

Andrew Paterson

Trauma and Resilience in Contemporary Australian Policing

Is PTS Inevitable for First Responders?

 Springer

Trauma and Resilience in Contemporary Australian Policing

Andrew Paterson

Trauma and Resilience in Contemporary Australian Policing

Is PTS Inevitable for First Responders?

 Springer

Andrew Paterson
Chandlers Hill, SA, Australia

ISBN 978-981-16-4415-3 ISBN 978-981-16-4416-0 (eBook)
<https://doi.org/10.1007/978-981-16-4416-0>

© The Editor(s) (if applicable) and The Author(s), under exclusive license to Springer Nature Singapore Pte Ltd. 2021

This work is subject to copyright. All rights are solely and exclusively licensed by the Publisher, whether the whole or part of the material is concerned, specifically the rights of translation, reprinting, reuse of illustrations, recitation, broadcasting, reproduction on microfilms or in any other physical way, and transmission or information storage and retrieval, electronic adaptation, computer software, or by similar or dissimilar methodology now known or hereafter developed.

The use of general descriptive names, registered names, trademarks, service marks, etc. in this publication does not imply, even in the absence of a specific statement, that such names are exempt from the relevant protective laws and regulations and therefore free for general use.

The publisher, the authors and the editors are safe to assume that the advice and information in this book are believed to be true and accurate at the date of publication. Neither the publisher nor the authors or the editors give a warranty, expressed or implied, with respect to the material contained herein or for any errors or omissions that may have been made. The publisher remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

This Springer imprint is published by the registered company Springer Nature Singapore Pte Ltd.
The registered company address is: 152 Beach Road, #21-01/04 Gateway East, Singapore 189721, Singapore

Prologue

My Experience of Trauma

I began my first postgraduate degree in social work at the end of 1973. I took 12 months to complete the Postgraduate Bachelor of Social Administration degree and during that time was offered part-time work by the then Department for Community Welfare.¹ The Department was interested in me supervising a group of young offenders who lived in the Adelaide City square mile who were also known to be using illicit drugs. I accepted the position half time to begin with and later went full time as time permitted. The young men were challenging and as I was at the beginning of my social work career, I focused on engaging with them and their families in order to offer them opportunities for rehabilitation at an early stage in their criminal careers.

Crisis Care Unit and SAPOL

After 12 months in that role, I learnt about the possibility of the establishment of Crisis Care Unit. Crisis Care was a bold and unique innovation on the part of the Department for Community Welfare and South Australian Police. The objective was to establish a 24-hour, 7 days a week Crisis Intervention Program staffed by psychology and social work graduates who worked predominately with the police in responding to domestic violence. The unit—once established—was intended to offer on-the-spot services to police patrols who had attended domestic violence incidents and requested the attendance of Crisis Care staff. These were the early days of a focus on domestic violence from an operational policing perspective. Interest in domestic violence and SAPOL were predominately motivated by their desire to save time attending and re-attending such incidents. At this point in SAPOL's operational history, the department had a policy of non-intervention in family matters. This

¹ DCW was the South Australian Government's Welfare agency with responsibility for child welfare, youth justice and emergency financial assistance.

meant that police patrols would attend domestic violence incidents, restore the peace and at least temporarily stop the violence, usually without laying charges against perpetrators. They would then take some details of what was occurring and resume their patrol duties. Crisis Care marked a new era in SAPOL in that it was the first time that the organisation had become operationally involved with professionals other than their own sworn staff. It was decided after my appointment that before I recruited staff for the unit, I should spend 3 months in police patrol cars observing what police officers were doing in the field and also promoting the unit through my contact with officers. I was at that stage working closely with a senior police Superintendent named Ray Killmeir who at that time was responsible for police training and who later became Deputy Commissioner of South Australia Police. He was a thoughtful, highly intelligent and pragmatic individual, and together we worked through what we foresaw as significant difficulties in terms of blending the SAPOL para-military culture and that of the proposed Crisis Care Unit. My presence in the patrol cars gave me an opportunity to observe what police officers did and also it gave police officers an opportunity to ask questions about the proposed Crisis Care operation so that they could begin to prepare to work with it should they be so inclined.

I began my patrol activities in late 1975, and this was less than 12 months after police women in South Australia had come into uniform and began to undertake the same duties as their male colleagues. This was a time of significant change as many male police officers had reservations about working with female police in the field. Many told me quietly that they were concerned that they now had an extra responsibility, that of protecting their female partners from violence when it became a possibility. Police officers who attended domestic violence situations in 1975 were usually part of what were called “mixed patrols”. Mixed patrols consisted of a male and a female officer; the latter were considered by virtue of their gender and history in policing to be more interpersonally competent when tasked to domestic violence incidents.

Crisis Care became operational in early 1976 and after a reasonably slow start gained the confidence of operational police. This was clearly indicated by the frequent requests from police for assistance in their family-related duties. We noted that the majority of such requests came from younger patrol officers.

A few years after the unit’s establishment, I was asked to negotiate a siege where somewhat surprisingly the officer in charge announced on a loud hailer to the person within the building that I was coming in to talk to him in order that we might “sort something out” adding that “he is not a copper”. I entered the premises knowing that the person inside was armed with a shotgun and after 3½ hours of intense conversation and negotiation, I was able to leave the building in his company. He was subsequently charged with offences, but after a short time the charges were dropped. This was a particularly stressful event for all concerned. But it was a profoundly vertical learning experience for me in terms of dealing with that kind of situation and its emotional aftermath.

