

U.K. police—almost one in five suffer with a form of PTSD

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Loyalist Protest, Belfast, Northern Ireland. Credit: [Joshua Hayes](#)

Close to one in five police officers and staff in the U.K. have symptoms consistent with either post-traumatic stress disorder or what's known as "complex PTSD"—yet over two-thirds of those suffering are unaware.

This is according to early findings from the largest force-wide survey yet undertaken, which focused on police wellbeing and screened for clinical symptoms of both disorders. The research has been conducted by a team of sociologists at the University of Cambridge and funded by the charity Police Care U.K.

Researchers analysed responses from 16,857 of the serving officers and operational staff who participated in "The Job, The Life," a major survey carried out across England, Wales, Scotland and Northern Ireland during autumn last year.

The research team found that 90 percent of police workers who responded had been exposed to trauma. Of these, one in five reported experiencing either PTSD or Complex PTSD symptoms in the past four weeks.

PTSD is an anxiety disorder in which traumatic or life-threatening events cause disturbing memories to recur as well as intense states of "hypervigilance."

Sleep disturbance, irregular heartbeats and sweats are common and can lead individuals to self-medicate with drugs and alcohol. The research found 8 percent of those workers exposed to trauma had clinical symptoms of PTSD.

Complex PTSD is a categorisation recently adopted by the World Health Organisation. It sees PTSD symptoms "harden" through repeated trauma exposure into a chronic condition of emotional numbness and disconnection.

Those suffering from Complex PTSD struggle to regulate their emotions, and often feel empty or hopeless as they become increasingly detached from family and colleagues. Researchers found 12 percent of

trauma-exposed respondents showed clear signs of the condition.

The researchers say their study suggests that overall PTSD rates in law enforcement are almost five times higher than general U.K. population levels, last estimated at 4.4 percent in 2014.

However, less than a third of those who showed signs of either disorder had been informed and understood this to be the case.

"For the first time in the U.K. we can see behind the cultural trope of the burnt-out copper who has seen too much. This is a clinical and public sector crisis," said lead researcher Dr. Jess Miller from Cambridge's Department of Sociology, who conducted the work with her colleague Dr. Brendan Burchell.

"Dealing with disturbing experiences is a defining part of policing, but employees have a right to expect resources to protect them from the impact of daily trauma exposure. Without such resources in place, the cost to policing and public safety will just mount up."

"Over half of our respondents said they had insufficient time to process incidents before being sent back out on the next call."

"A stiff upper lip attitude will not work in contemporary policing," said Miller. "Without decent interventions and monitoring for trauma impact, and a national conversation involving the Home Office and Department of Health, the alarming levels of PTSD our study has uncovered will stay the same."

The research encompassed serving officers across all ranks throughout the U.K., and operational staff such as emergency call operators and digital image specialists.

Two-thirds of all respondents to "The Job, The Life" said they had a [mental health issue](#) directly resulting from police work. Yet almost all the survey's respondents – some 93 percent – said they would go to work as usual if suffering from psychological issues such as stress or depression.

Repeated trauma exposure may also increase risks of long-term physical illness in the policing workforce. The survey results showed those with Complex PTSD symptoms reported three times the rate of cardiovascular disease as those without, and twice the levels of both gastrointestinal issues and immune disorders such as IBS and arthritis.

Even in the 80 percent without clinical levels of PTSD or Complex PTSD, half reported overall fatigue, half reported anxiety, and half reported trouble sleeping – all over the last 12 months.

Police Care U.K., a charity supporting the police and their families, is today calling for a national policing mental health strategy. With more than fifty U.K. policing employers, all with a different approach, they say there is a "postcode lottery" when it comes to attitudes and access to trauma management.

"There is no comprehensive strategy to tackle the issue of mental health in policing, and that has to change," said Gill Scott-Moore, Chief Executive of Police Care U.K.

"The service has real challenges around recognising and responding to the signs and symptoms of trauma exposure and is heavily reliant upon generic NHS provision that isn't equipped for the specialist treatment needed," she said.

Researchers found that just 16 percent of those that did seek help turned to their force. The vast majority of support was sought independently,

typically medication or counseling. One in ten adopted mindfulness training.

Ché Donald, Vice-Chair of the Police Federation of England and Wales, says the findings should act as a "wake-up call." "If officers are breaking, then how can we expect them to adequately serve and protect the public? We need significant, centrally-funded investment and we need it now," he said.

"The Job, The Life" is the first major study to use the WHO-adopted screening questionnaire for Complex PTSD, which Miller describes as "the brain's gradual maladjustment to the extraordinary." "Relentless filing of horror and human suffering inevitably changes who we are. We can start to doubt the meaningfulness of what we do and our role in the world," she said.

Participants were invited to reflect anonymously on their everyday experiences of trauma exposure and sense of PTSD.

One officer with 17 years' service described how night terrors developed after attending a series of murder scenes. "I'd wake up in hot sweats with constant dreams of the dead people."

Another recalled dealing with complex sexual abuse cases as sole investigating officer. "Little or no support from management. Victims hanging all their hopes and pressures on me."

Some describe days and even months in windowless rooms reviewing "terrorism material of a horrific nature" or the "chatlogs" of pedophiles. One officer talked of how reliving a death in custody through the formal investigation led to a nervous breakdown and suicidal thoughts.

"Considering we are clearly one of the more significantly at risk groups

in society, the police are really bad at managing mental health issues resulting from trauma," said one officer. "We are even worse at prevention than we are at cure."

Elsewhere, the researchers found effusive praise for treatment and support given by supervisors and force psychologists. "I dread to think how my life would have ended up without the support that was made available to me," said a staff member from Major Investigations with over 30 years' service. "The worst aspect of being ill was that I was simply doing my job."

There were also suggestions that budget cuts to policing have exacerbated mental health problems. "Policing requires teamwork, colleagues around for support, that's no longer the case and has not been for several years. I have paid the price for that," said one officer with 16 years' service diagnosed with PTSD.

Many described the cumulative effect of frequently experiencing traumatic incidents, but there was also an understanding and acceptance that this was simply part of the job.

"Policing is by its nature a stressful job and officers are exposed to some of life's most challenging situations on a daily basis," said Lancashire's Chief Constable Andy Rhodes, the National Police Chiefs' Council Lead for Wellbeing.

"The study does not surprise me and it provides evidence to support investment in prevention as well as acute services," he said. "With stigma around mental health slowly reducing we are seeing hidden issues emerging such as high levels of stress and trauma impact, which can contribute to escalation if they aren't addressed."

Rhodes is leading the National Police Wellbeing Service, which

launched at the end of last month. He says it will provide forces with expertise on occupational health provision, training and health checks to "support the mental health of all officers and police staff."

"We are already working with the NHS and international policing colleagues on a suicide prevention strategy which will involve collecting data and reviews from suicides, an area we need to do far more work on and quickly," Rhodes said.

"We have a responsibility to look after the men and women whose job it is to keep us safe."

"The Job, The Life' is the first U.K. survey to include screenings for Complex PTSD. However, as people with Complex PTSD have to be suffering with PTSD in the first place, researchers say their results can be compared to general population rates of PTSD from the APMS.

Provided by University of Cambridge

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