

Compassion Fatigue and Compassion Satisfaction among Police Officers: An Understudied Topic

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Police officers routinely face critical incidents such as violent offenders, motor vehicle fatalities, and mistreated children (Cross & Ashley, 2004; Karlsson & Christianson, 2003). Police are tasked with keeping the peace and helping traumatized victims. Over time, the effort to alleviate the victims' suffering may come with a cost. Charles Figley (1995) coined the term "compassion fatigue" (pp. 9) to describe this "cost of caring for those who suffer." Compassion fatigue (CF) has multiple negative effects on caregiving professionals' wellbeing and occupational performance. These include behavioural (e.g., irritation and hypervigilance), cognitive (e.g., lack of concentration and depersonalization), and emotional (e.g., negativity, helplessness, and hopelessness) detriments (Bride, Radey & Figley, 2007; Figley, 2002). Ultimately, CF can lead to burn out, which is associated with serious mental health conditions such as PTSD and depression as well as failure to perform as expected on the job (Conrad & Kellar-Guenther, 2006). On the other hand, there are positive aspects to the role of caregiving. Stamm (2002) introduced the term "compassion satisfaction," (pp. 108) which refers to the feelings of increased motivation and satisfaction gained from helping those who suffer. Stamm (2002) posits that helping professionals who experience compassion satisfaction (CS) feel successful and highly satisfied when working with traumatized populations and that this is associated with enhanced job commitment, performance, and quality of life.

Despite the fact that police officers routinely face trauma and their impact on civilians is exponential, the experience of CF and CS is understudied among this population. Previous work has focused on first responders with more severe mental health conditions such as PTSD and depression (Andersen, Wade, Possemato, & Ouimette, 2010). However, many officers do not suffer from these conditions and yet their daily experience is less well understood. Given that CF is associated with clear behavioural, cognitive, and emotional deficits, understanding if a significant portion of police officers experience fatigue and associated occupational detriments is important.

In this paper, we explore the gaps in the scientific literature in terms of CF and CS research among police. We review what little research has been done in this understudied area and highlight important variables for researchers to consider as they begin working in this area. We review topics such as the experience of multicultural police officers, a topic that is understudied among police research in general, and certainly in regards to CS and CF. A discussion of the ways in which personality characteristics may or may not impact CS and CF among officers is also included. Further discussed is the possibility that enhancing CS may mitigate the negatives of CF, and exploring critical periods across an officer's career in which interventions may be most important. Our purpose is to encourage trauma and police researchers to begin to conduct empirical research in this area, while considering the variables mentioned above.

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Compassion Fatigue among Health Care Professionals

Scientific literature has extensively studied the experience of CF in different health care professions. For instance, research has been explored the higher risk of experiencing CF among social workers who: (i) work with adult protective services (Bourassa, 2009), (ii) have been living and working in New York City after the 9/11 terrorist attack (Adams, Boscarino, & Figley, 2006), (iii) work with survivors of terrorist attacks in Israel (Cohen, Gagin, & Peled-Avram, 2006). In addition, a few studies have focused on the experience of CF among clinicians who: (i) work with veterans returning from combat zones (Tyson, 2007), (ii) provide support to survivors of violent crimes (Salston & Figley, 2003), (iii) provide therapy to traumatized clients (Craig & Sprang, 2010). Other studies recommend possible methods to improve self-care for therapists as a way to mitigate the negative effects of CF (Figley, 2002). The way CF affects a professional's quality of life has been explored among mental health providers (Sprang, Clark, & Whitt-Woosley, 2007) and among healthcare staff in community mental health services (Rossi et al., 2012). Moreover, other studies explored CF experienced by physicians (Pffifferling & Gilley, 2000), nurses (Yoder, 2010), and animal-care professionals (Figley & Roop, 2006). Some researchers (Sprang, Clark, & Whitt-Woosley, 2007) suggested possible strategies (e.g., practice, education) that may help mental health professionals to improve their professional quality of life.

The Unique Nature of Police Work

Police work is challenging. Officers often experience potentially traumatic incidents that may jeopardize their own lives or the lives of their partners in the line of duty (e.g., domestic violence, abused children, violent perpetrators). Over the course of their career, officers often experience numerous potentially traumatic events. Rudofossi (2009), a former uniformed psychologist at New York City police department, argues that police officers encounter - over the course of their career - a range from 10 to 900 events that would potentially be classified as traumatic or severe stress-related. Police officers often experience multi-faceted adverse events and they are many times the ones who are supposed to care, support, and show empathy to the victims of crimes (Rudofossi, 2009). For instance, police officers were the ones who first responded after the mass shooting occurred in Newton, Connecticut and they supported the wounded children who were struggling to survive (Draznin, 2013). Additionally, a unique "cost of caring" among police takes place when officers support their peers when a fellow officer is lost in the line of duty (Violanti & Gehrke, 2004). This chronic, cumulative and complex trauma has been termed "Police Complex Spiral Trauma" (pp. 202) to describe the unique form of trauma that officers experience during their career (Papazoglou, 2013).

