

# EC PSYCHOLOGY AND PSYCHIATRY Research Article

# Psychological and Physical Problems of being Overweight or Obese in Law Enforcement and the Impact on the Job Performance and Personal Lives: Control, Perception, and Assistance

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Received: January 28, 2019; Published: February 21, 2019

#### **Abstract**

The study was conducted to help bring awareness of the problems of police officers being overweight and obese, how to overcome the causes, and help determine remedies to combat the problems affecting the performance of job duties. A questionnaire was sent to a convenience sample of members of the police chief associations in the states of South Carolina and Florida that asked for their perceptions about problematic weight. In addition to basic demographics, seven specific open-ended questions were asked the chiefs concerning the causes and problems officers faced from being overweight or obese. The results provided recommendations from the police chiefs on how to combat the weight problems.

Keywords: Overweight or Obese; Law Enforcement; Job Performance

## Introduction

Obesity is endemic in the United States and in many other countries [1]. The literature has discussed articles on obesity, but most discussions center on the impact of physical wellbeing such as high blood pressure, diabetes, high cholesterol, and other blood abnormalities [2,3]. What about the impact it has on an occupation? [4] More specifically, what about the impact on law enforcement officers and the performance of their jobs, public image, and their self-esteem? The police are responsible for providing community safety and responding to emergencies in the general public. Citizens want to be confident that the police can indeed provide that safety and appropriate responses to emergencies; therefore, a discussion regarding obesity and health of LEOs is merited. Initially, public confidence emanates from first appearance, especially during an emergency which may or may not establish confidence. The intent of this study was to determine the attitudes and perspectives of police chiefs toward officer job performance, determine their perspective on causes and solutions to the problems, and to determine the role of the police chiefs in influencing change among the officers to avoid being overweight and obese.

# **Literature Review**

Mental and physical well-being of police officers are two of the most critical issues facing law enforcement officers (LEOs), but the issues are not addressed very often as stated by Willis [1]. There has been recent research on the mental wellbeing of officers especially with research on stress and recognition of LEO post-traumatic stress disorder (PTSD), and number of police officer suicides, but more is needed. In addition to these, there is the problem of vicarious traumatization experienced (VTE) by extreme trauma defined as "the cumulative transformative effect on the crisis worker who works specifically with victims of traumatic events" ([5], p. 26). The VTE effect can continue long after the initial impact of the traumatic event, especially for police first responders. Such events dealing with child abuse

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and family violence seem to be the prevailing types of crimes that dominate this concept ([5], p. 27). Research on the impact of obesity and being overweight on an individual's employment has been sparse [4]. According to Moore, Martin, and Lin, this is especially true of policing [6]. Police chiefs in Florida and South Carolina validated that police officers' overall performance and proficiency is hindered when they are overweight or obese [6]. There has been little dialogue on the problems of obesity and its impact on police officers in the workplace. Because police officers are responsible for the safety of the community, a discussion on the impact of obesity on health and employment is merited.

A study was conducted to discover the perspectives of police chiefs regarding obesity among police officers [6] to determine their viewpoints as leaders on work related problems of LEO obesity. There are many benefits to having physical fitness routines and resources. Weight control is an important benefit, but so are improved overall health, disposition, sleep, and increased self-confidence. After working in policing for several years, police chiefs may no longer understand the overall benefit of having access to physical fitness resources. They may be content with their general physical fitness and lifestyles. This can impact their views of obesity among personnel negatively and can cause adverse effects on public safety. According to Loux, more than 40 percent of public safety officers, including police are obese. This corresponds with previous research by Hartley and co-researchers that 40.5 percent of police officers were obese [7]. A study conducted by the Federal Bureau of Investigation [8], indicated that 80 percent of LEOs are overweight, but not necessarily obese based on body mass index (BMI), standards that do not always indicate fitness.

Researchers have suggested that shift work and changing hours may impact obesity rates among LEOs. For example, a study by several researchers lead by DiLorenzo [9] indicates that obesity rates are higher among shift workers when compared to day workers, but their distribution of body fat is not significantly different. In that study, shift workers had higher BMI scores than day workers, independent of age and job duration. DiLorenzo and fellow researchers concluded that shift work could very well be responsible for increased obesity among workers [9]. Numerous researchers have looked at how shift work and obesity affect sleeping habits of police officers [9,10]. Other variables explored by these researchers include long hours, sleep deprivation, alcohol, snack foods, stress, and the perception of a lack of administrative support. Their research also suggests that other variables associated with obesity include older age, health, and lack of support from family. In a recent study, police chiefs in Florida and South Carolina were asked about what they believed contributed to obesity and being overweight. They indicated shift work and poor eating habits contribute to obesity [6]. They were also asked what can be done about the problem.