The process of learning to manage and support a Crisis Intervention agency at that time was complex, and I was determined to replicate the best qualities of my previous managers in terms of the way in which I managed the Crisis Care Unit

itself. There was a very intense level of collegiality and camaraderie within the unit. We were initially a staff of only eight professional people, plus one clerical officer. We covered the metropolitan area of Adelaide 7 days a week, 24 hours a day and the process was very much one of learning on the job and sharing our insights and expertise with each other as we became more competent and experienced. The only literature to which we could refer at that point was based on psychiatric insights after critical incidents, largely in the United States of America (Parad and Caplan 1969; Caplan, 1964; Smith, 1977). This was Crisis Intervention theory in its earliest form.

One of the major concerns was the need to be accepted as competent and useful by operational police. This happened slowly. Police in those days were particularly strategic and practically minded. They had little time for what they perceived as “touchy, feely” aspects of social work, and so we were motivated very strongly to make practical decisions that lead to outcomes which enabled police officers to hand over the responsibility for particular families to us rather than to continually attend their disputes without achieving useful, long-term outcomes.

My other profound learning experience was around police culture and the culture of the justice system. I learnt quite quickly how closely knit police officers were and how they relied upon each other to remain healthy in the context of what was often a stressful and demanding job. I enjoyed the adrenalin around police operations, and I appreciated strategic thinking as applied by police officers and gradually realised that the police we worked with were intelligent, thoughtful and dedicated to “the job”. These were smart people. My principal police colleague, Chief Superintendent Ray Killmeir, would frequently send a police cadet around to the secret location of Crisis Care bearing an envelope which contained an article from a journal such as *Psychology Today* with a note attached saying “read this and ring me. Regards Ray”. A tutorial would usually follow where we discussed the implications of the research for our work. We developed a close working relationship with a majority of police officers on patrol and the unit over the years and developed significant expertise in this area. Similar Crisis Units were introduced around Australia in the early 1980s.

This was the beginning of my close professional working relationship with SAPOL. This was also the period in which DSM 3 first defined Post-Traumatic Stress Disorder. I became acquainted with the concept through a working relationship with some psychologists who were establishing the then Vietnam Veterans Counselling Service. At Crisis Care, we had become aware that a disproportionate number of Vietnam Veterans were amongst perpetrators of domestic violence during our attendances through police referrals. My discussions with the psychologists establishing the Vietnam Veterans Counselling Service covered a whole range of issues but included the expression of my view about sending young men to a conflict like Vietnam, knowing that they would be exposed to significant risk, many of them being conscripts. Upon their return from Vietnam in 1977/78, the same young men were shunned by some sectors of South Australian society. I could not understand why having sent young men to that conflict where they had seen what they saw and had done what they did and then upon their return society either ignored their psychological trauma or referred to it as a disorder. My view was that we were probably unjust in defining their response to Vietnam as a disorder. I felt more inclined to see

it as a natural response to a profoundly significant set of unnatural circumstances. My view has not changed significantly over the ensuing years.

I also became aware that strategic and practical thinking was critically important in terms of the crisis intervention context. We needed to work with SAPOL, usually with individual police officers, to establish ways in which we could best deliver our services to police and also to other members of the community through our after-hours responsibility for the Department for Community Welfare. At this point, I was working shifts when I could, as well as being on call 7 days a week after hours. The on-call responsibilities often involved being woken in order to give my approval to such activities as taking young people into the temporary care and control (Guardianship) of the Minister for Community Welfare. During this period, I learned the implications of being on shift, I learned about the impact of sleep deprivation and a great deal about the immediate aftermath of being involved in critical incidents laced with high levels of adrenaline.

When I left Crisis Care in 1982, I was weary. One evening in 1980, while sitting at home I suddenly began trembling violently although I knew that I was not ill and certainly was not cold. Our general practitioner attended and considered that I was probably undergoing some kind of stress reaction which he temporarily medicated. I then began a process of defining what was happening to me as well as trying to work through the experience. This was not PTSD. It was something else. Over the following months, I recovered slowly but realised that what had befallen me was some kind of anxiety state that related directly to the stress and pressure I had been under over the 6 years during which the Crisis Care Unit established itself. I took some leave against the advice of senior colleagues within the Department for Community Welfare because they considered that taking leave on the grounds of stress may well disadvantage my future career.

The Ash Wednesday Bushfires

On February 16, 1983, disastrous bushfires swept across South Australia and Western Victoria killing 75 people. I clearly remember the morning of the day, as it was unusually dark, windy and suffocatingly hot. I was then District Manager of a suburban Community Welfare Centre in Adelaide's inner South East, recovering from the exhaustion following my Crisis Care tenure. That evening, I sat with my family watching television reports of the devastation, with a sense of frustration that I was no longer part of the Crisis Care Unit and therefore unlikely to be involved in meaningful crisis intervention relief activities. I need not have worried about that as our home telephone rang the following evening directing me to prepare to travel to Mt Gambier the next day to organise and support a local social work team to work with families of those who had been killed in the fires. I flew south in a small twin-engined aircraft and was told by the pilot who had been airborne above the south east on Ash Wednesday that he had witnessed nothing like the fires during his long career. He told of solid sheets of flame 2,000 feet above the pine forests that covered much of

the region and of mature forests flattened like sticks by the backdraft of the flames. I looked down in awe as we came in to land.

