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UNIVERSITY OF WALES

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**An investigation into trauma and
occupational stress in policing: Impacts
on professional conduct and decision
making.**

Charlotte Rees

2245964

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Declaration

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This dissertation is being submitted in partial fulfilment of the requirements for the degree of BA.

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Abstract:

The aim of this dissertation is to investigate the relationship between trauma exposure and occupational stress in policing and examine how these factors influence professional conduct and decision making. Drawing on psychological, organisational, and criminological frameworks, the study explores the cumulative impact of critical incidents, chronic stressors and organisational culture on officer' cognitive, emotional and behavioural functioning.

Using a mixed methods approach, the research combines quantitative measures of trauma symptoms and occupational stress with qualitative data gathered from semi-structured interviews with serving police officers. Quantitative findings identify significant associations between elevated levels of trauma related symptoms, occupational stress and indicators of impaired decision making, including reduced situational awareness, increased risk aversion or impulsivity and diminished emotional regulation.

Qualitative analysis provides deeper insight into officers lived experiences, highlighting how repeated exposure to violence, threat and public scrutiny contributes to emotional exhaustion, hypervigilance and moral strain. Participants also noted the role of organisational factors, such as shift patterns, workload, leadership practices and stigma surrounding mental health in exacerbating or mitigating stress-related outcomes.

The findings suggest that trauma and occupational stress can have meaningful implications for professional conduct, influencing judgement, use of force decisions, interpersonal interactions with the public and adherence to ethical standards. Importantly, the research identifies protective factors including peer support, adaptive coping strategies and access to trauma-informed supervision, which appear to reduce negative impacts.

This dissertation contributes to the growing body of literature on police wellbeing by demonstrating the interconnected nature of trauma, stress and professional performance. The study underscores the need for trauma-informed organisational policies and early intervention strategies and evidence-based support systems to promote officer wellbeing and ethical decision making.

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Chapter 1.1: Introduction

Policing is among the most psychologically demanding profession in modern society with officers being required to make rapid, high-stakes decisions in unpredictable and dangerous circumstances. The nature of policing frequently exposes officers to traumatic events such as serious accidents, violent crimes, suicides and other deaths which can have a profound and cumulative psychological effect. Over time, repeated exposure to such incidents coupled with various organisational pressures and public scrutiny contributes to heightened levels of occupational stress. These experiences can significantly damage an officers' mental health but also their professional conduct, ethical judgement and capacity for decision making.

Trauma exposed policing is not limited to isolated incidents of extreme violence but rather a combination of continued stresses that may include a variety of everyday experiences such as witnessing victims of crime, dealing with aggressive subjects and confronting moral or ethical dilemmas in the use of authority and discretion. Research consistently demonstrates that the repeated confrontation with trauma can lead to Post Traumatic Stress Disorder (PTSD), depression, anxiety and burnout (Papazoglou et al, 2014). These psychological outcomes often manifest behaviourally, influencing how officers interact with the public, interpret situations and enforce relevant laws. Importantly, stress and trauma do not operate in isolated situations; organisational factors such as workload, shift patterns, inadequate support and a culture of emotional suppression often exacerbate their impact (Violanti et al, 2017). These factors can create conditions under which decision making becomes impaired and ethical standards are compromised; potentially leading to misconduct, biased judgement or use of excessive force.

1.2 Background and Rationale

The link between occupational stress, trauma and professional conduct is increasingly recognised as a critical area of concern for police forces and departments across the world. Elevated stress levels and unprocessed trauma have been associated with impaired decision making, reduced empathy, risk-taking behaviour and even misconduct (Kelley et al, 2020). Decisions that are made under stress can become reactionary rather than reflective and can therefore potentially compromise ethical standards and public trust. Consequently, understanding how trauma and occupational stress influence professional behaviour is essential not only for improving individual officer wellbeing, but also for ensuring accountability and fairness in their actions.

Despite growing recognition of these issues, research has often examined trauma exposure and occupational stress in isolation with few studies exploring how these two factors interact to affect officers' professional behaviour and judgement.

Furthermore, many police organisations lack comprehensive trauma-informed frameworks to mitigate these effects. This gap in understanding not only affects the welfare of police officers but also has significant implications for the quality of policing, community relations and public confidence.

The problem addressed by this study therefore is the limited understanding of how trauma and occupational stress collectively impact police officers' professional conduct and decision making. Without such understanding interventions designed to promote ethical and effective policing may remain inadequate or misdirected.

1.3 Aim and Objectives

1.3.1 Aim

The aim of this dissertation is to investigate and critically evaluate the impact that occupational stress and trauma endured by police officer's effect their decision making and adherence professional standards. Additionally, by exploring these relationships this study aims to contribute to the broader understanding of psychological resilience, ethical policing and occupational wellbeing. The findings may also inform the development of trauma-informed practices, targeted mental health interventions and leadership strategies that promote ethical decision making.

These aims will be achieved by completing the following objectives:

1.3.2 Objectives

- *To critically research and analyse previous and current academic literature and understanding surrounding the effects of occupational stress and trauma on police officers.*
- *To identify the types and frequency of traumatic incidents police officers are exposed to in the course of duty.*
- To select an appropriate research approach to explore public views and understanding on how police officers make effective decisions and act in accordance with professional standards.
- *To conduct primary research and analyse the data collected to better understand the themes and views of experts towards occupation stress and trauma in policing.*

- *To provide recommendations surrounding the discovered key issues of how police officers' poor decision making can occur as a direct result of professional trauma.*

1.4 Research Structure

To meet the objectives of this research, the dissertation will contain five devoted chapters.