Employee Assistance Programs (EAP) can assist weight management by providing access to equipment for cardiovascular workouts (such as treadmills, exercise bikes, elliptical machines) and strength training. Mandatory physical fitness can benefit agencies and officers by offering incentives to meet weight and fitness standards periodically, usually by offering extra vacation time or monetary rewards [11] although, there is no consistency with regard to having available workout equipment across law enforcement agencies. A research team of Moore, Martin, and Lin [6] also found that police chiefs in two southern states suggested having EAP assistance. Furthermore, Anshel and Kang [12] stated that while there has been discussion about workplace obesity interventions for LEOs, there has not been much of a discussion about perceptions of obesity among police chiefs and how they view LEO obesity in the police workplace.

# Psychological effects of obesity

Obesity continues to be a national pandemic as rates have tripled in the last 25 years [13]. Obesity is one of the nation's biggest health problems, the World Health Organization [14,15] estimates that 650 million people are obese. Relationships of obesity to health and quality of life such as high blood pressure, cardiovascular disease, and diabetes have been readily studied [16]. Additionally, obese individuals may suffer from higher levels of psychological issues [13,17,18].

Psychological issues are often prompted by weight discrimination and social stigma. Social isolation, avoidance, and rejection are often prominent in obese individual's lives [18]. An individual's psychological wellbeing may then be compromised in response [19]. Additionally, gender differences have been reported in obese individuals, with women experiencing more negative mental health outcomes [16].

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Possibly, because they are more preoccupied with looks than men. Especially girls, Beginning in childhood, overweight children are often targeted because of their weight and perceived as outcasts with relentless teasing. Many researchers agree that this leads to an array of poor psychological health issues that may follow these individuals throughout their lives, such as body dissatisfaction, self-esteem, relationship issues, depression, and emotional-eating [16,17,19,20].

Body image is a major variable that can be measured in a multitude of ways. However, obese individuals may experience body dissatisfaction beginning in early adolescence. Socio-cultural standards that pressure them to conform to a specific body type [19]. Obese individuals may face constant messages of their bodies from the media, leaving them unable to escape the mental reminders of their body image.

Another psychological effect of obesity is the impact on self-esteem. Self-esteem in relation to obese individuals may be compromised by poor treatment by peers and/or family members [19]. Individuals may have such extremely low self-esteem that they isolate themselves in fear of mistreatment by the public [16]. Intimate partner relationships may have a negative effect on self-esteem. Obese individuals may face rejection from partners and experience low self-esteem directly from hurtful comments [21]. With this being said, perception of self and social relationships are both affected by obesity.

Jackson and co-researchers [17] found that obese individuals reported more depressive symptoms, lower life satisfaction, and low quality of life than non-obese individuals. These depressive symptoms can begin as early as adolescence with a major risk for serious depressive disorder in later life [13]. Depression was found to be the most common psychological effect among women [16]. Participants reported an overall sadness, fatigue, and lack of energy that contributed to their depression.

Binge eating is another common psychological effect obese individuals may face. Many report being preoccupied with food or finding comfort in food [16]. Additionally, emotional states such as depression and reminders of body image, may also lead to comfort eating. Common indulgences of emotional eating often include foods that are high in sugar and fat. The stress of being overweight can lead to the learned association of using food to feel better through increased sensory pleasure, however causing additional weight gain is counter productive [22]. The Florida and South Carolina police chiefs recorded poor eating habits as well [6].

Obesity continues to be a pandemic of psychological and negative physical health outcomes at a national level [1]. Psychological well-being is internally affected by self-esteem, body image, and depression. Additionally, stigma, weight discrimination and being ostracized from society and family members may increase these negative psychological effects. In summary, obese individuals may have experienced internal and external weight discrimination that not only affects their physical health, but psychological health as well.

Stress can wreak havoc on the health of LEOs. Recovery time is needed after a response to a stressful situation. Officers need to know that a constant state operational readiness, also known as hypervigilance, cannot be sustained. Under hypervigilance, every encounter is perceived as a potential lethal encounter. When it is combined with a strategic behavior, it results in job performance that negates choice and autonomy. It causes problems with intellectual processing and can create adverse health concerns that can shorten or severely reduce the qualities of their lives [23].

