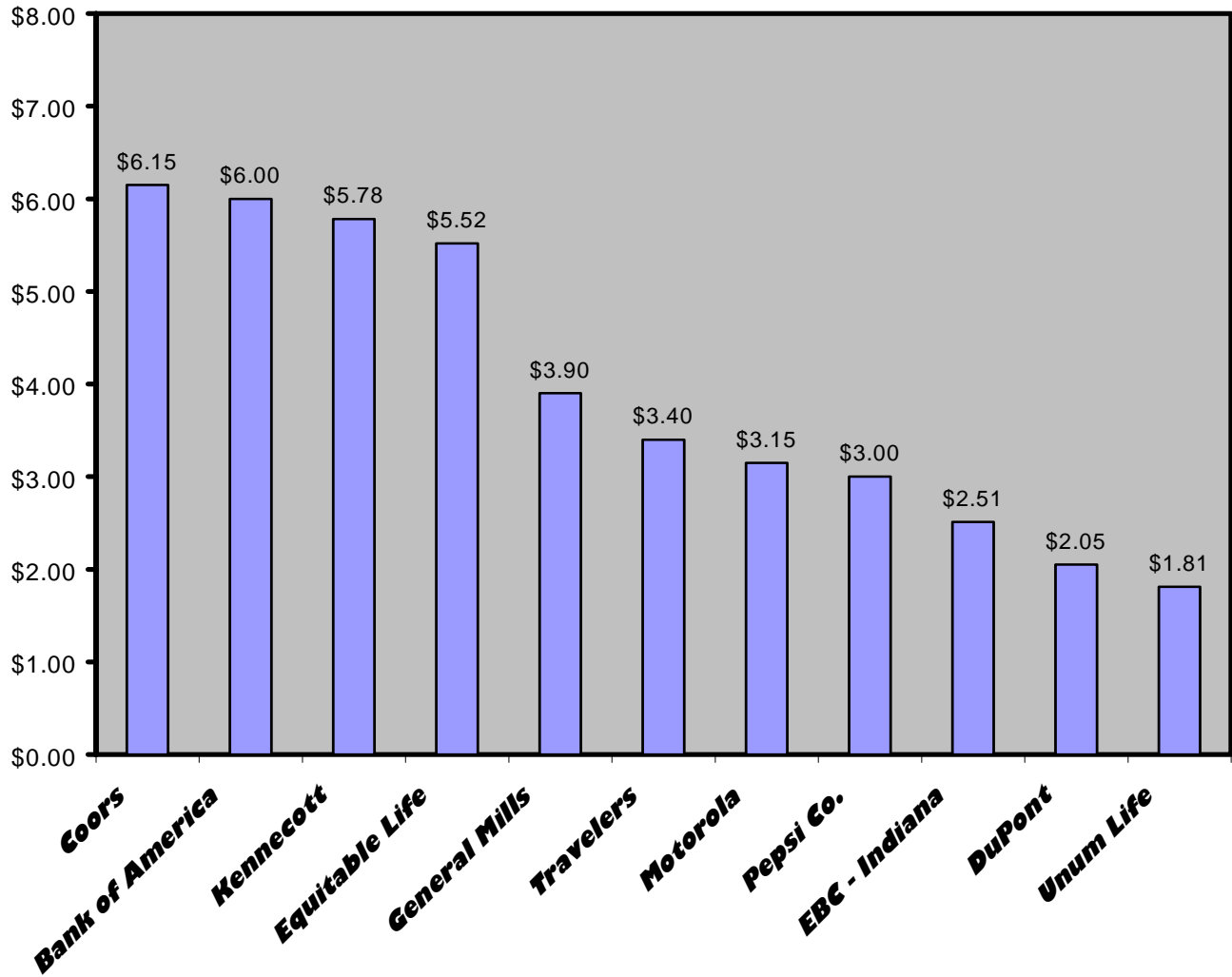
Some police academies give a course of instruction in wellness issues, however most still do not. By implementing a course of instruction at the academy, which teaches various stress reduction techniques.

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Dollars Saved for Every \$1 Invested

EMPLOYEE BENEFIT NEWS 1997 (CHART 1)



Yearly Claims Costs of an Unhealthy Employee EMPLOYEE BENEFIT NEWS 1997(CHART 2)

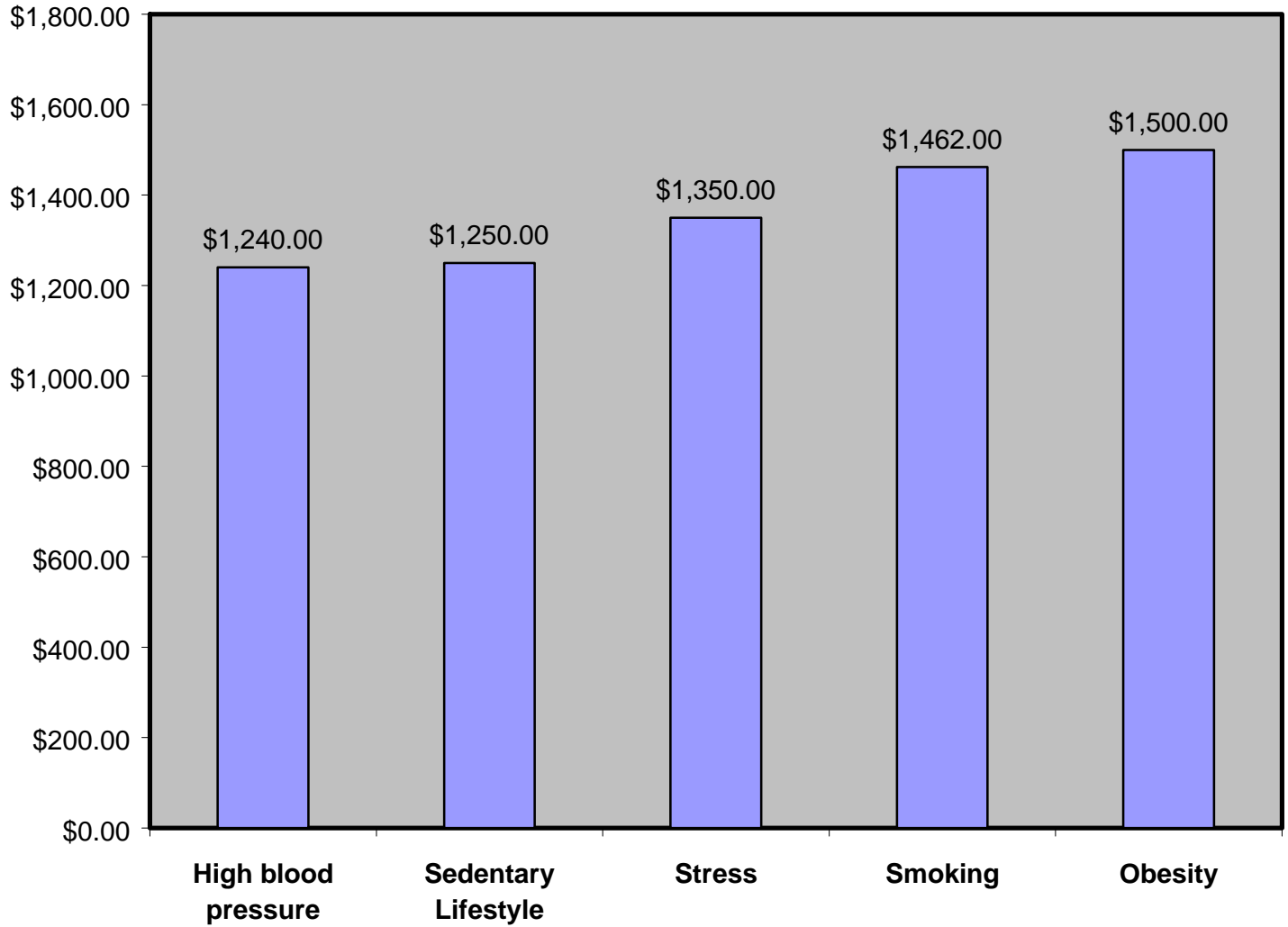


Table 1
Symptoms of stress that may be experienced during or after a traumatic incident

Physical*	Cognitive	Emotional**	Behavioral
Chest pain* Difficulty breathing* Shock symptoms* Fatigue Nausea/vomiting Dizziness Profuse sweating Rapid heart rate Thirst Headaches Visual difficulties Clenching of jaw Nonspecific aches and pains	Confusion Nightmares Disorientation Heightened or lowered alertness Poor concentration Memory problems Poor problem solving Difficulty identifying familiar objects or people	Anxiety Guilt Grief Denial Severe panic (rare) Fear Irritability Loss of emotional control Depression Sense of failure Feeling overwhelmed Blaming others or self	Intense anger Withdrawal Emotional outburst Temporary loss or increase of appetite Excessive alcohol consumption Inability to rest, pacing Change in sexual functioning