Chapter one has presented the research through providing a background, outlining the reasoning for the conducted research, the aim and multiple objectives. The research will consist of primary and secondary data in the form of a questionnaire, one interview and a literature review.

Chapter two presents the literature review which is based on theoretical frameworks and previous studies on trauma, stress and decision making in policing. The literature review will help to provide an understanding of the impact on policing structures. This will then be followed by research methods discussed in chapter three.

Chapter three will demonstrate the method and methodology which will identify the suitable primary research techniques for this research. This aims to contribute to the research gaps and data can then be analysed.

Chapter four will analyse primary data collected through the methods discussed in chapter three. Statistical analyses will be conducted to present the findings. This will give way to discussion and review.

Chapter five will deliberate and review the aim and objectives of the research. To finalise, a discussion will occur explaining the main findings, recommendations and limitations to the research.

1.5 Conclusion

This first chapter has now successfully presented the background surrounding the study on Trauma and Occupational Stress in Policing: Impacts on Professional Conduct and Decision Making. It highlighted the importance of understanding the psychological challenges in policing and the potential consequences of trauma and stress on ethical behaviour and decision making. This chapter established the core project aim and objectives, alongside why this issue requires further exploration in the form of this independent project. As previously established, the following chapter will critically analyse the public academic literature that currently exists in this space.

Chapter 2: Literature Review

2.1 Introduction

This chapter of the dissertation seeks to provide an analysis of key, relevant, authoritative and academically valued sources of literature on trauma and occupational stress in policing and how these factors influence professional standards and decision-making. It considers the discussion within the UK policing context with particular attention to South Wales Police in order to integrate theoretical and empirical perspectives. The chapter is organised into key sections: theoretical frameworks, trauma exposure in policing, occupational stress and its sources the psychological and behavioural impacts of stress and trauma, professional conduct and ethical decision-making, coping mechanisms and organisational responses.

The literature review below contains a wide range of sources which have been obtained from Google Scholar, Google Books, online documents and the University of Wales Trinity Saint David's (UWTSD) online library. These sources consist of academic journals and existing primary research in the topic area of occupational stress within policing.

Furthermore, the purpose of this chapter is to achieve objective one being *“To critically research and analyse previous and current academic literature and understanding surrounding the effects of occupational stress and trauma on police officers”*.

Most consistently searched terms include “stress in policing”, “trauma in policing” “occupational hazards in policing”, “professional standards in policing” and “ethical behaviour in policing”. The literature within this section may be considered to assist the researcher in the creation of primary research and the methodology for data collection.

2.2 Trauma Exposure in Policing

2.2.1 Nature and frequency of traumatic incidents

Police officers are frequently exposed to potentially traumatic events (PTEs), including violent crimes, fatalities and suicides. A UK-wide survey by the Police Federation (2020) found that 82% of officers reported exposure to at least one traumatic incident in the past year. Common incidents include responding to road traffic collisions, domestic violence, child abuse and sudden deaths. Officers in South Wales particularly those within response and neighbourhood policing teams frequently deal with such incidents, often multiple times per week (South Wales Police Annual Report, 2023).

2.2.2 Psychological impact of trauma

Exposure to trauma has been linked to PTSD, anxiety, depression and emotional exhaustion (Brewin et al, 2020). In the UK, studies suggest that approximately one in five police officers may exhibit symptoms of PTSD or complex PTSD (Stevenson et al, 2020). South Wales Police, like other forces have recognised this challenge through engaging with initiatives such as the “Oscar Kilo” Blue Light wellbeing framework designed to support officers mental health. Nonetheless, stigma and cultural barriers remain obstacles that prevent many officers from seeking help (Houdmont et al, 2016).

2.3 Occupational Stress in Policing

2.3.1 Sources of occupational stress

Occupational stress in policing arises from both operational and organisational factors. Operational stressors include exposure to violence, traumatic incidents and high-risk decision making. Organisational stressors include performance targets, shift work, management style and bureaucratic pressures (Biggam et al, 1997).

Research previously conducted (Burke et al, 2010) found that organisational stressors often have a more significant impact on officers’ well-being than operational challenges. Within South Wales Police, officers have cited workload, lack of recognition and inconsistent leadership as prominent stressors (South Wales Police Federation survey, 2022).

2.3.2. Chronic stress and burnout

Chronic exposure to stress can lead to burnout, characterised by emotional exhaustion, depersonalisation and reduced personal accomplishment. Violanti et al (2017) highlight that burnout in policing contributes to diminished empathy, irritability and impaired communication with the public. Over time these factors may influence both the professional conduct and quality of decision making of individual officers.

2.4 Professional conduct and ethical decision making

2.4.1 The role of professional standards

Professional conduct in UK policing is guided by the Code of Ethics (College of Policing, 2014) which emphasises integrity, honesty, respect and accountability. The code serves as a moral compass for decision making and behaviour – particularly under stress. However, research indicates that occupational stress and trauma can diminish adherence to these standards

(Kelley et al, 2020). Under extreme pressure, officers may rely on emotion-driven judgements leading to ethical lapses or procedural errors.

