

# NATIONAL LAW ENFORCEMENT APPLIED RESEARCH AND DATA PLATFORM

## *Officer Safety and Wellness and the Impact of New Technology*

### **Introduction**

The National Police Foundation's Platform project provides agency executives with actionable survey information from multiple perspectives to inform decision-making. Part of this mission involves looking for common trends and sharing these important findings with the Platform community, and the general law enforcement community.

The first core survey, Officer Safety and Wellness (OSW), explores aspects of the job and personal habits that affect an officer's health and well-being. The second survey, Impact of New Technology (Tech), looks at the various technologies used in agencies across the country and solicits opinions on whether officers find that technology improves the quality of their work, or impedes what they are trying to accomplish.

### **Methodology**

The Platform team compiled the results from the first 17 agencies to complete the OSW Survey, and the first 10 to complete the Tech Survey. They also evaluated the OSW results across agency size, and similar region to discern any notable differences. The team did not compare results for the West or the Less than 249 sworn benchmark categories, due to the small number of agencies in these groupings. The team also looked at differences in rank, gender, and generation for the more notable findings.

### **Impact of Increased Media Attention and Public Scrutiny**

In recent years, police officers and their agencies have faced increased scrutiny and attention from the media and the public. When asked about the increased scrutiny they face, 97% said it led to greater concerns about their safety. Officers also indicate that this has resulted in the public treating them with less respect in the past (91%).

69% of respondents admitted that this scrutiny makes them less willing to stop and question those engaging in suspicious behavior. A higher percentage of female officers (39%) indicated that they were not deterred from stopping and questioning individuals engaging in suspicious behavior, than male officers (29%). This result is statistically significant ( $p\text{-value} = 0.016$ ).

These trends are similar across agency size and region.

### **Sufficiency of Training**

Training for active shooter situations, contacts with the mentally ill, and scenario-based trainings are most consistently provided in Platform agencies. Officers identified foot pursuit safety, identifying characteristics of weapon concealment, and recognizing indicators of ambush attacks as areas where more training is needed.

Northern agencies responded that there is no, or they need more, hands-on driving training, while Southern and Midwestern agencies note that this type of training is sufficient (*this is statistically significant with a p-value of 0.00*). Differences also occur with high speed pursuit safety. Southern agencies respond positively to having received this training, while agencies in the North and Midwest state that they need more training in this area.

Perhaps the most notable difference in hands-on driving tactics is seen when making comparisons across agency size. Our smallest agencies (less than 50 sworn) primarily responded that they do not receive or need more training in this area. All other size groupings responded positively, or with varying opinions.

### **Organizational Factors Effecting Safety**

#### **Safety Gear**

Officers feel safer using most of the equipment asked about in this survey, particularly ballistic vests/body armor, and reflective vests for traffic control. They are mostly unsure what effect cell phones has on their safety, although many said it makes them feel safer. This trend is common across agency size and region.

Despite evidence of the importance of seatbelt compliance in driving safety, over one third (35%) of the officers in these surveys reported that they do not always wear their seatbelts. 83% of officers who provided a reason as to why they do not wear them, indicated they are inconvenient (54%) or it makes them feel less safe (31%).

Inconvenience was indicated most often by respondents in the 30-34 age range (26%) when compared to all other age ranges. Conversely, respondents in age groups 40-54 indicated most often that they do not wear seatbelts because they are not required due to assignment (40-44, 21%; 45-49, 45.83%; 50-54; 33.33%), when compared to all other age groups.

For the most part, officers also say they always wear ballistic vests (81%) and body worn-cameras (84%). Responses varied as to whether they wear reflective vests. For those who indicated why they do not wear reflective vests, the majority (63%) indicated they are not required due to assignment or are inconvenient (20%).

Trends are similar across agency size, except for reflective vests. Those reporting from the largest agencies (500+ sworn) indicated they are less likely to always wear their reflective vests (28% vs. 43%). This is most notable in our Northeastern agencies (28% always wear them compared to 37% in all other agencies), where they also have the lowest percentage of respondents say they always wear their seatbelts – 48%, compared to 82% and 84% for agencies in the South and Midwest respectively.

### **Availability of Resources**

Most respondents enjoy access to back up support, and properly functioning radios and cars. While the margin is small, most officers indicate that there are not enough officers on shift to ensure their safety (56%) compared to having enough officers on shift (44%). Purchase of requested safety equipment, and refresher training all varies across departments.

### **Maintaining Healthy Habits**

Results are mixed for most health habits, but there are a few notable points. The majority (64%) stated that reducing tobacco use is not applicable, suggesting they are not tobacco users. Another 14% frequently, or always focus on reducing use. Officers are least focused on seeking emotional support (55%) and reducing caffeine intake (65%). The use of caffeine is not surprising, considering the top three health concerns are **poor sleep quality**, job-related injuries, and **sleep disorders**.

### **Health Habits Over the Last Five Years**

Officers were asked whether they have been concerned about, have shown symptoms of, or have been diagnosed with a list of different health conditions. Poor sleep quality

is most often cited as the biggest concern. Officers indicated that they are concerned about or have symptoms of this, rather than a formal diagnosis. The second highest concern is a job-related injury. Most officers who indicated concern in this area were diagnosed with a job-related injury and a similar number are concerned about receiving such an injury. Officers in the smallest agencies ranked sleep disorders as the biggest concern, over job-related injuries. High blood pressure was more of a concern than sleep disorders for Southern agencies.

### **Technology**

Overall, officers seemed favorable toward the helpfulness of technology. They listed computer databases, the Internet, surveillance cameras on the street, and smart cell phones as the most helpful to patrol officers.

Officers responded that body-worn cameras do not lead to unfair discipline and that tasers increase compliance by combative persons. Many officers indicated that technology enhances their ability to problem solve, and do their jobs, but also state that effective problem solving requires good hunches and intuitions.

Perhaps not surprisingly, younger officers and those with less tenure indicated a stronger level of agreement when asked if technology enhances problem solving ability. The strongest dissent to this notion is seen for the oldest cohort in the age range of 55-64.

### **Discussion**

Based on what we have learned from the first 17 (Officer Safety and Wellness), and 10 (Impact of New Technology) agencies, there are a few important findings that should be highlighted.

### **Sleep as a Top Health Concern**

Concerns about sleep took two of the top three spots for health concerns among Platform officers. Officers not getting quality sleep, or experiencing symptoms of sleep disorders, is problematic. There is a large body of work that supports the importance of sleep. So, why are officers still indicating sleep quality as a significant health concern?

There is evidence that shift length, shift assignment, and personal circumstances can impact levels of fatigue (Amendola et. al., 2011; Vila & Kenney, 2002). Personal circumstances might include low pay, encouraging officers to take overtime assignments or moonlight, or young

children and a busy lifestyle that causes officers to choose family activities over sleep. One would suggest that agencies work to draft policy to improve sleep quality and solicit feedback from officers in crafting these policies.

### **On the Job Injuries**

According to the Bureau of Labor Statistics (2016), police officers experience more work-related injuries and illnesses than the many other occupations, and emerging research is finding that non-fatal injuries among officers are on the rise (Tiesman, et al, 2018). In data obtained by the BLS for 2014, violence and other injuries by persons (27%), falls, slips, and trips (25%), and overexertion and bodily reaction (21%) accounted for most nonfatal workplace injuries. Violence (56%) and transportation incidents (41%) were the cause of the majority of fatal injuries among police officers.

It is important to look at these incidents and consider what changes can be made to policy, training, and officer wellness to prevent nonfatal and fatal job-related injuries. A related National Police Foundation project, LEO Near Miss, allows officers and departments to submit their nonfatal incidents, or “near misses”, and lessons learned that could prevent these incidents from happening in the future. For more information, please visit <https://leonearmiss.org>.

### **Seatbelt Policies**

The percentage of officers who feel that wearing a seatbelt is inconvenient or makes them feel less safe is an important finding, considering the number of crash fatalities among police officers. According to the National Law Enforcement Officers Memorial Fund, auto crashes are the second highest cause of death for officers. The International Association of Chiefs of Police (IACP) *Reducing Officer Injuries* (2012) report found that officers who wore their seatbelts during a crash missed an average of 5 work days less after injuries sustained in a crash than those who were not belted in.

Mandatory seatbelt policies are also important considering the above discussion regarding officer fatigue. Vila (2000) found that four out of eight officers who had on the job injuries were fatigued. Senjo (2011) echoes this with the findings that excessive work and lack of sleep increases the risk of officer injury. These incidents include auto crashes, and when one is not wearing a seatbelt, the results can be catastrophic.

### **High Blood Pressure**

High blood pressure should also be considered a high priority health concern among officers. Although it was number four on the list of concerns, it only lagged 75 responses behind sleep disorders. Elevated blood pressure increases risk of stroke and hypertensive heart disease, and this hypertension combined with strenuous work circumstances can lead to devastating outcomes (see Kales et al., 2009). The stressors of the job, coupled with poor sleep, poor eating habits, and lack of exercise may be contributing factors to this issue.

### **Limitations**

We acknowledge that there are certain limitations to the analysis of this survey data. Due to the lack of a random, and representative sample, these results should not be taken as generalizable outside of the Platform community. Additionally, there may be some issues with an overrepresentation of large agencies, where responses of small agencies were dwarfed by the number of responses in large agencies. To mitigate this effect, we also looked for any differences between agencies based on size.

## References

- Amendola, K., Weisburd, D., Hamilton, E., Jones, G., & Slipka, M. (2011, March 31). *The impact of shift length on performance, health, quality of life, sleep, fatigue, and extra duty employment*. Retrieved from: <http://www.policefoundation.org/wp-content/uploads/2015/06/Amendola-et-al.-2011-The-Impact-of-Shift-Length-Full-Report-.pdf>
- Bureau of Labor Statistics. (2016). Injuries, illnesses, and fatalities. Fact Sheet, Police Officers, August, 2016. Retrieved from: <https://www.bls.gov/iif/oshwc/foi/police-officers-2014.htm>
- International Association of Chiefs of Police, & The Bureau of Justice Assistance. (2012). *Reducing officer injuries report*. Retrieved from: [https://www.theiacp.org/sites/default/files/2018-07/IACP\\_ROI\\_Final\\_Report.pdf](https://www.theiacp.org/sites/default/files/2018-07/IACP_ROI_Final_Report.pdf)
- Kales, S., Tsismenakis, A., Zhang, C., & Soteriades, E. (2019). Blood pressure in firefighters, police officers, and other emergency responders. *American Journal of Hypertension*, (22)1, 11-20. doi:10.1038/ajh.2008.296
- Senjo, S. (2011). Dangerous fatigue conditions: A study of police work and law enforcement administration. *Police Practice and Research*, (12)3, 235-252. doi:10.1080/15614263.2010.497659
- Tiesman, H., Gwilliam, M., Konda, S., Rojek, J., & Marsh, S. (2018). Nonfatal Injuries to Law Enforcement Officers: A Rise in Assaults. *American Journal of Preventive Medicine*, (54)4, 503-509.
- Vila, B. (2000). *Tired cops: The importance of managing police fatigue*. Washington, DC: Police Executive Research Forum
- Vila, B., & Kenney, D. (2002). Tired cops: The prevalence and potential consequences of police fatigue. *NIJ Journal*, (248), 16-21. Retrieved from: <https://www.ncjrs.gov/pdffiles1/jr000248d.pdf>