- Unhealthy Coping Skill With stress and trauma, paired with malformed beliefs due to police culture, many officers turn to unhealthy coping skills that only makes the situation more serious. This chapter will discuss the many unhealthy coping skills (i.e., drinking, etc.), and what officers can do to mitigate this unhealthy approach. Violanti’s Four-Career-Stage Model of a Police Stress? Alarm Stage: This stage begins at date of hire and continues through the officer’s fifth year Disenchantment Stage: This stage encompasses years six through thirteen. Personalization Stage: This stage covers years fourteen through twenty Introspection Stage: This stage begins during the twentieth year and continues until retirement file:///Users/owner/Downloads/Police\_stress\_&amp%3B\_alcohol\_ab.pdf 1. Police Stressors, Negative Outcomes Associated with Them and Coping Mechanisms That May Reduce These Associations https://journals.sagepub.com/doi/abs/10.1350/pojo.2014.87.3.676?casa\_token=R49yXlLwunQAAAAA:EYsMVNLolt7bwtgEpn0yefOysT8QxgiH4XsS1VId-qHMRp1QnH7x4-Fsuf-FnISm\_wQg4dFgo0edO1I police stress literature. These categories include: (1) intra-interpersonal (i.e., personality-related stressors), (2) occupational (i.e., job-related stressors), (3) organizational (i.e., organizationally related stressors), and (4) health consequences of police stress. https://www.tandfonline.com/doi/abs/10.1300/J158v02n02\_01?casa\_token=5iqfgOqvluwAAAAA:X-H4btwwV5nct4OK0P7jyZL5l4OOn5KxsHTiePmy24pO-FJBosFRIhwMw7wPlzK4DdgkSZK6r88gGXE Coping With Stress emotion focused (attempts to regulate emotional responses), problem focused (attempts to change, alter, or solve issues), seeking support (Patterson, 2016). strategies to be the most commonly used: active coping, planning, and acceptance (Maran et al., 2015; Salinas & Webb, 2018). social support, problem-solving. Maladaptive coping utilized blaming negative distraction strategies. Nelson and Smith (2016) Ménard and Arter (2013) found that officers’ negative and avoidant coping was related to increased alcohol use and PTSD. And, Kazmi and Singh (2015) found that officers’ destructive coping (such as avoidance, alcohol use, and denial) was linked to lower job satisfaction. Research has revealed that officers’ adaptive coping strategies are associated with less stress and other positive outcomes. Salinas and Webb (2018) found that positive reframing and humor were associated with less stress. Ménard and Arter (2013) found that well-being is related to coping methods and social supports, the latter of which has also been highlighted in other studies (Heffren & Hausdorf, 2016; Novara et al., 2015). Another study found that social support, gratitude, and resilience were associated with higher life-satisfaction and fewer symptoms of depression (McCanlies et al., 2018). Additionally, research has suggested that formal organizational services, such as stress management training and support, promote effective coping as well as improve job performance and on-the-job relations (Miller et al., 2017; Weltman et al., 2014). Tucker (2015) found those officers with organizations that are supportive of stress intervention services are more willing to use them than those who perceived confidentiality concerns or stigma. As recently as 2014, the lack of well-defined stress management programs for law enforcement prompted a recommendation for more research and policy regarding such programs (see Patterson et al., 2014). Acute vs chronic stress A Conceptual Model and Implications for Coping with Stressful Events in Police Work https://journals.sagepub.com/doi/pdf/10.1177/0093854800027003006 Coping models Alcohol abuse - file:///Users/owner/Downloads/Police\_stress\_&amp%3B\_alcohol\_ab.pdf Machell (1989) describes this complication as Professional Protective Emotional Suppression (PPES). PPES is a type of defense mechanism employed by an individual in response to constant conflict-producing situations. Similar to Seyle’s resistance stage, PPES enables the individual to relieve the impact of a stressful situation. In this capacity, the suppression reaction is needed and useful. While PPES may be helpful in one respect, it may constitute a significant barrier to alcoholism treatment. Problems with this defense mechanism emerge as a result of the constant exposure to conflict that officers must confront. Machell (1989) explains that this constant suppression of feelings is analogous to sedimentary rock. Over the years, an officer will store layer upon layer of feelings. These dormant and unresolved feelings may begin to generate unhealthy emotions such as anxiety, guilt, and a lack of self-worth. Exposing and resolving these emotions are important steps in the recovery process for alcoholics. Risk factors for occupational stress among Greek police officers Findings Regarding service operation, the most stressor events were personal relationships outside work, tiredness, bureaucracy, injury risk and lack of leisure for family and friends. Regarding service organization, the most stressor events were lack of personnel, inappropriate equipment, lack of meritocracy, lack of sources and inappropriate distribution of responsibilities in work. According to multivariate analysis, increased use of avoidance-focused coping strategy, and decreased sleeping, physical exercise and family/friends support were associated with increased occupational stress. Moreover, police officers who work out of office experienced more occupational stress than police officers who work in office. https://www.proquest.com/docview/2261162451/C46A7C439F1A4AA9PQ/4?accountid=142373 Associations Between Police Work Stressors and Posttraumatic Stress Disorder Symptoms: Examining the Moderating Effects of Coping The association between physical and psychological stress and PTSD symptoms was stronger in officers who used lower active coping (B = 4.34, p < 0.001) compared to those who utilized higher active coping (p-interaction = 0.027) (B = 1.79, p ≤ 0.003). A similar result was found between lack of support and PTSD symptoms (p-interaction = 0.016) (lower active coping, B = 5.70, p < 0.001; higher active coping, B = 3.33, p < 0.001), but was not significantly different comparing the two groups regarding the association between administrative and organizational pressure and PTSD symptoms (p-interaction = 0.376). Associations of total stress, administrative and organizational pressure, and physical and psychological stressors with PTSD symptoms were significantly stronger in officers who utilized higher passive coping (p-interaction = 0.011, 0.030, and 0.023, respectively). In conclusion, low active or high passive coping methods may exacerbate the effect of work stress on PTSD symptoms. file:///Users/owner/Downloads/Associations\_Between\_Police\_Wo.pdf