That afternoon, I met with six local social workers employed by the state welfare department (my organisation), the Education Department and local health agencies. All were young, inexperienced and desperately trying to recall what their lecturers had taught them about supporting victims of extreme trauma. We spent the first day covering those issues and then allocated families to each worker to contact and offer support and counselling. These were the very early days of disaster relief strategies and services. We responded by utilising the theory and practice of crisis intervention, drawing on my time with the Crisis Care Unit. It was demanding work. I met a farmer in the middle of his paddock as he stood twisting rusting wires together to form a fence no longer needed as no animals on his property had survived the fires. His pregnant wife and three children had died trying to escape the fire after he had directed them to do so. He was left with the clothes he was wearing. After a conversation during which we outlined resources he might wish to access, he turned to me and said, "This must be very difficult for you, dealing with all this tragedy". I was speechless.

Two weeks into the experience, it was announced at one of our regular planning meetings that a professor of psychiatry from the University of Queensland would be joining us and would be working with me for the next week. I was less than delighted, expressing the view that the last thing I needed was an academic psychiatrist peering over my shoulder. My respect for that profession had been negatively impacted by the Crisis Care experience. I was directed to fly home that evening to spend some time with my family whom I had not seen for a fortnight and to meet Prof. Beverly Raphael at the Adelaide Airport the next morning to fly back to the south east and to brief her during the journey. I met the Professor as arranged and she introduced me to a young Psychiatrist, Dr Sandy (Alexander) McFarlane who took notes of our in-flight conversation on the back of several aircraft sick bags, having forgotten to bring a note pad for that purpose (McFarlane, 1986). I became aware very quickly that the Professor was vastly experienced in disaster responses and was enormously impressed by her insights and ability to engage with the community in which we were working. Some 30 years later, she introduced me to Post-Traumatic Growth Theory which formed the basis of my present research (Raphael, 2014). Both she and the now Prof. Sandy McFarlane became world authorities in dealing with post-disaster trauma as well as making significant contributions to trauma theory generally in military and first responder contexts. Both contributed to my decision to translate experiences such as the Ash Wednesday response into my subsequent career with victims of trauma.

I returned to my duties as District Manager and 12 months later flew to the national Disaster College at Mt Macedon, Victoria, to meet with others who had been involved in the aftermath of Ash Wednesday fires in similar roles to mine. We gathered for what we thought was an operational debrief and were ushered into a theatre and shown uncut footage of the fires for some 15 minutes. When the lights came up almost everyone in the room was in tears and showing signs of distress. The organisers were shocked. These were the very early days of critical incident debriefing and before the realisation that helpers were often significantly impacted

by the events surrounding their intervention. I was unable for many years to talk of my Ash Wednesday experiences, both in private and during presentations without becoming emotional.

Victims of Crime Service

After a period of 7 years working as a District Manager for the Department for Community Welfare, I was offered the opportunity of a secondment into the fledgling Victims of Crime Service in Adelaide. Previously when engaged in a state tour promoting the recent establishment of the Rape Crisis Centre at Adelaide's Queen Elizabeth Hospital, I encountered a retired Commissioner of Police from Queensland named Ray Whitrod. Ray had left Queensland in the early 1980s, having disagreed with the then Premier Joh Bjelke Petersen about the government's inaction with regard to corruption within Queensland police. Ray upon his arrival in Adelaide, settled into retirement but after some years, was approached by the parents of some of the young women who had been murdered by Christopher Worrell as a part of a series of homicides that became known as the Truro murders. The bodies of several of the young women Worrell murdered were dumped in paddocks outside Truro in the Barossa Valley of South Australia. Victims of Crime Service was in the very early stages of its development as Whitrod responded to the request for help from the parents of some of the young women who were murdered and began establishing what became a voluntary organisation largely staffed by family members of those who had been murdered.

Ray was enthusiastic about the new organisation and contacted me to see if I could assist with setting up some processes for VOCS around the retention of information and the establishment of records that would enable the service to prosper. In 1989, I applied for the position of Executive Director of Victims of Crime Service. Ray was delighted to receive my application, and he and then VOCS Board Chair John Halsey interviewed me at the somewhat primitive VOCS offices and quickly informed me that I had been successful in gaining the position.

I saw my responsibilities as enabling the professionalisation of the organisation as well as being clinically involved utilising my skills as a social worker. Over the first 2 years of my appointment, I was able to add several professional staff to those who were already present when I arrived and to engage volunteer staff in ways that were more suitable to their skill and commitment levels. It was also clear that a significant proportion of my responsibilities would involve raising the profile of crime victims within the justice system as well as publicising the services that the organisation made available to individuals and families affected by crime and violence. I developed a caseload that largely consisted of family members of those who had been murdered and also did a great deal of work debriefing cash handlers after armed robberies which were prolific at that time. It was clear that advocacy would be particularly important as SAPOL at that stage was the most sympathetic section of the justice system as far as victims of crime were concerned. This was largely because they were present

immediately after the victimisation occurred and were therefore sympathetic to the victim's experience as well as focused on instituting processes that would lead to charges, trials and justice being dispensed to those who had caused the victimisation in the first place. The court system largely ignored victims of crime in the late 1980s and early 1990s, valuing them only in so far as they offered themselves as witnesses for the prosecution. Our role at VOCS therefore was to offer support and counselling to victims of crime as well as trying to change aspects of the justice system that were presently not offering them recognition or status as victims of crime.

My work with families of homicide victims was confronting, as I would usually make contact with the family shortly after the homicide had taken place. The families were always in states of disengagement, shock and acute grief. I realised quite early in the process that my role at that point in their experience was simply to engage with them and then stay engaged as they worked through the early stages of their grief that frequently turned to anger and sometimes focused on the inadequacies of the justice system they were experiencing.

As the years passed, I realised that no one that I worked with in the situation I have just described could have been diagnosed with PTSD in terms of my observations of them. They were possessed by grief, they were often depressed, they expressed high levels of anger and a sense of injustice about what had happened particularly when they encountered the intricacies and complications of the justice system that left them feeling confused and isolated. My role as an advocate was critically important in that as well as supporting them through their grief I was also able to represent them within the system and seek to explain its processes. At this time, I was also involved heavily in critical incident stress debriefing. I travelled to the United States of America as I had developed a close working relationship with the National Organization of Victim Assistance which was based in Washington DC. I undertook a 3-week training programme in the United States with National Organisation of Victim Assistance and the Federal Bureau of Investigation implementing what I later realised was the Mitchell model of critical incident stress debriefing. This I practiced regularly and realised its effectiveness both with victims of armed robbery and secondary and tertiary victims of homicide that had occurred in institutions, public places and private homes. I recall being summoned to a university college in Adelaide after a young student had been murdered by a fellow student. The students themselves were shattered by what had occurred as were their teachers and those who administered the college. We had one debriefing session and at one point in that session, I realised that I was the only person in the room who was not in tears. Debriefing clearly was intended to allow people to express their emotions and to begin the process of dealing with what had occurred. Many expressed the view that they found my presence and demeanour encouraging, and particularly cash handlers were prepared at that point for a normal recovery as well as the possibility that they may be involved in future armed robberies. One of my achievements at Victims of Crime Service was to create and present a training programme for cash handlers that prepared them for armed robbery and gave them advanced information about possible reactions and responses to it. We talked with victimised cash handlers about possible reactions, described such responses as normal and encouraged people to stay in touch with us as they

worked through their trauma. That was the beginning of my focus on the concept of resilience. I was profoundly interested in what contributed to the capacity of those who were able to deal with such life-threatening experiences adequately and in a short period of time and equally with those who could not.

During this period, I spent a great deal of time in the company of operational police. SAPOL was at that stage developing its Victims of Crime branch, and I worked with mainly female police officers as that process began and continued. Later, I was also heavily involved in the training process when a small group of female Sergeants decided that domestic violence training was critically important to middle managers (Sergeants) and devised a series of training modules with which I became involved as a presenter. I spent time with police officers at national conferences as I had done when the Crisis Care Unit was developing. At such times, I developed close relationships with police that enabled them to unload their concerns about some of the duty-related experiences they had had. They often became emotional at such times. At this point, I began to realise the cost for some individuals of a long career in policing.

Mobilong Prison

I developed a working relationship with the Department for Correctional Services in an endeavour involving improved communication between that Department and Victims of Crime. During one such meeting with the then CEO Sue Vardon, she asked me whether I would be interested in a career with Correctional Services. She informed me that the General Manager's position at Mobilong Prison² was about to be advertised and she suggested that I should give serious thought to applying for that position. Her motivation was to change her Department's culture by injecting "outsiders" into middle management positions. I applied, and after 6 years at Victims of Crime Service was appointed General Manager of Mobilong Prison at the end of 1995. This was a significant change of role as I transferred from Victims of Crime Service where I had small staff and a relatively small budget to Mobilong Prison where I was responsible for 70 staff, 200 prisoners and a budget of approximately \$6 million in 1995/96.

When I began my time at Mobilong as General Manager, there was much consternation among the prison staff who considered that having a social worker in charge of the institution might be a problem. They consoled themselves with the view that as a result of my experience with victims, I would probably not be "soft" on prisoners. Over the ensuing months and years, I was able to convince them that all could be well if we were able to consider our duties, our responsibilities and our legal obligations in open-minded and innovative ways. My basic strategy at Mobilong was to spend a great deal of time in the prison itself, walking around by myself, talking to prisoners

² Mobilong is a medium security, State run prison at Murray Bridge, seventy kilometres from Adelaide. In 1995, it housed 200 prisoners.

and staff about the operation of the prison and their individual circumstances. This was an effective strategy in terms of me becoming aware of potential crisis situations before they turned into crises and also it reassured the staff and some prisoners that I was interested in their well-being. I also made a point of encouraging innovation as staff members were encouraged to make suggestions with regard to changes in the way we approached running the prison and its rehabilitation programmes. During this time, I also gained an understanding of criminal behaviour from the perspective of the offenders and developed a broader knowledge of what contributed to initial and continuing criminal activity.

I was comfortable with the para-military culture of Mobilong Prison and Correctional Services and valued it greatly. As part of my responsibilities, I spoke often and at length with unit managers in the prison and with those who staffed the various facilities and sections within it. I reinforced my view that management and leadership involved listening, supporting and encouraging staff to participate in the process of change within institutions. The Correctional Services experience also reinforced my view of the “us and them” syndrome where people on the ground in prisons referred to Correctional Services headquarters as “bullshit castle”. I became acutely aware during my Correctional Services experience of the danger of organisations not being open to change and the absolute imperative that strategic thinking in terms of such change should be unhurried and comprehensive. After 2 years in Corrections, my contract was terminated and I established Empower Justice Services, a consultancy that focused on crime prevention, restorative justice, critical incident debriefing and training. I ran the consultancy for the next 13 years.

Empower Justice Services P/L

Once more, I found myself working closely with police officers, this time in crime prevention working with police intelligence Sergeants around criminal activities and their location as well as working with many colleagues that I had previously engaged with in my other roles within the justice system. My activities around critical incident debriefing continued, again in the context of armed robbery as a result of referrals from SAPOL officers, petrol station franchisees and other cash handling organisations. Our younger daughter became a police officer during this period and subsequently married a fellow police officer so I was given another view of the police organisation, as it were from within the family. I watched with great interest the changes that occurred in our daughter’s life and how she adapted from having been a professional social worker to a professional police officer. She embraced her new culture, becoming a competent patrol and family violence operative over the 19 years she has served.