Over time, a highly stressful occupation, such as policing, can negatively impact officers' health and performance (Andersen, Wade, Possemato, & Ouimette, 2010; Violanti, 2010). Research studies show that police officers are at higher risk of contracting heart disease, diabetes, cancer, and even dying earlier than their civilian peers (not as a result of job-related injury) (Violanti, 2010). Mental

health symptoms commonly associated with trauma exposure and chronic severe stress (e.g., anxiety and post-traumatic stress) may exacerbate these physical health conditions (McEwen, 1998, Violanti et al., 2007). Poor health, fatigue, and chronic severe stress may also compromise an officer's performance in the line of duty (Arnetz et al., 2008). Decisions about the appropriate use of force during critical incidents sometimes carry life or death consequences. Research has shown that severe stress symptoms can interfere with officers' judgment and decision-making skills during a critical incident (Covey et al., 2013). Therefore, the challenging nature of police work has multi-faceted impact on police officers mental and physical health, well-being, and job performance.

Gilmartin, a veteran police officer and police psychologist, has coined the phrase "the hypervigilance biological rollercoaster" to describe the extremes in physiological functioning that officers experience while on-duty (i.e., hypervigilance to threat) and the inevitable physiological exhaustion after each shift (Gilmartin, 2002). These extreme physiological factors, combined with organizational stressors and frequent exposure to public disapproval or condescension seem to be a particularly potent set of risk factors for developing CF (Violanti & Gehrke, 2004; Gilmartin, 2002). It is possible that once CF is present, emotions such as hostility or apathy may hinder the officer from feeling CS, further leading to a lack of commitment to occupational duties. Bride, Radey, and Figley (2007) have discussed that the exact relationship between CF and CS remains unclear. Theoretically, it is plausible that individuals who have higher intrinsic levels of CS, or gain CS through training may find more meaning in their jobs despite the emotional weight of frequently caring for suffering individuals (Radey & Figley, 2007). This remains to be examined.

Police Compassion Fatigue: A Gap in the Literature

In an extensive review of the literature, we found only three articles examining the issue of CF and CS among police officers, all with small, non-representative samples. The search was conducted using a large range of resources: Medline, CINAHL, EMBASE, PsychINFO, Cochrane Library, Canadian Institute for Health Information, Healthy Canadians, Open Grey, Grey Literature Report of the New York Academy of Medicine. The following keywords were used to search the databases: "police officers", "law enforcement officers", "emergency responders", "rescue workers", "compassion fatigue", "compassion satisfaction," "resilience", "health promotion", "trauma", "PTSD", "critical incidents", "occupational stress". No limits were placed on language. Furthermore, in addition to searching keywords in the aforementioned databases, journal articles listed in the reference section of the selected articles were explored.

Tehrani (2010) in a larger study of health professionals, a few family liaison officers (n = 45) reported the least support from supervisors and were most likely to report the lack of justice in the world. Interestingly, these officers experienced higher levels of personal growth and job satisfaction compared to other caregivers. Tehrani (2007) reported similar results in a survey of professional caregivers, of which 2.2% were police officers (n = 430). Lane and colleagues (2010) recruited 47 male and female detectives and found that CF reduced detectives' personal relationship satisfaction.

Although Figley (1995) and Violanti and Gehrke (2004) introduced the issue of CF among police and paved the way for empirical research studies to be conducted on this topic, little has been done. We encourage researchers to conduct empirical work in this area. Furthermore, gathering a representative sample of police officers is a crucial next step in accurately understanding the rates of CF and CS among officers and associated personal and occupational performance consequences.

Recommendations for Further Research

Due to methodological limitations and a history of hesitancy among police officers to collaborate with academics (Buerger, Mills, & Roach, 2012; Whalen, 2012) much of the research with police officers is comprised of small, unrepresentative or clinical samples. The tide is changing however. The Royal Canadian Mounted Police recently published a call for police organizations to cooperate with academics for mutual learning and societal benefit (Buerger, Mills, & Roach, 2012; Whalen, 2012). In a recent survey by Duxbury and Higgins (2012) 4,500 police officers across Canada reported high stress and the desire for more resources and support. There has never been a better time for researchers to collaborate with police professionals on the topic of CF and CS. Below we review a number of topics that will be important to investigate as research in this area grows.

The Relationship between Compassion Fatigue and Satisfaction and Years of Service

Bride, Radey, and Figley (2007) argue that the exact relationship between CF and CS has not been clarified yet. It may be the case that CF and CS are positively correlated over the course of police career, meaning that as one increases the other declines. Alternatively, would the relationship between the variables be more complex with certain "peaks" arising during particular years in service? Some research suggests that the frequency of negative experiences over the years in service increase police officers' risk for experiencing burn out (Kohan & Mazmanian, 2003). Could it be that CF is particularly high at this time? Studying the relationship between fatigue and satisfaction may lead to identify "critical periods" over the officers' career that trigger an increase of CF.

