

# RELATIONSHIP BETWEEN POLICE OFFICERS PERSONALITY TRAITS, HEALTH AND COPING MECHANISMS



Ivana Glavina Jelaš Dunja Korak Joško Vukosav Police College, Zagreb, Croatia

Keywords: police officers; personality; health; stress; coping mechanisms.

**Abstract:** The aim of this study was to examine the relationship between police officers personality traits, health and coping. One hundred and seventy-seven police officers participated in the study. The following questionnaires were used: Coping Inventory for Stressful Situations (CISS, Endler & Parker, 1990), Eysenck Personality Questionnaire (EPQ R/S, Eysenck, 1991) and SF-36 Health Survey (Ware et al, 2000). Results showed that extraversion positively correlated with task-oriented and avoidance-oriented coping. Neuroticism negatively correlated with task-oriented and positively with emotion-oriented coping. All health subscales were in negative correlation with all scales except general health and physical functioning.

## INTRODUCTION

Coping is a crucial part of many different theories on stress. One of the most widely accepted definitions is that of Lazarus and Folkman (2004) who refer to coping as a constant changing of cognitive and behavioural efforts in attempt to manage specific demands that are appraised as taxing or exceeding the resources of the person. These authors represent the transactional approach, emphasizing situational influences on the selection of coping strategies (Lazarus & Folkman, 2004), opposed to a dispositional approach which focuses on the role of personality (Suls, David & Harvey, 2006). The authors of this research analyse coping as a stable disposition.

Stress literature mainly distinguishes between emotion focused coping, which deals with negative emotions arising from stressful situation, problem focused coping, aimed at altering sources of stress (Stanton et al, 2000) and avoidance coping, concerning the attempts of cognitive or behavioural avoidance of stressors. Generally, problem focused coping is related to lower distress and better health outcomes (Hudek – Kneževic' & Kardum, 2005), although effectiveness of this strategy depends on situational factors such as control over the situation. Avoidance is mainly linked to poorer mental and physical health (Holahan et al, 2005).

Regarding personality, findings suggest that neuroticism is related to emotion-focused coping such as self-blame, wishful thinking, passivity and avoidance / escapism (Carver & Connor — Smith, 2010). On the other hand, extraverts tend to use problem-focused strategies in dealing with stress (Kardum & Krapić, 2001), while persons high on psychoticism use emotional and avoidance strategies such as alcohol and wishful thinking (Carver & Connor-Smith, 2010).

Policing is one of the most stressful occupations (Anshel, 2000). Unfortunately, many studies imply that officers use maladaptive coping mechanisms (Patterson, 2003). Avoidance strategies like excessive alcohol consumption, social isolation and emotional detachment can lead to negative stress consequences, for example, mental and

12



physical illness, early retirement and absenteeism (Stinchcomb, 2004).

# METHODOLOGY

#### SAMPLE

The respondent sample comprised of 177 police officers (140 males, 37 females) with an average age of M = 30.86 (SD = 5.41).

#### MEASURES

Coping Inventory for Stressful Situations (CISS, Endler & Parker, 1990) is a 48-item inventory which measures three major types of coping styles: Task-Orientated (n=16,  $\alpha$ =0.84), Emotion-Orientated (n=16,  $\alpha$ =0.85) and Avoidance Coping. Avoidance scale is divided in two subscales: Distraction (n=8,  $\alpha$ =0.79) and Social Diversion (n=5,  $\alpha$ =0.75). Participants answer on a 5-point Likert scale (1=absolutely not, 5=entirely true).

Eysenck Personality Questionnaire (EPQ R/S, Eysenck, 1991) contains 48 items from the full EPQ-R and measures three major personality traits and has four scales: Psychoticism, Extraversion, Neuroticism and Lie. On each question participants answered with YES or NO. Calculation of Cronbach  $\alpha$  was left out due to inability to retrieve data collected in 2012.

*SF-36 Health Survey* (Ware et al, 2000) is 36item survey which measures 8 aspects of health: Physical Functioning (n=10,  $\alpha$ =0.89), Role-Physical (n=4,  $\alpha$ =0.82), Bodily Pain (n=2,  $\alpha$ =0.85), General Health (n=5,  $\alpha$ =0.42), Vitality (n=4,  $\alpha$ =0.79), Social Functioning (n=2,  $\alpha$ =0.68), Role-Emotional (n=3,  $\alpha$ =0.82), Mental Health (n=5,  $\alpha$ =0.75).

#### RESULTS

Police officers most often use task-oriented coping (M=57,72). They use avoidance (M=44,92) and emotion-oriented (M=45,33) mechanisms much less and almost equally (Table 1).

Table 2 shows that extraversion is in low positive correlation with task-oriented (r=0, 24, p>0, 01) and avoidance-oriented coping (r=0, 28, p>0,01, rsoc.div.=0,34, p>0, 01). Neuroticism is in low negative correlation with task-oriented (r=-0,26, p>0,01) and moderate to high positive correlation with emotion-oriented coping (r=0,58, p>0,01). Relationship between psychoticism and coping wasn't confirmed.

Table 3 shows that all health subscales are in low to moderate negative correlation with emotion-oriented coping (rgh=-0,18, p>0,05; rv=-0,42, p>0,01; rrp=-0,28, p>0,01; rbp=-48, p>0,01; rmh=-0,52, p>0,01; rsf=-0,48, p>0,01; rre=-0,40, p>0,01; rpf=-0,22; p>0,01), while task-oriented coping is in low positive correlation with all scales (rv=0,17, p>0,05; rrp=0,17, p>0,05; rbp=0,16, p>0,05; rmh=0,17, p>0,05; rsf=0,25, p>0,01; rre=0,21, p>0,01) except general health and physical functioning.

Type of coping	Ν	Min	Max	Mean	Std. Dev
Task-Oriented Coping	177	24	78	57,72	7,087
Emotion-Oriented Coping	177	23	65	45,33	8,354
Avoidance Coping	177	24	71	44,92	9,530

Table 1: Descriptive values of the used coping mechanisms.



		Task- Oriented Coping	Emotion- Oriented Coping	Avoidance Coping	Social Diversion	Distraction
Psychoticism	Pearson Correlation	-,120	-,023	,040	-,004	,038
	Sig. (2-tailed)	,112	,763	,593	,953	,613
	Ν	177	177	177	177	177
Extraversion	Pearson Correlation	,240**	-,118	,281**	,348**	,160*
	Sig. (2-tailed)	,001	,117	,000	,000	,033
	Ν	177	177	177	177	177
Neuroticism	Pearson Correlation	-,267**	,583**	,010	-,065	,100
	Sig. (2-tailed)	,000	,000	,891	,387	187
	Ν	177	177	177	177	,038

# Table 2: Relationship between personality traits and coping.

\*\* Correlation is significant at the 0.01 level (2-tailed)

#### Table 3: Relationship between health and coping.

		Task-Oriented Coping	Emotion- Oriented Coping	Avoidance Coping
General Health	Pearson Correlation	,070	-,187*	-,043
	Sig. (2-tailed)	,354	,013	,567
Vitality	Pearson Correlation	,176*	-,426**	,139
	Sig. (2-tailed)	,019	,000	,066
Role-Physical	Pearson Correlation	,175*	-,285**	,087
	Sig. (2-tailed)	,020	,000	,247
Bodily Pain	Pearson Correlation	,165*	-,480**	,082
	Sig. (2-tailed)	,028	,000	,275
Mental Health	Pearson Correlation	,175*	-,522**	,102
	Sig. (2-tailed)	,020	,000	,176
Social	Pearson Correlation	,247**	-,480**	,037
Functioning	Sig. (2-tailed)	,001	,000	,623
Dele Emetional	Pearson Correlation	,219**	-,401**	,002
Role-Emotional	Sig. (2-tailed)	,003	,000	,984
Physical	Pearson Correlation	,077	-,220**	-,074
Functioning	Sig. (2-tailed)	,311	,003	,330





## DISCUSSION

This research showed that police officers most frequently use task-oriented mechanisms in coping with police stress. The sample is mostly composed of males and studies suggest that they more often use problem focused coping (Ramya & Parthasarathy, 2009). Studies also suggest that officers often tend to use avoidance mechanisms (Patterson, 2003). Fortunately, these respondents used avoidance least and almost equally often as emotion-oriented coping.

As expected, extraversion was positively correlated with task-oriented coping. This is confirmed by many other studies (Kardum & Krapić, 2001). Surprisingly this trait was also correlated with avoidance. This was unexpected because studies indicate that traits like neuroticism (Carver & Connor-Smith, 2010) and psychoticism (Ferguson, 2001) are in positive relation with avoidance. Contrary, neuroticism wasn't correlated with avoidance, it positively correlated with emotion-oriented and negatively with task-oriented coping.

The two previous are in accordance with expectations. Individuals with high scores in neuroticism are tense, tend to worry and upset easily (Zuckerman, 2002). Under stress they are prone to negative reactions and withdrawal. The emotion-oriented scale implies those kinds of behaviour. Further analysis showed that social diversion, as avoidance subscale, was significantly positively correlated with extraversion. Items on that scale imply actions like talking with a friend or going to a party as ways of coping could explain why avoidance is correlated with extraversion and not with neuroticism, because extraverted behaviour includes enjoyment in company of other people. Generally, results suggest that police officers do not differ from rest of the population in relation to coping with stress depending on their personality.

All health subscales, except general health and physical functioning were in positive correlation with task-oriented coping. That is in accordance with findings of other studies (Hudek — Krapić & Kardum, 2005). As mentioned, the respondents were mostly males and studies suggest that males more often use problem focused coping that could contribute to the outcome. All health subscales were in negative correlation with emotion-oriented coping. This would be surprising if we didn't previously mention the content of the emotion-coping scale. Indeed, a great amount of research shows that emotional focused coping in context of seeking social support is a very significant protective factor regarding stress consequences (Ozbay et al, 2007).

Usually, emotional focused coping includes behaviours like emotional disclosure etc. but, the emotion scale the inventory used involved only negative aspects of emotional coping, which are clearly not helpful under stress. Regarding avoidance, interestingly, this study didn't find significant negative correlation between avoidance and health, although the majority of studies suggest so (Holahan et al, 2005). The fact that the avoidance scale includes social diversion, which implies socialising, could explain our findings.

For further research it would be interesting to examine moderator and mediator variables that could contribute to the relationship between an officer's health, personality and coping mechanisms.

# CONCLUSION

The results showed that extraversion positively correlated with task-oriented and avoidanceoriented coping. Neuroticism negatively correlated with task-oriented and positively with emotion-oriented coping. All health subscales were in negative correlation with emotion-oriented coping, while task-oriented coping was in positive correlation with all scales except general health and physical functioning.

15



## REFERENCES

Anshel M.H., (2000), 'A Conceptual Model and Implications for Coping with Stressful Events in Police Work, Criminal Justice and Behavior', Vol. 27, 3, p.375-400.

Bishop, G.D., Tong, E.M.W., Diong, S.M., Enkelmann, H. C. & Why, Y.P. (2001). The relationship between coping and personality among police officers in Singapore. *Journal of Research in Personality*, 35, 353 – 374.

Carver, C.S. & Connor-Smith, J. (2010). Personality and Coping. *The Annual Review of Psychology*, 61, 679–704.

Endler, N.S. & Parker, J.D. (1990). Multidimensional assessment of coping: A critical evaluation. *Journal of Personality and Social Psychology*, 58, 844-854.

Eysenck, H.J. & Eysenck, S.B.J. (1991). *Eysenck Personality Questionnaire* — *Revised (EPQ-R)*. Hodder & Stoughton.

Ferguson, E. (2001). Personality and coping traits: A joint factor analysis. *British Journal of Health Psychology*, 6, 311–325.

Gershon, R.R., Lin, S. & Li, X. (2002). Work stress in aging police officers. *Journal of Occupational and Environmental Medicine*, 44, 160-7.

Holahan, C.J., Moos, R.H., Holahan, C.K., Brennan, P.L. & Schutte, K.K. (2005). Stress generation, avoidance coping, and depressive symptoms: a 10-year model. *Journal of Consultation Clinical Psychology*, 73, 658–666.

Hudek — Knežević, J. & Kardum, I. (2005). Stress and physical health. Jastrebarsko: Naklada Slap.

Kardum I., & Krapic, N. (2001). Personality traits, stressful life events, and coping styles in early adolescence. *Personality and Individual Differences*, 30, 503 – 515.

Lazarus, R. S. & Folkman, S. (2004). Stress, Appraisal and Coping. Jastrebarsko: Naklada Slap.

Ozbay, F., Johnson, D.C., Dimoulas, E., Morgan III, C.A., Charney, D. & Southwick, S. (2007). From Neurobiology to Clinical Practice. *Psychiatry (Edgmont)*, 4, 35–40.

Patterson, G.T. (2003). Examining the effects of coping and social support on work and life stress among police officers. *Journal of Criminal Justice*, 31, 215 – 226.

Ramya. N.& Parthasarathy, R. (2009). A study on coping patterns of junior college students. *Indian Journal of Psychological Medicine*. 31, 45–47.

Stanton, A.L. & Snider, P.R. (1993). Coping with a breast cancer diagnosis: a prospective study. *Health Psychology*, 12, 16-23.

Stinchcomb, J.B. (2004) Searching for stress in all the wrong places: combating chronic organisational stressors in policing, *Police Practice and Research*, 5, 259–277.

Suls, J., David, J.P. & Harvey, J.H. (2006). Personality and Coping: Three Generations of Research. *Journal of Personality*, 64, 711 – 735.

Ware, J.E., Snow, K.K., Kosinski, M. & Gandek, B. (2000). SF – 36 Health Survey. Manual & Interpretation Guide. Lincoln, RI: Quality Metric Incorporated 2000.

Zuckerman, M. (2002). Zuckerman-Kuhlman Personality Questionnaire (ZKPQ): An alternative five-factorial model. U B. De Raad, M. Perugini, *Big Five Assessment*. Hogrefe & Huber Publishers.