The Empower Justice Services experience enabled me to engage with the justice system from a different perspective. This time in the context of innovation and also from the perspective of a person who was now independent of allegiances to the “silos” and departments within the justice system.

Teaching At University

In 2010, I was approached by Flinders University to apply for a role as a Field Education Coordinator within the social work programme. For the following 6 years I supervised students on placement often within the justice system and again observed their engagement from the perspective of that systems impact on individuals. A significant part of my innovative activity in this role at Flinders was the establishment of police placements within family violence investigation units at SAPOL.

I was also encouraged by academic colleagues to consider undertaking postgraduate study. My initial negative response to the suggestion was that of a practical hands-on practitioner, but later I began considering the opportunities that postgraduate study might offer for me to put my career in some perspective and consider my experience within the systems in the context of academic research. My early intention was to continue my interest in trauma by studying police, ambulance, fire and correctional services officers but after being encouraged to “focus”; this was refined down to the point where I decided to study resilience among police officers only. I approached this from a social work perspective. I was encouraged by the development of the positive psychology movement who in my opinion were adapting their practice to that of one close to social work, in terms of their new objective of looking for strengths and positives in people’s experiences rather than only negatives and pathology.

In a 2013 conversation with Prof. Beverley Raphael whom I had first met during my engagement during the 1983 Ash Wednesday bushfires, I was introduced to “Post-Traumatic Growth” theory. Tedeschi and Calhoun were referenced by Prof. Raphael who encouraged my immediate attention to their research. Before I began the research, I engaged with a psychologist over a 2-month period to ensure that I had a good platform from which to launch myself into the study. The psychological debrief that I undertook reviewed and reflected my career as the particular psychologist I consulted had worked with me in the 1970s establishing the Vietnam Veterans Counselling Service. This was a good way of clearing the slate and preparing me to engage in the research with an open mind.

Contents

1	Introduction	1
1.1	How Resilient Are South Australia Police Members?	1
1.2	Aims of This Study	2
1.3	My Conversation with the Data	4
1.4	The Interview Themes	10
1.4.1	Power, Organisational and Police Culture, “the Job”	10
1.4.2	Feminisation of Policing	10
1.4.3	Death and Bodies	11
1.4.4	Keeping Well, Coping	11
1.4.5	Asking for Help	11
1.4.6	Sleep	11
1.4.7	Resilience	11
1.4.8	PTSD and Policing	12
1.4.9	Post-traumatic Growth in Policing	12
1.5	Research Design and Methodology	12
1.5.1	The Sample	14
1.6	Sapol History and Structure	15
1.7	Theories of Policing	17
	References	20
2	Power, Organisational and Police Culture: “The Job”	23
2.1	“The Job”	23
2.2	Police Culture. What Is It?	24
2.3	The “Police Family”	25
2.4	Police Organisational Culture	26
2.5	Police Management and Leadership	27
2.6	Management and Leadership: The Data from the Interviews	30
2.7	The Organisation and Change: The Literature	36
2.8	The Organisation: Data from the Interviews	37
2.9	Where Next?	39
	References	40

- 3 The Feminisation of Policing** 43
 - 3.1 Women in SAPOL: A Short History 44
 - 3.2 Women in Policing: The Informing Literature 46
 - 3.3 Women Police and Masculine Policing Culture 48
 - 3.4 Women in Policing: The Data from the Interviews 52
 - 3.5 Women in Policing: Bullying and Harassment (the Data) 55
 - 3.6 What Can Scholars Learn from the Experience of Women
in a Police Force? 56
 - 3.7 Where Next? 58
 - References 58

- 4 Death and Bodies** 61
 - 4.1 Death and Bodies. The Informing Literature 62
 - 4.2 Confronting Jobs: The Literature on Policing and Trauma 64
 - 4.3 The Data from the Interviews: Death and Bodies,
Confronting Jobs 65
 - 4.4 Suicide and Policing: The Literature 69
 - 4.5 Suicide and Policing: The Data from the Interviews 73
 - 4.6 Suicide from the Psychology/Psychiatry Interviews 76
 - 4.7 Death Messages: The Data from the Interviews 77
 - 4.8 The Smell of Death: Data from the Interviews 78
 - 4.9 Death and Bodies: Conclusions 79
 - 4.9.1 Where to from Here? 80
 - References 81

- 5 Keeping Well. Coping** 83
 - 5.1 Not Dwelling on Things: A Way of Coping. The Informing
Literature 85
 - 5.2 Not Dwelling on Things: The Data from the Interviews 86
 - 5.3 Alcohol and Coping. The Informing Literature 89
 - 5.4 Alcohol (A Coping Mechanism) Data from the Interviews 90
 - 5.5 Humour. A Cultural Way of Coping. The Informing
Literature 93
 - 5.6 Humour: The Data from the Interviews 93
 - 5.7 Relationships, Marriage and Coping 95
 - 5.8 Relationship Issues from the New South Wales Police
Autobiographies 95
 - 5.9 Relationships and Coping: The Data from the Interviews 96
 - 5.9.1 Critical Incident Debriefs and Coping 98
 - 5.9.2 Debriefs and Coping. The Informing Literature 98
 - 5.9.3 Debriefs and Coping: The Data from the Interviews 102
 - 5.9.4 Numbing: A Way of Coping 107
 - 5.9.5 Numbing, a Way of Coping: The Data 108
 - References 111

- 6 Asking for Help** 115
 - 6.1 The Informing Literature 115
 - 6.2 Asking for Help: Data from the Interviews 116
 - 6.3 Asking for Help from the Psychology and Psychiatry
Interviews: Themes 119
 - 6.4 Treatment 123
 - 6.5 What Have We Learnt? 125
 - 6.6 Where Next? 126
 - References 127
- 7 Sleep. The Elixir of Resilience** 129
 - 7.1 Sleep, the Informing Literature 130
 - 7.2 Sleep Problems and Exhaustion: The Autobiographies 132
 - 7.3 Sleep: The Data from the Interviews 133
 - 7.4 What This Research Reveals 136
 - 7.5 Where Next? 136
 - References 137
- 8 Resilience in Policing** 139
 - 8.1 Resilience: The Informing Literature 140
 - 8.2 Resilience and the US Military 145
 - 8.3 Optimism and Its Impact 146
 - 8.4 The Data from the Interviews: Optimism and Resilience 147
 - 8.5 Mates and Camaraderie. Building Resilience Through
Culture: Data from the Interviews 156
 - 8.6 Gilmartin: Helping Cops to “Bounce Back”. the Data
from the Interviews 160
 - 8.7 What Have We Learnt? 162
 - 8.8 Where Next? 163
 - References 163
- 9 PTSD and Policing** 167
 - 9.1 PTSD: An Epistemology 168
 - 9.2 The PTSD Literature: The Developing Diagnosis
and Response to the Trauma Phenomenon 171
 - 9.3 Biological Perspectives on PTSD: Diagnosis Made Easy 172
 - 9.4 Critics of the PTSD Diagnosis 174
 - 9.5 PTSD and Policing 179
 - 9.6 The Autobiographies: Themes from a Police Journey
into a PTSD Diagnosis 179
 - 9.7 PTSD from the SAPOL Interviews: The Data
and Discussion 182
 - 9.8 The Incidence of PTSD Among SAPOL Officers:
(Psychologist and Psychiatrist Interviews) the Data 187
 - 9.9 What Have We Learned? 188
 - 9.9.1 Where Next? 189

References 189

10 Post-traumatic Growth in Policing 193

10.1 Post-traumatic Growth in the Interviews 197

10.2 What Have We Learnt? Post-traumatic Growth and Policing 199

10.3 Future Research Possibilities 200

References 201

11 Conclusions: Policing and Growth 205

11.1 The Significance of My Research 206

11.2 How My Findings Connect with Earlier Work in Policing
and Stress 206

11.3 The Limitations of My Research 207

11.4 Future Research 207

11.5 Resilience: The Themes that Emerged from the Interviews
and Their Significance for Existing Theory 208

11.6 What is “Resilience” in Policing? Where Does It/Should It
Come from? 210

11.7 Recommendations: (Implications of My Findings
for SAPOL and Other Police Organisations.) 211

References 213

Appendix A: Information Sheet for Police Participants 217

Appendix B: PASA Support Letter 221

Appendix C: SAPOL Research and Survey Committee Letter 223

Appendix D: Information Sheet for Psychiatrists and Psychologists 225

Chapter 1

Introduction



They call it 'The job' because it's not a job. That's the joke.

SAPOL Senior Sergeant, 28 years' service

What disturbs men's minds is not events, but their judgements on events

Epictetus 55–135 AD

Any abnormal reaction to an abnormal situation is normal behaviour

Victor Frankl

Abstract This chapter introduces the research question: “How resilient are South Australian Police Officers” and summarises the themes that arose from the 50 interviews as well as the research design and method. The themes included power, organisational executive culture, the feminisation of policing since the 1970s and the impact on police culture, death and bodies, the constant companion of operational police, keeping well, coping in the operational context, asking for help when traumatised, a risky action for operational police, sleep, its critical importance to well-being and resilience, resilience, its meaning and importance to policing, PTSD and policing, the media, and the contemporary expectation that trauma exposure will inevitably cause injury and post-traumatic growth theory. How it applies to policing and resilience. This chapter also examines traditional and more contemporary theories of policing and the impact, if any, they have on the way police organisations see their role in the “good order” of society. A brief history of South Australia Police, a summary of the research methodology and a description of the cohort of police officers interviewed conclude the chapter.

1.1 How Resilient Are South Australia Police Members?

My 35 years of experience in the South Australian justice system has been characterised by trauma experienced by others and at times by myself. Police officers have populated my professional career as I worked with them in several roles. In the 1970s, an early domestic violence support programme allowed me to engage with operational police colleagues on patrol. In providing support to crime victims

in a non-government agency, I worked with officers whose taskings¹ involved their contact with the same group. As a consultant, I worked in intelligence-led crime prevention activities and as a prison manager I enlisted the support of police officers when inmates broke the law while incarcerated or when my staff needed assistance to maintain the good order of the prison. I have had significant experience working with police officers as a colleague whilst being “unsworn”. At times, I have acted as a confidant to officers in conversations that they may not have had with sworn colleagues. Often they talked of duty-related challenges such as injuries sustained by them and their capacity to inflict harm (sometimes terminal) on others. At such times, they often became emotional, expressing a vulnerability not expressible elsewhere in their organisation. I have been consistently impressed by their resilience and sometimes wondered how it was maintained. This study explores those issues, changes in police culture, how women fare in “the job” and how management strategies impact their well-being. My experience, my age and my understanding of the language of policing, all contributed to the rich data that came out of the long interviews and that informed the thematic structure of this research. Contemporary ethnographic research into policing and its culture has not achieved this level of detail and insight (Faull, 2017; Henry, 2004; Loftus, 2009). The topic-specific literature around trauma, resilience and growth through traumatic exposure is embedded in the themes from the interviews which form the chapters of the book.