The Association between Personality and Compassion Fatigue and Satisfaction

There are concerns that individuals attracted to a career in law enforcement may be those who value power, authoritarian discipline, and who may display low agreeableness, high in impulsivity, callousness, and freedom from remorse (Blumenstein, Fridell, & Jones, 2012; Miller, Forest, & Jurik, 2003). If this concern were true, then it is plausible that those scoring higher on psychopathic or antisocial personality traits may not experience CF or CS. However, it is unlikely that the majority of individuals that are successful in becoming police officers score high in psychopathy or antisocial personality characteristics given the rigorous screening and probationary periods required before individuals officially become officers. Psychological screening of recruits is now a common practice in the US and Canada. A national survey in the US indicates that screening to evaluate normal and abnormal behaviours and personality traits is mandated for candidates in over 90% of police departments (Cochrane, Tett, & Vandecreek, 2003; Reaves, 2010; Serafino, 2010). The most common personality test used in over 70% of the screenings is the Minnesota Multiphasic Personality Inventory-2 (Cochrane, Tett, & Vandecreek, 2003). The administration of at least two self-report measures that assess personality and account for defensiveness and lying are standard practice in police recruitment procedures (Serafino, 2010). Despite screening precautions, it is possible that personality characteristics that are more inflexible but not psychopathic or antisocial may be common among police officers. However, personality traits are regarded as relatively stable across the lifespan (McCrae & Costa, 1994). Therefore, if CF and CS were to vary according to the length of service or the type of duties assigned (e.g., child abuse investigation) then it would be unlikely that personality traits would be responsible for ability or lack of ability to experience CF and CS. However, given the possibility that some personality types may be

more interested in a career in law enforcement, it is vital to examine the influence of personality characteristics in shaping the experience of CF and CS.

Compassion Fatigue and Compassion Satisfaction from a Multi-Cultural Perspective

In North America, the composition of police organizations has traditionally been made up of White, heterosexual males (Brown, 2009). Furthermore, the historical culture of the police combines both the positive aspects of internal solidarity and support and negative attributes such as aggression, cynicism, and sexism (Blumenstein, Fridell, & Jones, 2012; Miller, Forest, & Jurik, 2003). Research suggests that female, LGBT officers, and officers of minority racial and ethnic groups may face a double threat within their occupation; both on-going stress associated with police work and marginalization within police culture (Belkin & McNichol, 2002; Bolton, 2003; Franklin, 2005; Kakar, 2003). Hassell and Brandl (2009) collected data from 1,923 sworn officers in the US and concluded that minority police officers (e.g., female, LGBT) reported more stress and had the least favourable workplace experiences. In a study with gay and lesbian officers in the US, Myers and colleagues (2004) found that LGBT officers reported they had to try harder than mainstream officers in order to prove to their colleagues that they were “real crime fighters.” McCarty, Zhao, and Garland (2007) studied 1,100 police officers from a large metropolitan police department and found that African-American female officers experienced burnout in significantly higher levels than non-minority officers. Brown (1998) found that policewomen experienced higher levels of sexual harassment and reported feeling like an “outgroup” member when reporting incidents because male colleagues suggested the harassment was their own fault. The first author’s own research, and that of many others, has shown that minority individuals are more likely to experience discrimination than non-minority individuals (Andersen & Blosnich, 2013; Zou, Andersen & Blosnich, 2013; Roberts, Swanson, & Murphy, 2004; Karlsen & Nazroo, 2002). It is unclear if discrimination experienced from peers and civilians contribute to the burden of CF or reduce the likelihood that minority officers would experience CS from their work. We encourage researchers to investigate the understudied factors that shape occupational satisfaction among minority officers.

The Role of Compassion Satisfaction in Helping Officers to Cope with Trauma

Harr (2013) suggests that increasing CS may promote workplace health among social workers. Similarly, we recommend that researchers examine the role of CS in promoting workplace health among police officers. Specifically, does the promotion of CS mitigate the impact of trauma exposure on officers’ mental and physical health and enhance resilience? If so, researchers may want to identify ways to improve CS among police. Radey and Figley (2007) argued that CS can be maximized through relevant training and, hence, it may become an essential element to ameliorate the experience of CF by helping professionals to improve optimism and engage in self-care. Following Radey and Figley’s (2007) perspective, police policy makers may incorporate ways to promote CS through police psychological counseling or the police training curricula. That way, CS may become a protective factor that shields officers from the emotional fatigue related to the adversities of police work, hence, promoting officers’ resilience.

DISCUSSION AND CONCLUSION

As reviewed above, the topic of CF and CS is understudied among police officers. Research in this area has multiple implications in the field of policing. Radey and Figley (2007) argued that CS may be promoted through education, training, and workplace policies. Similarly, research in police CF and CS may

enable researchers to develop evidence based training curricula and therapeutic interventions that will promote resilience and improve the mental and physical health of police officers. Exposure to trauma and CF may also have “contagious” effects on the officers’ family members and communities (Figley, 1997). Therefore, research on this topic may benefit police officers’ family members as well as the communities they serve.

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