



Psychiatry & Behavioral Sciences Section – 2007

14 The Past, Present, and Future of Police Psychology in the New York Police Department

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After attending this presentation, attendees will be better informed about the nature and sources of work-related stress within the NYPD. The attendee will be able to consider the anticipated long-term health and mental health consequences of the 9/11 terrorist attacks and the enduring threat of terrorism in New York.

This presentation will impact the forensic community and/or humanity by serving as a point of further discussion among professionals involved in providing services to and within the law enforcement community. This presentation will also assist in the identification and adequate consideration of environmental factors impacting upon police performance.

Research in several domains provides clear evidence of an association between stress and health. Stress response theory describes a process in which various bodily systems including the heart and blood vessels, immune system, digestive system, the sensory organs, and the brain activate to meet the challenges of a perceived threat or stressor¹. A stressor can be internal or external, acute or chronic. An acute stressor such as the recollection of a threatening situation can cause an immediate stress "fight or flight" response. A chronic stressor such as loneliness is a more enduring condition. As such, the desire to fight or run away must be suppressed. Studies indicate that people who report having high levels of stress also report significantly more physical and mental health problems. Daily hassles along with acute and chronic stress contribute to overall poor health and psychological distress in a complex manner. Consistent with these findings, individuals who work in high stress occupations also evidence significantly more health problems, sleep disturbance, substance abuse, and are at greater risk for premature mortality.

There is a large body of research on the stressful nature of police work. Researchers have consistently stated that police work is one of the most stressful occupations. Experts in the field have identified three main sources of police stress: operational stressors, organizational stressors, and work-family conflict². Operational stressors include exposure to dangerous and traumatic critical incidents, sustained risk of serious physical injury or death, and negative interactions with the public. Organizational stressors include poor interpersonal relationships with supervisors, shift work, excessive and redundant administrative tasks, and a lack of recognition for heroic actions. Work-family conflicts identify an officer's perception of increased work stress due to the job's negative affect on his family. For example, an officer's husband might experience increased anxiety due to his concerns about his wife's safety while she is working on an undercover assignment. This in turn leads to the officer perceiving her work as more stressful. The cumulative effect of daily hassles, critical incidents, and chronic stressors coupled with destructive rather than constructive coping strategies contribute to police officers experiencing significantly more stress-related illnesses than workers in other occupations³. Police officers evidence higher rates of cardiovascular disease, cancer, and hypertensive heart disease⁴. Police stress can make the officer vulnerable to other adverse health symptoms including asthma, allergies, and migraine headaches. Police work-related stress also precipitates psychological disturbances such as emotional dysregulation, depression, posttraumatic stress disorder and other psychological sequella⁵.

The stress of police work has increased dramatically since the attack on the World Trade Center. These stress levels are steadily increasing. The recent death of veteran first responders from ailments that many believe were the result of inhaling toxic dust at ground zero and the landfill, and the growing health concerns of police officers similarly exposed supports this contention. Added to this psychological quagmire is the general feeling that government officials have abandoned "heroes." This is evidenced by complaints of lack of adequate medical resources and post 9/11 federal funds, money that was supposed to pay for the medical monitoring of first responders, now being used by local government to fight disability claims in court⁶.

Dr. Mack, a Detective Specialist and a licensed clinical/police psychologist with 19 years of experience in the NYPD, will provide an overview of past and current police stress, as well as the anticipated stressors that New York police officers will likely face in the near future. Particular attention will be focused on the psychological impact of the 9/11 terrorist attacks, the persistent threat of terrorism in New York, and the war in the Middle East. The presentation will also provide information on successful stress management initiatives and offer recommendations for



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future practice and research within the field of police psychology.

References:

- 1 ADAM Healthcare Center (2006). *Stress*. Retrieved July 10, 2006, from <http://adam.about.com/reports/000031.htm>.
- 2 Scrivner, E. M. & Kurke, M. I. (1995). Police psychology at the dawn of the 21st century. In E. M. Scrivner & M. I. Kurke (Eds.), *Police psychology into the 21st century* (pp. 3-29). New Jersey: Lawrence Erlbaum Associates, Publishers.
- 3 He, N., Zhao, J., & Ren, L. (2005). Do race and gender matter in police stress? A preliminary assessment of the interactive effects [Electronic version]. *Journal of Criminal Justice*, 33, 535-547.
- 4 McCraty, R., Tomasino, D., Atkinson, M. and Sundram, J. *Impact of the HeartMath self-management skills program on physiological and psychological stress in police officers*. (Institute of HeartMath Publication No. 99-075). Retrieved July 10, 2006, from <http://www.heartmath.org/research/research-papers/police/police-2.html> ⁵ Regehr, C., Johanis, D., Dimitropoulos, G., Bartram, C., & Hope, G. (2003). The police officer and the public inquiry: A qualitative inquiry into the aftermath of workplace trauma [Electronic version]. *Brief Treatment and Crisis Intervention*, 3, 383-396.
- 6 Mahoney, J. & Siemaszko, C. (2006, July 26). 9/11 cash for what? *New York Daily News*, p. 3.

Police Stress, Police Psychology, Stress Response