1.2 Aims of This Study

This research project sets out to explore mechanisms that police officers use to “normalise” their experiences to preserve the delicate professional balance between “coping” that Henry (2004) calls “psychic numbing” and being responsive to victims and survivors in their everyday work environment. Recent advances in post-traumatic growth theory will be considered, which set out to re-interpret exposure in a positive context, as well as preventative experience in Australia and internationally.

There are five aims directing this research:

1. To research current literature, both academic research and that generated from within police organisations, and to frame and understand trauma theory. This analysis spans from military service and “shell shock” in World War One, through “battle fatigue” in World War Two and PTSD responses after the Vietnam War and subsequent conflicts (Jones & Wessely, 2005). Such theory is now applied to non-military contexts quite broadly (Seligman, 2011).
2. To compare current PTSD theory with post-traumatic growth theory in terms of the tendency of current PTSD models to predict the “inevitability” of some traumatic responses and to medicalise the treatment of the condition once diagnosed. Systems theory, also known as “Field Theory” (Lewin, 1951) is a typical

¹ A “tasking” is a direction to a police patrol to attend an incident that warrants police attention. They are “tasked” to attend.

social work approach that looks beyond the individual and his/her internal predicament, to the factors such as personal, familial, organisational, social and structural that may influence recovery and re-engagement. It will too form a theoretical framework for this thesis as the interviewer seeks to address the complex issues around individual relationships within families, police organisations and the community in which policing takes place. Saleebey summarises these relationships thus, “As we discover the desires, talents and interest of each person...we hone our skills in recognising, appreciating, valuing and utilising that which is already there. In a sense, we co-create with individuals and various social settings a mutually enriching partnership and exchange” (Saleebey, 1996:54).

3. To obtain qualitative data into policing, trauma and resilience through interviews with serving and retired police officers. Such interviews will be based on biographical research approaches (Roberts, 2002; Zinn, 2004) which encompass the use of life stories; in this case, police careers from the perspective of the officer. This approach has been suggested by the growing availability of autobiographical accounts of police careers so far encountered by the researcher (Horner, 2011; Rogers, 1999; Sparkes, 2013). Interviews were conducted with the intent of exploring with officers how they have maintained resilience over their careers and what factors, in their view, contributed to a long and healthy experience, or otherwise, of policing.
4. To identify and define the influence of command structures and police culture on the development of resilience or susceptibility to post-traumatic reactions as part of police activities and to examine the importance of exposure to death and injury in the line of duty to the development of healthy trauma responses and to examine the place of “dark humour” in the development of resilience in police officers.
5. To examine the effectiveness of contemporary critical incident debriefing approaches when offered to police after exposure to serious critical incidents.

The literature referenced for this research is embedded in the thematic chapters and covers the history and development of trauma theory and its recent application to the experience of “first responders” including police officers. Post-traumatic growth theory offers a more positive view of the impact of trauma, defining opportunities for individuals, whilst being impacted by trauma exposure to also experience personal (and professional) growth. A qualitative approach, unusual in this scope in most policing research due to access problems not experienced here, was chosen to make the voices of these officers and clinicians clearly heard, as they tell their own stories of resilience, service and challenge. Police management literature rarely addresses managing the mental well-being of officers. This research focussed on the impact of SAPOL management and leadership on the resilience of those officers interviewed. The final research aim seeks to clarify from an operational police perspective the value of critical incident debriefs in the context of a vigorous, largely academic debate about the value of offering such opportunities to first responders.

1.3 My Conversation with the Data

I considered myself a practitioner, and gained undergraduate and postgraduate qualifications to enter my profession and relied on an ongoing study, both structured and informal to develop and maintain my skills. Often, I invited academics to observe my activities, shifts at Crisis Care, training sessions in the victim support agency that I led and visits to the prison. That was a kind of pay-back for all they had developed in me and an attempt to inform their academic activities with practical experience. When I began this research, the topic was never in doubt, as I had formed views about trauma, PTSD, debriefing, psychology, psychiatry and the justice system that were based on my experience at a personal and professional level. Policing fascinated me. I liked working with coppers. I appreciated the way they thought and how we tackled systemic change as well as operational challenges. I enjoyed being part of the culture and recognised how privileged I was to be accepted into it. The no-nonsense approach to problem-solving we shared was important to me and that impacted my management style and the way I thought about priorities.

I knew that policing was stressful as I observed what lay behind the culture and competencies of the police I worked with and got to know. I recognised that police developed skills and strategies that worked for highly unusual situations, including humour, the ability to “numb” their responses to other’s trauma and deep camaraderie. Often, when attending national conferences with police officers as we did particularly in the 1970s and 1980s, my police colleagues would open up, with the help of a few beers. They talked of the responsibilities of the job and the tasks that had challenged them. They became emotional while doing so without apparent embarrassment.

The interviews were arranged with little difficulty after the invitation letter was published in the Police Association magazine. Emails and phone calls followed. Some policemen who knew me were the first to make contact, including a cohort of Sergeants from South Coast to whom I had presented some months earlier about my research. As I completed my presentation, I was surrounded by Sergeants, holding out business cards, telling me to contact them when I commenced interviewing. I knew that we had struck a significant research topic among present and past officers and that they recognised that the project could have the potential to change SAPOL’s approach to trauma through their career stories.²

My first interview was with a veteran officer, a woman with 40 years of experience, who was a Victim Contact Officer when I was at the Victims of Crime Service. That was a strong start, followed by a STAR group sergeant who had been shot on duty, then the oldest serving SAPOL member, and a Vietnam Vet who was very clear about why he was “well”. I was aware that I spoke and understood the language of policing, and I did not need to ask questions about those issues. I often waited quietly while

² Interviews were conducted in public places such as coffee shops, at Flinders University, police stations, Police Association offices and in the officer’s homes. Only two officers were interviewed in public where there was no problem with confidentiality as we were able to find quiet corners to talk.

the officers sat in silence gathering their thoughts during the interviews. As many of them acknowledged, these were not conversations they had experienced previously.

