

Enhancing Emotion-Regulation Skills in Police Officers: Results of a Pilot Controlled Study

Matthias Berking

University of Marburg

Caroline Meier

University of Bern

Peggilee Wupperman

John Jay College/City University of New York and Yale School of Medicine

Police officers are routinely exposed to situations that elicit intense negative emotions; thus, officers have a particularly strong need for effective methods of regulating such emotions. The main purpose of this study was to investigate whether a manualized emotion-regulation training (Integrative Training of Emotional Competencies; iTEC; Berking, 2010a) can improve the emotion-regulation skills of police officers. First, self-reports of 9 emotion-regulation skills were assessed in a sample of officers ($N=31$) and compared to those of a matched community-based control group. Then, the effects of the training on the emotion-regulation skills of officers were evaluated in a time-staggered design with a waitlist control condition. Results indicate that, compared to controls, officers have difficulties in accepting and tolerating negative emotions, supporting themselves in distressing situations, and confronting emotionally challenging situations. The training significantly enhanced successful skill application, especially some skills with which officers reported difficulty applying. These findings

suggest that a focus on emotion-regulation skills may be an important component for programs aimed at preventing mental-health problems in police officers.

THE ABILITY TO REGULATE¹ negative emotions is integral for the maintenance of mental health and well-being (e.g., Gross & Muñoz, 1995; Kring & Werner, 2004), particularly in populations routinely confronted with situations that elicit intense negative emotions. One such population is the police force (e.g., Patterson, 2001; Violanti, 1992). Police officers are routinely exposed to dangerous and unpredictable situations with high probabilities of triggering stress, anger, and anxiety (Anderson, Litzenberger, & Plecas, 2002; Mearns & Mauch, 1998; Violanti & Aron, 1994). In order to enforce the law, officers at times are required to use force, which has the potential of hurting, or even killing, other people. Officers must make difficult decisions with little or no forethought, and they may suffer afterward from shame, guilt, worry, and

We thank Markus Gurt, Franz Schwager, Colette Bühler and the Zuerich Police Department for their gracious help and support of this study.

This research was supported by Grant PA001-113040 from the Swiss National Science Foundation to Matthias Berking.

Address correspondence to Matthias Berking, University of Marburg, Department of Psychology, Gutenbergstrasse 18, 35032 Marburg, Germany. Phone: +49 6421 282 4050; Fax: +49 6421 282 4065; e-mail: berking@staff.uni-marburg.de.

0005-7894/10/329-339/\$1.00/0

© 2010 Association for Behavioral and Cognitive Therapies. Published by Elsevier Ltd. All rights reserved.

¹ In order to avoid awkward formulations, we subsume concepts such as understanding, accepting, and tolerating emotions under the term *emotion regulation* if not otherwise indicated. Such a broad definition of the term is justified because these skills have significant impact on the nature and intensity of an emotion and can therefore be seen as part of the regulation process (see Thompson, 1994).

doubts about the necessity of their decisions (e.g., Amaranto, Steinberg, Castellano, & Mitchell, 2003). Research has shown that police officers also suffer when confronted with crime and accident victims, particularly when these victims are children (Violanti & Aron). They also must cope with anger and disappointment that arise when suspects, whom they took high personal risk to detain, are released by the courts, possibly due to minor formal errors (e.g., Amaranto et al., 2003; Ayres & Flanagan, 1994). Disappointment and frustration may also arise when police officers feel that their efforts are not valued by their superiors, the press, or the public (Amaranto et al.; Cooper, Davidson, & Robinson, 1982; Evans & Coman, 1988; Gudjonsson & Adlam, 1985). Moreover, police work often involves night-shifts (Ayres & Flanagan, 1994; Evans & Coman, 1988), substantial repetitive paperwork (Cooper et al., 1982; Gudjonsson & Adlam), lack of administrative support (Cooper et al.; Gudjonsson & Adlam), limited opportunities for advancement (Evans & Coman), and a rigid hierarchy that limits levels of autonomy and control (Burke, 1993; Violanti & Aron). The combination of these factors is likely to cue feelings of frustration, anxiety, helplessness, burnout, and depressive symptoms (Evans & Coman; Stuart, 2008; Violanti & Aron).