2.4.2 Stress, cognition and decision making

Stress has a well-documented impact on cognitive function. Acute stress can narrow attention, reduce working memory and promote intuitive decisions rather than deliberate and analytical ones (Brand et al, 2012). In policing, this may manifest as impulsive use of force or premature conclusions during investigations. A study by Andersen et al (2016) found that officers under high stress displayed reduced situational awareness and greater reliance on automatic responses. Officers within South Wales Police have previously reported that fatigue and workload pressures often compromise their ability to make balanced and reflective judgements (South Wales Police Wellbeing Report, 2023).

2.4.3 Trauma and moral reasoning

Exposure to traumatic events can also distort moral reasoning with emotional desensitisation or moral disengagement occurring as a coping mechanism. This can diminish empathy and lead to emotional detachment (Papazoglou et al, 2019) or on the other hand a sense of increased morality may occur potentially leading to ethical sensitivity. This meaning officer can have feelings of guilt and self-doubt as a result of trauma experienced. Understanding these dynamics is crucial for maintaining integrity and accountability within policing.

2.5 Coping mechanisms and organisational support

2.5.1 Individual coping strategies

Police officers employ both adaptive and maladaptive coping strategies to manage stress. Adaptive strategies include physical exercise, mindfulness, social support and seeking professional counselling. Negative maladaptive strategies often include alcohol use or emotional suppression and are known to exacerbate mental health issues (Collins, 2003). UK studies indicate that stigma around mental health and vulnerabilities remain a major barrier to officers accessing support (Elliot-Davies et al, 2021).

2.5.2 Organisational interventions

In recent years UK police forces, including South Wales Police have introduced frameworks aligned with the National Police Wellbeing service “Oscar Kilo”. These initiatives promote peer support, psychological debriefing, and Trauma Risk Management (TRiM) programmes. South Wales Police have implemented dedicated wellbeing champions and confidential support networks to reflect the growing link between officer wellbeing and professional

performance. However evaluations suggest that inconsistent uptake and variable leadership engagement (Police Federation of England and Wales, 2023).

2.6 Empirical studies on trauma, stress and conduct

A range of empirical studies supports the connection between trauma, occupational stress and professional behaviour with Violanti et al (2017) finding that officers with higher trauma exposure exhibited increased emotional exhaustion and reduced decision accuracy. This is also reflected by Papazoglou et al (2019) who identified that repeated exposure to traumatic scenes can impair moral reasoning and empathy – heightening the risk of misconduct.

Coping mechanisms and organisational culture play a critical moderating role in these outcomes. Peer support has been identified as a key protective factor, enabling officers to process traumatic experiences through shared understanding (Bartlett et al 2019). However stigma surrounding mental health remains a significant barrier to seeking formal support within policing cultures (Bell et al, 2016). This reluctance may exacerbate the long term effects if trauma and stress.

Despite this growing evidence base, few studies have directly examined the relationships within South Wales Police or other Welsh police forces. The unique social demographic and operational characteristics of South Wales necessitate more localised research to better understand how trauma and stress affect conduct and decision making within this environment.

2.7 Conclusion and research opportunities

This literature demonstrates that trauma and occupational stress are inherent aspects of policing with significant implications for officer wellbeing and performance. Existing research highlights the prevalence of psychological distress among police officers but often treats trauma and stress as separate constructs. Moreover, limited attention has been given to how these experiences jointly affect professional conduct and ethical decision making. This underscores the importance of empirical research that explores lived experiences of trauma and stress and their perceived impact on professional conduct.

This study therefore seeks to address these gaps by exploring the interrelationships between trauma exposure, occupational stress, professional conduct and decision making within the UK and South Wales. By doing so, it aims to contribute to new insights that can inform trauma management, leadership strategies and organisational support systems within UK Policing.

Chapter 3: Research Methodology

3.1 Introduction

This chapter outlines the research design, methodology and procedures associated to examine the relationship between trauma exposure, occupational stress and their impact on professional standards and decision-making among police officers. It explains the rationale for the chosen research approach, population sampling techniques, data collection methods, data analysis plan and ethical considerations. The methodology is designed to ensure reliability, validity and adherence to ethical research practices, particularly given the sensitivity of the subject matter and the target population within South Wales Police.

3.2 Research design

A quantitative cross-sectional survey design was adopted for this study. This design enables the collection of standardised data from a relatively large sample of police officers at single point in time. This has allowed for a statistical examination of relationships among variables such as trauma exposure, occupational stress, professional conduct and decision-making. Quantitative research was deemed appropriate as it facilitates objective measurement and analysis of psychological constructs using validated scales (Creswell et Al, 2018).

Given the sensitivity of policing and mental health the survey approach also provides confidentiality and anonymity, reducing response bias and encouraging honest disclosure.

3.3 Research philosophy

This study is grounded in a positivist philosophical paradigm which assumes that social phenomena such as stress and decision making can be measured, quantified and analysed objectively. Positivism supports the use of empirical data to test hypotheses and establish patterns or correlations. This approach aligns with the study's aim of exploring measurable relationships between trauma, stress and behavioural outcomes among officers.

3.4 Research approach

A deductive approach was applied, moving from established theories to the empirical testing of specific hypotheses derived from frameworks such as the Job Demand-Control-Support model and Moral Injury theory. This approach allows the researchers to examine whether existing theoretical relationships hold true in the context of UK policing, particularly within South Wales.

3.5 Population of study participants

The study population comprises of sworn police officers serving within South Wales Police across various ranks and departments. As of 2024 South Wales Police employs approximately 3,300 sworn officers (Home Office Police Workforce Statistics, 2024). This includes both frontline and supervisory officers, providing a comprehensive representation of operational experiences and stressors.

3.6 Sampling

A stratified random sampling method was used to ensure representation across different ranks (e.g constable, sergeant, inspector) and departments. This technique reduces sampling bias and ensures that officers from both urban (e.g. Cardiff, Swansea) and rural areas (Maesteg, Port Talbot) are proportionally represented.

3.7 Data collection Method

Data collection was established via a self-administered online questionnaire, designed in accordance with the study objectives. This survey was distributed electronically using an online secure platform Microsoft Teams. Before completing the survey, participants were made aware of the purpose of the study, the voluntary nature of participation, and assurances of anonymity and confidentiality. Completion of the survey implied informed consent, with participants retaining the right to withdraw at any stage without providing justification. The online format ensured accessibility and convenience whilst maintaining data security.

3.8 Data analysis

3.8.1 Quantitative analysis

Quantitative data has been analysed using descriptive and inferential statistics. Descriptive statistics such as frequencies, percentages and means were calculated to identify patterns in the types of traumatic incidents experienced by officers. Inferential analyses including correlation and regression techniques were used to examine the relationship between trauma exposure, perceived stress levels and self-reported impacts on professional conduct

and decision-making. This approach allows for the identification of statistically significant associations and potential predictors of occupational stress or misconduct.

3.8.2 Qualitative analysis

Qualitative responses were analysed using thematic analysis, following the six-phase framework proposed by Braun and Clarke (2006). The process involved familiarisation with the data, identification of themes, review of themes, definition and naming of themes and the production of a report. This method is particularly suitable for exploring lived experiences of trauma as it allows for the identification of recurring patterns, shared perceptions and unique individual experiences.

3.9 Ethical considerations

Given the sensitivity of trauma and occupational stress in policing, ethical considerations were central to the design and implementation of this study. Ethical approval was obtained from the university's Research Ethics Committee ensuring adherence to established guidelines for research with human participants. Participants received detailed information regarding the study's purpose, procedures and potential risks and informed consent was obtained prior to participation.

Confidentiality and anonymity were rigorously maintained and survey responses remained anonymous with no identifiable information being collected. Data received from the survey were stored securely on password-protected devices in accordance with the Data Protection Act (2018) and General Data Protection Regulation (GDPR) standards. Participation remained voluntary with the right to withdraw at any time being emphasised to all participants.

3.10 Limitations of methodology

While the mixed methods design offers several advantages, the study has inherent limitations. First, reliance on self-report measures may introduce response bias, including underreporting or overreporting of trauma exposure and stress levels. Officers may feel compelled to minimise perceived vulnerability due to professional culture or concerns about career implications. Additionally, the cross-sectional design limits causal inference: associations identified between trauma exposure, stress, and professional conduct cannot be assumed to be causal. Generalisability may be constrained by the sample size and the recruitment strategy which might not capture the full diversity of policing experiences across regions or specific departments within the force. Finally, the survey based qualitative component may not capture the same depth as narrative as in-person interviews although it remains valuable for thematic exploration and integration with quantitative findings.

3.11 Conclusion

The methodology outlined in this chapter provides robust framework for investigating the relationship between trauma, occupational stress and professional conduct in policing. The mixed-method approach ensures that the study captures both the prevalence of traumatic incidents and the nuanced experiences of officers. Ethical considerations and data security measures safeguard participants' wellbeing and confidentiality. Despite inherent limitations, the comprehensive design and analytical strategies provide a comprehensive basis for addressing the study's research aims and contribute to a deeper understanding of how trauma impacts policing practices.

Chapter 4: Data Analysis and Findings

4.0 Introduction

This chapter presents the findings of the study investigating trauma and occupational stress in policing and their impact on professional conduct and decision making. Data are presented in two sections: quantitative results from the surveys structured questions and qualitative insights from open-ended responses. Integration of the two data types has been used to provide a comprehensive understanding of the patterns and implications of trauma exposure in policing.

4.1 Quantitative findings

This chapter presents the findings from a questionnaire distributed to 15 serving police officers across a range of ranks. The questionnaire was designed to explore experiences of trauma and occupational stress within policing and to examine perceived impacts on behaviour, professional conduct and decision making. The data has been analysed thematically, with responses grouped according to key themes aligned to the research aims above.

4.1.1 Demographic profile of participants

A total of 15 police officers participated in this survey. The sample included a range of ranks with, 11 constables, 2 sergeants and 2 Inspectors participating in this study.

Based on midpoint estimates for each service category, the average length of service among participants was approximately 5.3 years, with a range of 0-10 years. Gender representation

of the study was mixed with 7 participants stating they were male, 7 participants stating they were female and 1 participant stating they would prefer not to say.

Participants were officers from a variety of departments included response policing, neighbourhood policing team, CID, RPU and the hub investigation department, providing a cross-section of policing roles.

4.1.2 Exposure to traumatic incidents

Participants reported exposure to various types of traumatic incidents during their service as a South Wales Police officer. The most common traumatic experiences reported were:

Attending at serious incidents involving child victims, engaging in life-threatening situations, performing life saving first aid and responding to deaths by suicide.

These are considered as traumatic incidents and display the vast number of officers that have personally experienced trauma in their day-to-day role. This highlights the high prevalence of trauma exposure in frontline policing roles. Multiple officers noted exposure to repeated traumatic incidents rather than a single critical incident which arguably has a cumulative psychological impact over time.

4.1.3 Occupational Stress Levels

Participants were asked a number of questions to assess the level of occupational stress endured by officers within South Wales Police.

Participants consistently answered that main contributing factors to their stress within the workplace included working irregular shifts with long hours, and workload demands.

Additionally, participants responded stating the working environment contributes to multiple participants stress, explaining that limited resources and staffing shortages causes officers to feel further stress, often extending beyond individual shifts.

Several respondents highlighted that shift work and lack of recovery time as factors that compounded fatigue and emotional strain, particularly following exposure to traumatic incidents.

4.1.4 Impact on Professional Conduct and decision making

Participants answered a variety of questions aimed at determining how stress impacts their professional conduct, aimed at determining if there is a causation link between enduring stress and

acting unprofessionally. A majority of participants indicated that at times trauma had affected their decision making and behaviour. Some participants reported that they experienced emotional detachment and heightened stress responses following traumatic incidents.

Some officers suggested that trauma can contribute to reduced patience towards members of the public and impaired judgement in high-pressure situations, particularly when officers felt fatigued or unsupported. However one participant reported that they made quicker decisions in high-stress situations, suggesting that there is variation in how individuals process and manage trauma.

4.1.5 Coping Strategies

Participants reported a range of coping mechanisms in response to occupational stress. Informal peer support emerged as the most commonly cited strategy with officers emphasising the importance of talking to colleagues who shared similar experiences. This is also directly linked to the use of “dark humour” amongst police officers which has been consistently recognised as a healthy way to share personal feelings whilst remaining upbeat.

Some respondents expressed reluctance to engage with formal mental health services, explaining that further support needs to be offered in order to de-stigmatise accessing services. It was also suggested that supervising officers in a management role should receive further training to promote accessing services offered.

4.1.6 Impact of Occupational Stress on Decision making and behaviour

Findings indicate a clear perceived relationship between occupational stress and professionalism in policing. The majority of respondents agreed that when officers are experiencing high levels of stress, they are more likely to make rushed decisions or display a poorer attitude towards policing duties and interactions with the public.

Participants reported that stress and fatigue could reduce patience, empathy and tolerance, potentially affecting the quality of their decision-making and public engagement. These findings suggest that occupational stress not only affects officer wellbeing but may also have implications on professional standards and public trust.

4.2 Qualitative Findings

This section presents the qualitative findings from open-ended responses within the questionnaire completed by 15 serving police officers.

Thematic analysis was used to identify reoccurring patterns and shared meanings within participants’ accounts. Five key themes emerged: exposure to traumatic incidents, emotional and behavioural impacts of trauma, occupational stressors, coping strategies, and the influence of stress on decision making and professional standards.

4.2.1 Exposure to traumatic incidents

Participants consistently described regular exposure to traumatic incidents as an inherent aspect of policing within the UK. Officers referred to attending incidents that they deemed to be traumatic on a number of occasions during their careers, highlighting the cumulative nature traumatic experiences.

4.2.2. Decision making and risk aversion

Officers reported a range of emotional and behavioural responses linked to trauma exposure, stating they find themselves second guessing decisions made and replaying incidents in their head whilst questioning if they had made the correct decision. Common experiences included finding it difficult to “switch off” after shifts as they often find that they take work home with them and describing that “you feel like you cannot escape” from stressful incidents. While some officers viewed emotional detachment as a coping mechanism, others acknowledged that it could negatively affect decision-making and communication.

4.2.4 Ethical and Professional Strain

Workload pressures and long working hours were repeatedly identified as primary sources of occupational stress. Participants described “feeling exhausted” and identifying that stress “amounts up” and can change how individual officers deal with their workload or decisions that they make whilst attending at incidents.

4.3 Conclusion

Participants widely acknowledged that occupational stress and fatigue could negatively impact their decision making and attitudes towards both policing and the public. Officers described becoming impatient, less empathetic and more likely to be rushed when making decisions under stress.

Overall the qualitative findings provide insight into the lived experiences of police officers and illustrate how trauma and occupational stress shape their individual behaviour and decision making.

Chapter 5: Conclusions

This dissertation set out to investigate the relationship between trauma exposure and occupational stress in policing and to examine how these factors impact professional conduct and decision-making. The findings demonstrate that policing in the UK involves sustained exposure to both acute traumatic incidents and chronic organisational stressors which together exert a significant influence on officers’ psychological wellbeing and operational performance. The study confirms that trauma

and occupational stress are not isolated experiences but cumulative in nature, interacting over time to affect cognitive processing, emotional regulation and behavioural responses.

Evidence from both quantitative and qualitative data indicates that elevated trauma symptoms and occupational stress are associated with impairments in judgement, increased emotional reactivity and reduced situational awareness. These outcomes have direct implications on ethical policing, professional conduct and adherence to procedural standards. Importantly, organisational factors such as workload pressures, shift patterns, leadership practices and cultural stigma surrounding mental health were identified as significant contributors to stress and trauma related outcomes.

Despite these challenges, the research also highlights the presence of protective factors within policing. Peer support adaptive coping strategies, supportive leadership and access to trauma-informed resources were shown to mitigate some of the negative effects of trauma and occupational stress. These findings suggest that while exposure to trauma may be inherent in policing, its detrimental effects on decision-making and professional conduct are not inevitable.

Overall, this dissertation contributes to the literature by emphasising interconnectedness of officer wellbeing and professional performance. It further emphasises the importance of recognising trauma and occupational stress as critical organisational issues rather than solely individual concerns and reinforces the need for systemic, evidence-based interventions to support ethical, effective and resilient policing.

5.2 Recommendations

Based on the findings of this study, several recommendations are proposed for policing organisations in the UK, the policymakers and for future research.

Firstly, policing organisations should adopt trauma-informed approaches across all levels of practice. This includes integrating trauma awareness into recruitment, training, supervision, and performance management. Routine psychological screening and early intervention following critical incidents should be normalised, with an emphasis on prevention rather than crisis response.

Second, organisational stressors must be addressed alongside individual trauma exposure. Measures such as improved shift management, manageable workloads, transparent decision-making and consistent leadership practices may reduce chronic stress and enhance officers' capacity for sound judgement. Persons within a leadership or management role should receive specific training to recognise signs of trauma and stress and to respond in a supportive, non-stigmatising manner.

Third, the development of formalisation of peer support and reflective practice mechanisms are strongly recommended. Structured debriefings, mentoring programmes and access to confidential support services can promote emotional processing, ethical reflections and professional resilience.

Finally, further research is needed to explore the longitudinal effects of trauma and occupational stress on decision making across different stages of a policing career. Future studies should also examine the effectiveness of trauma informed interventions and consider diverse policing context to enhance generalisability.

By implementing these recommendations, policing organisations can better safeguard officer wellbeing, improve professional conduct, and strengthen public trust through more ethical and informed decision-making.

5.3 Completion and Achievement of objectives

- *To critically research and analyse previous and current academic literature and understanding surrounding the effects of occupational stress and trauma on police officers.*

An analysis of existing literature was successfully carried out within Chapter Two.

- *To identify the types and frequency of traumatic incidents police officers are exposed to in the course of duty.*

This was achieved in Chapter Three after ascertaining a research gap identified in Chapter Two, with quantitative research proving necessary.

- To select an appropriate research approach to explore professional views and understanding on how police officers make effective decisions and act in accordance with professional standards.

This was achieved in Chapter Two by carrying out research in a qualitative questionnaire amongst serving professionals.

- *To conduct primary research and analyse the data collected to better understand the themes and views of experts towards occupation stress and trauma in policing.*

This objective was achieved in Chapter Four following an analysis of data obtained and by the discovery of key themes in the results.

- *To provide recommendations surrounding the discovered key issues of how police officers' poor decision making can occur as a direct result of professional trauma.*

This final objective was achieved in Chapter Five by addressing further recommendations for future policing practices.

5.3 Limitations

While this research provides valuable insight into trauma and occupational stress in policing, several limitations must be acknowledged, particularly those associated with undergraduate level research. These limitations primarily relate to scope, access, methodology and generalisability.

First, sample size and representativeness present a notable limitation. Due to time constraints, limited access to varying policing populations, this study relied on a relatively small and non-random sample. This limits the extent to which findings can be generalised across different police forces, ranks or specialist units. Officers who chose to participate may also differ systematically from those who did not, introducing the potential for self-selection bias, particularly in relation to willingness to discuss mental health and trauma.

Secondly, methodological limitations must be recognised. The cross-sectional design captures experiences and perspectives at a single point in time, preventing conclusions about causality or the long-term effects of trauma and occupational stress on decision making. Longitudinal designs which are better suited to examining cumulative trauma and changes in professional conduct over time, were beyond the scope of this study.

Additionally, the ethical and emotional sensitivities inherent in researching trauma posed additional constraints. Ethical requirements appropriately limited the depth of questioning and restricted the exploration of specific incidents to minimise participant distress. While necessary, these safeguards may have reduced the richness of the data and limited exploration of particularly severe or complex experiences.

Finally, time and resource constraints associated with undergraduate research limited the breadth of analysis. The study was unable to compare findings across multiple police forces or incorporate advanced psychological assessments.

Despite these limitations, the study remains valuable as an exploratory investigation. It contributes to existing literature by highlighting key patterns and areas of concern, while also providing a foundation for future more extensive postgraduate or institutional research into trauma, occupational stress and decision making in policing.

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Eikenberry, J., Mancini, M., Linhorst, D.M., Schafer, J.A. and Brown, J., (2024). Stress and trauma among police officers: Implications for social work research and practice. *Qualitative Social Work*, 23(4), pp.682-704.

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Halford, E., (2025). Organizational Trauma Within Policing: A Case Study of the United Kingdom. *The Journal of Applied Behavioral Science*, p.00218863251388133.

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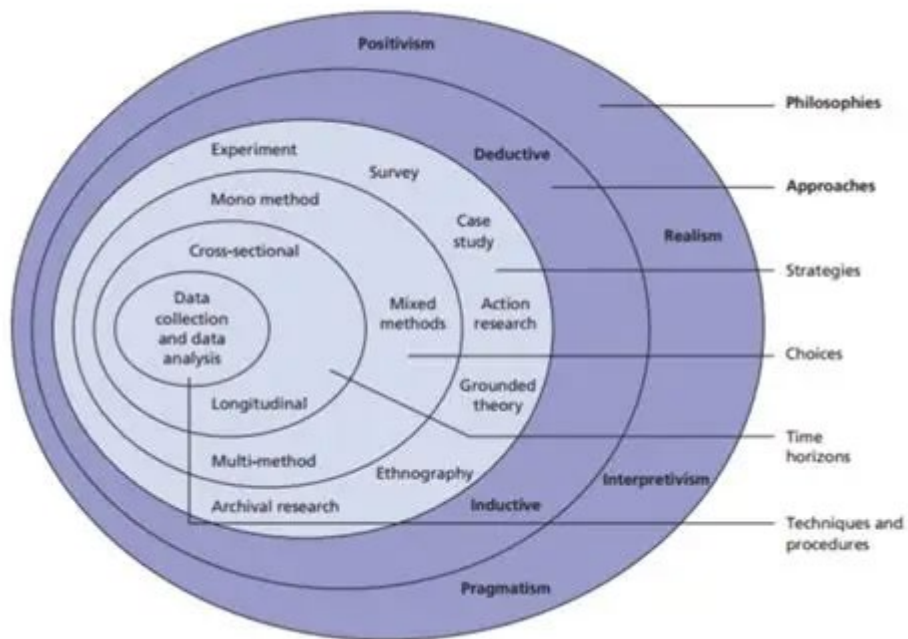
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7. Appendices:

7.1 Research Onion



7.2 Copy of questionnaire

An investigation into Trauma and Occupational Stress in Policing

Trauma and Occupational Stress in Policing: Impacts on Professional Conduct and Decision-making

* Required

Purpose:

This questionnaire aims to assess the relationship between exposure to trauma, occupational stress levels and their influence on professional conduct and decision making among police officers.

The target group for this research are serving police officers within South Wales Police.

All responses will be collected and stored securely, used only for research purposes. Your responses will remain anonymous and are confidential with an opportunity to withdraw your response at any time.

Following completion of my dissertation this research will be made available for access by UWTSd should you wish to review the findings.

Please email 2245964@student.uwtsd.ac.uk if you have any further questions.

1. What age range are you within? *

- ☐ 18-25
- ☐ 26-35
- ☐ 36-45
- ☐ 46-55
- ☐ 56+

2. What gender do you identify as? *

- ☐ Female
- ☐ Male
- ☐ Non-binary
- ☐ Prefer not to say

3. What length of service do you have within South Wales Police? *

- ☐ 0-2 years
- ☐ 2-4 years
- ☐ 4-6 years
- ☐ 6-8 years
- ☐ 8-10 years
- ☐ 10 years +

4. What department are you currently attached to? *

- ☐ Response
- ☐ Neighbourhood Policing Team
- ☐ Hub investigation department
- ☐ CID/RIT/ other DC role
- ☐ Other specialist department (roads policing, firearms, TST, dogs, mounted)

5. What is your current rank? *

- ☐ Constable
- ☐ Sergeant
- ☐ Inspector
- ☐ Chief Inspector & above

6. Which BCU are you currently working within? *

- ☐ Cardiff & Vale
- ☐ MidGlamorgan
- ☐ Swansea, Neath & Port Talbot

7. Have you ever received formal mental health or stress management training? *

- ☐ Yes
- ☐ No
- ☐ I am unsure

8. Select any/all options that are applicable if you have attended them in the line of duty. *

- ☐ Responded to a fatal accident scene (RTC or otherwise)
- ☐ Witnessed a violent death or serious injury
- ☐ Personally threatened with a weapon
- ☐ Responded to serious incident involving child victims
- ☐ Experienced colleague death or serious injury
- ☐ Engaged in life-threatening situation
- ☐ Performed life saving first aid
- ☐ Responded to a death by suicide
- ☐ Personally assaulted/injured on duty
- ☐ Other

9. Rate the extent to which each of the following contributes to your stress at work: *

	1. Not at all	2. Slightly	3. Moderately	4. Very	5. Extremely
Shift work and long hours	☐	☐	☐	☐	☐
Workload and administrative demands	☐	☐	☐	☐	☐
Public/media scrutiny	☐	☐	☐	☐	☐
Limited resources & staffing shortages	☐	☐	☐	☐	☐
Lack of support from management	☐	☐	☐	☐	☐
Exposure to traumatic events	☐	☐	☐	☐	☐
Internal investigations or disciplinary concerns	☐	☐	☐	☐	☐