I began each interview by asking: “when did you join?” and “why did you join?” That led naturally into their career trajectories and into the confronting aspects of their career experiences. I always only needed to ask clarifying questions to keep the conversation flowing. I asked about sleep patterns, whether they “had ever been close to the edge”, what strategies they used to “keep well” and what career highlights and achievements they experienced. At the end of each interview I asked, “on a scale of 1–10, one being I have wasted my career in a hopeless, un-appreciative organisation, dealing with society’s dregs with few positive outcomes, and ten being I would do it all again, I have achieved a great deal, worked with great colleagues with many fantastic outcomes”. Most of them responded immediately with a score. The scores were surprising, thirteen 10s, ten 9s, thirteen 8s, seven 7s and two 6s. I either did not ask or did not record the other three responses.

The interviews were fascinating, exhausting and, according to those interviewed, unique. I took handwritten notes which proved easier than I had envisaged. I was aware that my social work communication and listening skills were important to the way the interviews developed as was my age and experience. Most of the policemen I had not met knew of my professional history. When handed information and consent sheets, all the interviewees read them carefully and when finished looked up and said “right” or something similar. None held back, telling of their experiences and challenges with care and relish. Some of their detailed accounts of incidents were challenging for both of us. During the interview with a senior sergeant recently retired from major crime, who reckoned he had investigated over 200 homicides and suspicious deaths, “towards the end I had had enough of grief, dickheads and dead bodies”. I was writing notes, head down when he said “sorry mate!” I looked up and saw that he was crying. We were in a coffee shop. He quickly regained control and later asked if such a response was normal. I replied in the affirmative.

Some interviews were conducted over several sessions where long-serving officers felt that more than one meeting was necessary. One was a very recently retired detective senior sergeant, a real “old school copper” who joined in 1974 and who had very high standards of care for his team members and a palpable sense of duty and achievement. He said, “you need a very high degree of intelligence to be a good cop”. And, “integrity in policing is very important; you’re either a copper or a crook”. I also interviewed an elderly retired Deputy Commissioner. We met three times at his home. I had worked closely with him when establishing Crisis Care in the mid-1970s. We kept in touch over the years through his daughter, now an Assistant Commissioner in SAPOL. I attended her graduation with her father in the late 1980s. Before our daughter commenced her academy course in 2001, we visited him and I watched with great pride as the two talked about policing. She addressed him as “Sir” throughout the conversation, apologising when he suggested she use his first name, saying that out of respect, she could not. I sent six pages of notes to him after our final research meeting and he responded by sending a 30-page typed document, which is an autobiography covering his enlistment in 1941 at the age of 15 to his

retirement in the late 1980s. It is profoundly insightful, particularly describing how he became a competent and caring manager.

I interviewed 15 women as a part of the cohort. Some I had worked with in Victim Support, some worked in family violence, some were in child abuse investigation, some on patrols, some were detectives, and the highest rank among them was that of sergeant. Those who enlisted in the 1970s and 1980s told of extraordinary levels of discrimination and harassment that included sexual assault on the job. That, they said was the most confronting aspect of policing, their operational duties were a breeze in comparison. Part-time work and parenting was always difficult in the culture of those days and has changed little since. Female police married to male police are only too aware of the barriers imposed by parenting and police male/female roles as they watch their husbands and co-parents of their children climb promotional ladders not available to them. I was astonished by the strength of these women and very aware of the contribution they had made to their organisation despite formidable barriers.

The present sophistication of SAPOL domestic violence services available to victims in South Australia is the result of the determination of a group of female Sergeants in the 1990s who recognised that the then state welfare agency, obsessed with child protection had taken its eye off the DV ball. They realised that Sergeants were the key and organised DV awareness training for them in which I participated as a presenter. It was a major turning point for SAPOL and a potent indicator of the “feminisation” of the force. I interviewed one of those female Sergeants for this research who joined in 1968, 6 years before women came into SAPOL uniformed service. She was trained for a mere six weeks and on graduation had no powers of arrest, and entered into a social work role within the organisation. She married a fellow officer, who was discriminated against as a result. She saw her career as unremarkable, I disagreed. A younger, female detective was really clear about her work in the Family Violence section, “I like doing something I feel strongly about, working with other agencies, making the process less distressing for victims”. She was aware of the changes in SAPOL due to the promotion of women into top jobs and could see the potential for significant change through them.

Thirteen Sergeants were interviewed. It became clear that those among them who had patrol teams were under most organisational stress with a strong sense of responsibility for the well-being of their charges who were mostly younger officers. They were constantly under a great deal of pressure from higher commissioned officers who were risk-averse and less than supportive of their middle managers “Everything that goes wrong is blamed on the shift manager”. They perceive this as a lack of trust in their judgement and professionalism. They offer debriefs “after difficult jobs”, notice changes in the demeanour of individuals within their teams and offer feedback after good and negative job outcomes. All of this without SAPOL training in these areas, “we don’t get any training but use a common-sense approach” said one. Another, deeply frustrated with SAPOL (the organisation) said, “My team time my ‘for fuck’s sake’ outburst when I come back on shift after time off. It’s now down to twenty minutes”. I am convinced that Sergeants are crucially important to the well-being of the organisation. With appropriate (basic) training in early intervention, debriefing and support they could become the foundation of very effective