Unfortunately, police officers are widely reported to have difficulties acknowledging the presence of negative emotions (Evans, Coman, Stanley, & Burrows, 1993; Gasch, 2006; Violanti, Marshall, & Howe, 1985). Consistently, police officers are likely to use emotion-regulation strategies such as denial, suppression, and overall avoidance of negative emotions (Amaranto et al., 2003; Pogrebin & Poole, 1995). However, substantial research in clinical and nonclinical populations has shown that, although these strategies initially might lessen the negative emotions, they eventually have the paradoxical effect of leading to the continuation—or even escalation—of the emotions they are intended to suppress (Campbell-Sills, Barlow, Brown, & Hofmann, 2006; Eifert & Heffner, 2003; Feldner, Zvolensky, Eifert, & Spira, 2003; Feldner, Zvolensky, Stickle, Bonn-Miller, & Leen-Feldner, 2006; Levitt, Brown, Orsillo, & Barlow, 2004).

This combination of exposure to situations that elicit negative emotions and (probable) emotion-regulation deficits is likely to increase police officers' risk of developing mental-health problems and dysfunctional methods of short-term emotion regulation. As such, prevalence rates for current posttraumatic stress disorder (PTSD) in police officers range between 7% and 13% (Carlier, Lamberts, & Gerson, 1997; Robinson, Sigman, &

Wilson, 1997), whereas 12-month prevalence rates in the general population range between 2% and 5% (Wittchen, Gloster, Beesdo, Schönfeld, & Perkonig, 2009). Additionally, officers report utilizing dysfunctional strategies such as alcohol and physical isolation as methods for coping with stressful work situations (Burke, 1993). Consistently, police officers show a high prevalence of problematic alcohol consumption (Dietrich & Smith, 1986), with 33% to 48% of male officers and 24% to 40% of female officers reporting harmful levels of drinking (Davey, Obst, & Sheehan, 2000; Richmond, Wodak, Kehoe, & Heather, 1998).

More direct evidence for the role of emotion-regulation deficits in the development of mental-health problems comes from a study showing that officers' mood-regulation expectancies moderate the strength of the association between perceived stress and psychopathological symptoms (Mearns & Mauch, 1998). Additional research has shown that coping styles of police officers modify the effects of stress on psychological distress. Contrary to expectations, a problem-focused coping style predicts a stronger association between work-related stress and distress, whereas an emotion-focused style appears to buffer the impact of negative life-events on distress (Patterson, 2003). To explain this unexpected finding, Patterson argued that the use of problem-solving coping styles may be detrimental when the stressor is difficult to change. Notably, such a situation is likely to occur when change-oriented officers experience intense negative emotions, which cannot easily be controlled by sheer will-power. These findings support the importance of (a) enhancing overall emotion-regulation skills in police officers, and (b) including a specific focus on acceptance-based emotion-regulation strategies.

According to Thompson (1994), *emotion regulation* has been defined as “the extrinsic and intrinsic processes responsible for monitoring, evaluating, and modifying emotional reactions, especially their intensive and temporal features, to accomplish one's goals” (pp. 27-28). Evidence for the involvement of emotion-regulation deficits in the development of mental disorders includes (a) cross-sectional studies showing various aspects of psychopathology to be associated with deficits in emotion-regulation skills (e.g., Gratz & Roemer, 2004; Levine, Marziali, & Hood, 1997; Novick-Kline, Turk, Mennin, Hoyt, & Gallagher, 2005; Sim & Zeman, 2004), (b) studies demonstrating that emotion-regulation skills predict status of mental health at later points in time (e.g., Berking, Orth, Wupperman, Meier, & Caspar, 2008; Seiffge-Krenke, 2000), and (c) studies suggesting

متن کامل مقاله

دریافت فوری ←

ISIArticles

مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات