

Models of First Responder Coping: Police officers as a unique population

Eamonn Arble, Ph.D. Psychology Department, Eastern Michigan University



First Responders

Emergency/Disaster Workers

Law enforcement officers/Police (861,000 in the U.S.)

Firefighters (1,100,000)

EMT

Coast Guard

Military





Job-Derived Risk Factors





Critical incidents

- Threats and violence:
 - Self, partner & family

Experiences:

- Domestic violence
- Dead child
- High-intensity activities:
 - Car chases
- Organizational stressors
- Low level, chronic stressors
 - Extended hours & shift work
 - Work-life balance



Professionally-Induced Stressors

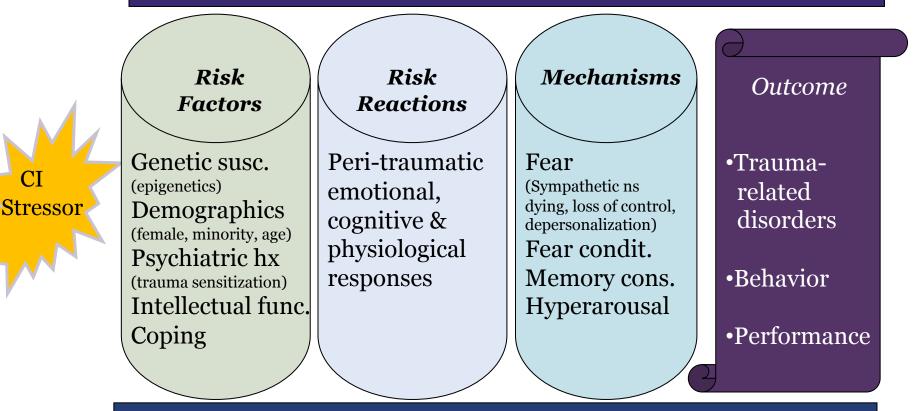
Non-Life Threatening

- Preparing for & thinking about possibly experiencing threatening events in the future
- Not really knowing how well a colleague or a team would function during close calls
- Gender-related discrimination
- □ Long hours of no activities



Stressor - PTSD Model

Personal and Environmental Resources



Maladaptive Behavior (alcohol, drugs, rigid avoidance-poor coping) Chronic, low-intensity work stressors New critical incident exposure



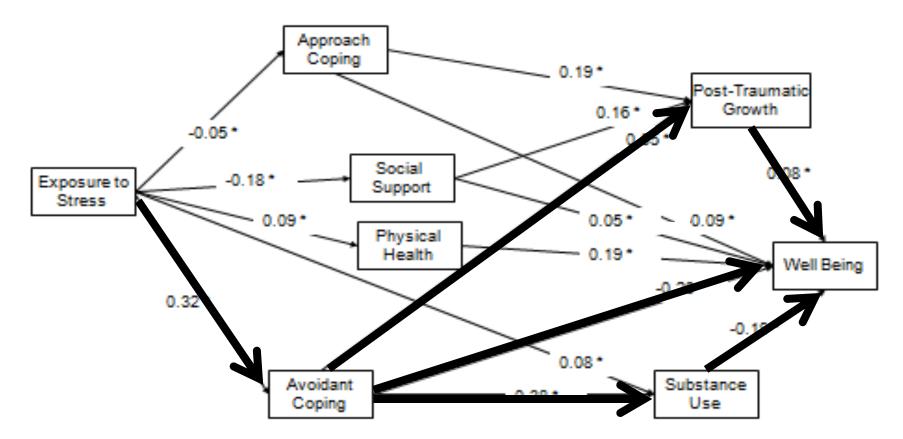
Large-Scale Observational Study

Agency	Number Solicited	Number Responding	Response Rate
Fire Department	840	380	45%
Coast Guard	424	248	58%
Military	2554	1594	62%
Police	1624	922	57%
Customs	778	559	70%
Total	6240	3703	59%

Arble E., Arnetz BB. 2015. *Stress Health, 33:* 223-32.



Outcomes in First Responders



Avoidant Coping in response to stress decreases well-being

EXCEPT when it leads to post-traumatic growth that fosters well-being

Arble E., Arnetz BB. 2015. Stress Health, 33: 223-32.



Police as a Unique Group

155 deaths/year 100,000 injured/year 22% on-duty deaths CVD

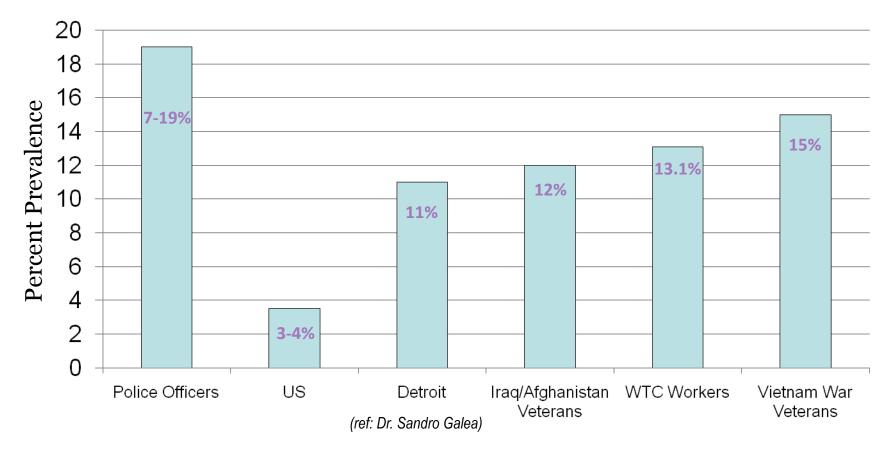
Common hazards:

- □ Vehicle-related deaths; traumatic injuries; cuts and bruises
- □ Injury rate among police & fire fighters 3 x average US job
- $\hfill\square$ 11.4/100 police officers assaulted on the job in 2007
- □ 9/11: 403 Emergency responders killed
- □ Many more injured
- □ Substantial numbers suffer from exposure-induced diseases



Prevalence of PTSD

Partial PTSD (impairment w/out all criteria) 34% of exposed police officers





Behavioral Differences in Police

	Police		Other first responders		
Variable	м	SD	М	SD	t
Exposure to stress	15.46	3.32	13.26	3.03	15.00
Well-being	36.28	7.78	36.00	7.46	0.84
Post-traumatic growth	12.76	2.31	12.66	2.52	0.81
Approach coping	8.33	1.65	8.27	1.81	0.78
Social support	10.76	2.27	10.29	2.40	4.30
Physical health	12.59	3.41	13.10	3.38	-3.47
Avoidant coping	6.50	2.09	6.15	1.93	3.77
Substance use	3.46	1.03	3.62	1.25	-2.88

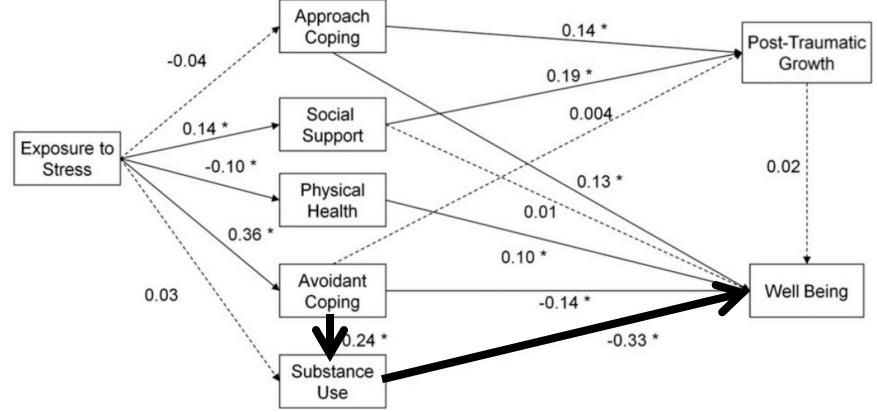
N = 917 police Compared to other first responders

Note. Group means and standard deviations are reported for police officers and other, nonmilitary first responders; significant group differences are bolded (p < .05). Higher values indicate greater incidence of the reported experiences or behaviours.

Arble E, Daugherty AM, Arnetz BB. 2018. Stress Health.



Differences in Response to Stress



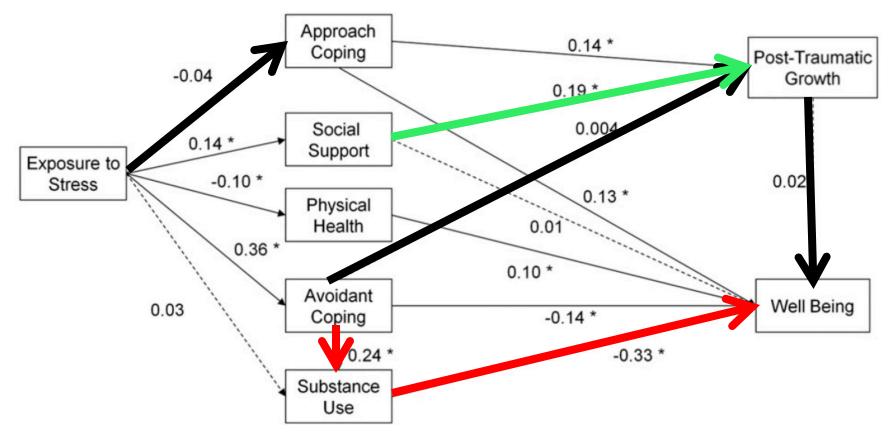
Police were more likely to use alcohol and drugs following avoidant coping and suffered greater consequence to well being

Substance use alone accounted for 38% of variance in Well Being among police

Arble E, Daugherty AM, Arnetz BB. 2018. Stress Health.



Possible Points of Intervention



Paths that were weaker in police may be opportunities for intervention

Compared to other first responders, Police showed greater post-traumatic growth from social support

Arble E, Daugherty AM, Arnetz BB. 2018. Stress Health.



Summary

 Police officers are a unique population of first responders Greater trauma exposure Professionally bound aspects of police stress/coping

- There appear to be numerous pathways and skills that can be acted upon to improve coping among police officers
- Diverting behavior away from avoidant coping-related substance use to activities that encourage post-traumatic growth

Translating Social Support to Approach Coping Increase Approach Coping and Physical Health behaviors



Acknowledgments

Funding NIH/NIMH R34 MH086943 to BBA Partial support from NIH/NIEHS CURES P30ES020957

Co-authors

Bengt B Arnetz Michigan State University MICHIGAN STATE.

Ana M Daugherty Wayne State University