#### Statement of the Problem

Attacking the problem of excess weight is a challenge. There are mechanisms in place to help, but it starts with motivation. What can be done regarding the problems of being overweight and obese among police officers?

# Methods

A questionnaire was sent to a convenience sample of members of the police chief associations in the states of South Carolina and Florida. The convenience sample specifically focused on two states (Florida and South Carolina) where there was an established relationship; these were in the southern region of the United States. A letter of invitation was sent providing information about the study to members of the police chief associations of each state. In order to meet ethical standards for the research, each individual had the opportunity to review the material and decide whether they were interested in participating. Participants were asked to select a pseudonym upon starting the survey in efforts to protect confidentiality. Individuals also had the opportunity to contact the authors to ask any questions after reading the material and prior to agreeing to be in the study. The survey was developed using a computer software program that was

made available through a link that included informed consent. Participants could write as little or as much as desired in responding to the questions. Once the survey was completed, the data was stored in a database.

In addition to basic demographics, seven specific open-end questions were asked the chiefs concerning the problems officers faced from being overweight or obese. The open-ended questions were designed to allow a more flexible expression of thought for the chiefs' responses. It was decided to ask open-ended questions that were qualitative in nature so not to have any limits of how much respondents could write in their responses. The results were organized into two tables, one showing the self-perceptions of chiefs' weight and the other illustrating the commonly recorded responses among the chiefs. The results were separated by state.

#### **Demographics**

There were 36 respondents in the study consisting of 31 males and five females. Most chiefs identified as white and six identified as black. The average age range was 52. Body mass indexes (BMI) were established based on reported demographics. Respondents' self-perception was different than reality. Table 1 illustrates the differences between self-perception and actual BMI scores.

Weight	Overweight	Normal	Obese
Reported Self-Perception	20	14	0
BMI Results	13	5	18

**Table 1:** Source [6].

As illustrated in Table 1, the respondents' self-perception of having a weight problem was different from the BMI results. Their perceptions of personal weight varied somewhat from the BMI stated weight as indicated in the table. Twenty respondents acknowledged they were overweight, 14 stated they were of normal weight, and two did not answer the question; none reported being underweight and none thought they were obese. The body mass index (BMI) tells a different story. The BMI score average was 30, ranging from 21.5 to 43. According to the BMI, only five of the respondents were in the normal weight category, whereas 14 had considered themselves having normal weight. Also, none had stated they were obese, but the BMI indicated that 18 were considered obese and 13 were overweight, although 20 had stated they were overweight. In addition to the demographics, there were seven open-ended questions that allowed respondents the flexibility to expand their responses as much as desired.

#### Results

The responses to the open-ended questions by the participants were separated by states, whereas the demographics of both states are combined. There were similarities between the two states indicating that each of the states' chiefs viewed similar officer problems with obesity and being overweight. Both state groups, Florida and South Carolina, indicated a lack of education and training, and a lack of sufficient funds to assist in curbing the weight problems of officers. The following questions (Q1-Q7) in Table 2 illustrate the various topics questioned; they have been edited down to fewer words to conserve space, without sacrificing the meanings of the questions, and of which have been preserved. Respondents from both groups had similar thoughts about several of the questions. The top three to five most frequent comments for each open-ended question are listed by state. Table 2 illustrates the collective responses to the seven open-ended questions presented to the respondents. Several of the response items were mentioned more than once [6].

		Q1 Meaning of obesity a	s defined by the chiefs					
SC	Limited job performance of the job	Lazy	Impacts overall health	BMI over 30	Outside ac- cepted health standards			
FL	Over Cooper standard (note: Cooper out of Dallas, TX, has nationally recognized stan- dards for police fitness)	Grossly overweight by 50 pounds or more	Weight that negatively impacts health and performance	Very little muscle mass	Excess body fat			
	Q2 The in	mpact of obesity and bei	ng overweight on perfo	rmance				
SC	Impaired movement and inabil- ity to defend oneself	Impacts overall job performance	More prone to injury	Appearance	Lacks job profi- ciency			
FL	Slower response rate; burden on joints	May give less than 100%	More prone to injury; at greater risk	Lack of stamina results in excessive force	Unable to deal with demands of job			
	Q3 Causes of obesity and overweight according to the chiefs							
SC	Poor eating habits	Sitting for long periods of time	Fast foods; stress	Shift work espe- cially when work- ing midnights and 12 hour shifts;	Lack of physi- cal fitness			
FL	Contributions that include sit- ting all day	Lack of exercise and poor diet; not able to exercise during work hours	Need time to get to the gym	Fast food and poor diet and Poor eating habits	Job stressors shift work			
	Q4 With limited available resources, what can help toward prevention of obesity and overweight?							
SC	Paid gym memberships	Annual physicals	Over 25 percent stated there were no incentives					
FL	Train at work either before or after shift	Paid fitness member- ships	Peer groups and EAP programs	Fitness chal- lenges.	Equipment at station;			
	Q5 Policies ar	e needed to support figh	nting against obesity and	d overweight				
SC	Mandatory training; pass- ing annual mandatory agility standards	Better funding and equipment; paid time to exercise with equipment at station.	Access to a dietician	Incentives to meet goals of fitness; yearly health physicals	Study material; motivation and counseling			
FL	Paid gym memberships	Education about a good nutrition, plan and fit- ness information	Exercise on duty; chief's support	Workout routines; training and edu- cation	Mandatory exercise time			
	Q6 The chief's role is to set an example by leading the fight against obesity and overweight							
SC	Need to be established by chief; lack of funding	Educate city council about the need for fitness and health pro- grams for officers	Agency needs to pro- vide time for officers to work out during duty time	Six responses lead by example and provide support	Support and make resources available.			
FL	Change the culture and lead by the chief	Need funding	Chiefs need to be involved with educating officers, community, and city officials; it goes beyond the job, it is for overall livelihood	Make it part of the workday	Understand it is for both officer safety and safety of community, as well as making sure officers make it home at the end of day			
	Q7 Recommendations for	r medical professionals	to assist prevention of	obesity and overwe	ight			
SC	Approach initial problem from a psychological perspective rather than just physical.	Suggest small in- cremental changes Encourage small suc- cesses.	Give officers goals and learn to make long- range changes.	Attend roll call once in a while to emphasize value of healthy lifestyle.	Recommend changes that do not take a lot of time or money			
FL	Provide frank comments about condition of officers after exams; provide a convenient schedule of exams	Emphasize maintaining health as you age, and the safety component of being healthy	Agencies should build a partnership to help reduce obesity	Provide nutrition and fitness plans; understand the job and the stress	Include services of nutritionist or dietician			

**Table 2:** Source [6].

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In Table 2, both groups of chiefs emphasized that they should be the ones leading by example the change in the department culture, and additional funds should be sought for education and workout equipment.

#### **Discussion**

There were three focus topics that materialized from the open-ended question responses [6]. The three insights that developed were, meaning of obesity and being overweight, impact in job functions, and causal factors toward the problem. The first was the meaning of obesity. It was how the chiefs described obesity and how they defined and theorized about obesity among police officers. The second focus topic that emerged dealt with having appropriate resources to address the problems of obesity ad excess weight. Only 20 LEOs indicated that they had access to exercise equipment in a convenient facility for working out. The third focus topic that materialized was a culture of healthiness and wellbeing. The role of police chiefs was to create a healthy culture. They considered themselves as leading various opportunities to combat obesity for first line law enforcement officers [6]. Although gender differences have been reported in obese individuals, with women experiencing more negative mental health outcomes [16], this study did not ask for gender differences regarding problems of performance, only police officers without regard to gender. Perhaps a future study should be conducted to determine whether there are any differences in police job performance problems between women and men or female and male that have weight problems [24-26].

### **Conclusion**

The chiefs' perceptions on the meaning of overweight and obesity are less than accurate, but understood what needs to be done. They realize that they should lead by example and place physical and mental health at a higher level of importance, and strive to secure more funding by educating city leaders about the dangers of being overweight. The immediate perception of the community concerning their feeling of safety when they see an officer that is obese or extremely over weight is a loss of confidence that the officer will be able to respond appropriately. Frequent scheduled examinations and mandatory fitness standards are important for all officers, not just those aging. Specific policies should be established and posted by police chiefs about the values of being physical fit, and how the benefits are positive for police officers, their agencies, and the communities they serve.

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*Citation:* Tristan K Martin and Richard H Martin. "Psychological and Physical Problems of being Overweight or Obese in Law Enforcement and the Impact on the Job Performance and Personal Lives: Control, Perception, and Assistance". *EC Psychology and Psychiatry* 8.3 (2019): 158-164.

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# Volume 8 Issue 3 March 2019

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