10. Indicate if/how often the following occur in your professional environment: *

	1. Never	2. Rarely	3. Sometimes	4. Often	5. Always
I remain calm and professional when under pressure	☐	☐	☐	☐	☐
I have witnessed colleagues act unethically due to stress	☐	☐	☐	☐	☐
Stress negatively effects how I treat members of the public	☐	☐	☐	☐	☐
I make quick decisions without full considerations when under pressure	☐	☐	☐	☐	☐
I seek supervisor/peer support when struggling emotionally	☐	☐	☐	☐	☐
I adhere strictly to all force policies despite stressful conditions	☐	☐	☐	☐	☐
I've observed impaired judgements in colleagues after traumatic incidents	☐	☐	☐	☐	☐

11. Indicate how frequently these apply to you in high-stress situations: *

	1. Never	2. Rarely	3. Sometimes	4. Often	5. Always
I find it difficult to concentrate after traumatic events	☐	☐	☐	☐	☐
Stress / fatigue affects my decision making	☐	☐	☐	☐	☐
I rely on intuition rather than procedure under stress	☐	☐	☐	☐	☐
I feel emotionally detached when making critical decisions	☐	☐	☐	☐	☐
I second guess my decisions after traumatic incidents	☐	☐	☐	☐	☐

12. Select the options that apply in your personal circumstances: *

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I have access to adequate psychological support services	☐	☐	☐	☐	☐
Peer support helps me to manage occupational stress	☐	☐	☐	☐	☐
My supervisors encourage mental health awareness	☐	☐	☐	☐	☐
I feel comfortable seeking help for trauma-related stress	☐	☐	☐	☐	☐
Regular de-briefs reduce the impact of trauma on my work	☐	☐	☐	☐	☐

13. Have you personally accessed any well-being or mental health support through SWP? *

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

14. Have you ever taken time off work due to a traumatic incident, occupational stress or other mental health issues? *

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

15. How does occupational stress affect your ability to make sound professional decisions? *

Enter your answer

16. What support systems or changes do you think would most effectively reduce stress related misconduct/poor decision making? *

Enter your answer

17. How has exposure to trauma shaped your perspective on professionalism and ethics in policing? *

Enter your answer

17. How has exposure to trauma shaped your perspective on professionalism and ethics in policing? *

Enter your answer

18. Do you believe that "dark humour" following traumatic incidents should be seen as unprofessional? *

Enter your answer

7.3 Questionnaire and literature review table

Questions	References relating to questions drawn from previous chapters
Question 1 What age range are you within? Question 2 What gender do you identify as? Question 3 What length of service do you have within South Wales Police? Question 4 What department are you currently attached to? Question 5 What is your current rank? Question 6 Which BCU are you currently working within?	Questions 1 -6 were used to collate relevant identifying information of participants for review of patterns/trends.
Question 7 Have you ever received formal mental health or stress management training?	Ashfield, (2025). <i>Managing Stress for Success: How Training Can Improve Performance and Mental Health</i> [Online]. Available at: https://www.hilarispublisher.com/open-access/managing-stress-for-success-how-training-can-improve-performance-and-mental-health.pdf (Accessed: 5 January 2026). (2023). <i>The Importance of Stress Management Training</i> [Online]. Ritu Singal - Best Life Coach and Parenting Coach. Available at: https://ritusingal.com/blog/benefits-of-stress-management-training/ (Accessed: 5 January 2026). This question was asked in order to review the amount of officers receiving stress management training as it is stated to allow persons to deal with stressful situations in a better way – for future advice and suggestions.
Question 8 Select any/all options that are applicable if you have attended them in the line of duty:	<i>Police Traumatic Events Checklist</i> [Online]. Police Care UK. Available at: https://www.policecare.org.uk/research/police-

Responded to a fatal accident scene (RTC or otherwise) Witnessed a violent death or serious injury Personally threatened with a weapon Responded to serious incident involving child victims Experienced colleague death or serious injury Engaged in life-threatening situation Performed lifesaving first aid Responded to a death by suicide Personally assaulted/injured on duty Question 10 Rate the extent to which each of the following contributes to your stress at work: Shift work and long hours Workload and administrative demands Public/media scrutiny Limited resources & staffing shortages Lack of support from management Exposure to traumatic events Internal investigations or disciplinary concerns	traumatic-events-checklist/ (Accessed: 5 January 2026). Gray, M., Litz, B., Hsu, J., & Lombardo, T. (2004). "Psychometric properties of the Life Events Checklist", <i>Assessment</i>, 11: 330-341. doi: 10.1177/1073191104269954 PILOTS ID: 26825 The Police Journal: Theory, Practice and Principles ^a The Author(s) 2021 Special Issue: Are we OK? The State of Wellbeing in Policing This question was asked in order to review the types of traumatic incidents attended by South Wales Police officers and ascertain if they are in line with UK research. Brown, J.E.N.N.I.F.E.R., 2000. Occupational culture as a factor in the stress experiences of police officers. <i>Core issues in policing</i>, pp.249-263. Ortega, A., Brenner, S.O. and Leather, P., 2007. Occupational stress, coping and personality in the police: An SEM study. <i>International Journal of Police Science & Management</i>, 9(1), pp.36-50. This question aimed to ascertain other occupational and environmental stresses experienced by participants.
Question 11 Indicate if/how often the following occur in your professional environment: I remain calm and professional when under pressure I have witnessed colleagues act unethically due to stress	Eikenberry, J., Mancini, M., Linhorst, D.M., Schafer, J.A. and Brown, J., 2024. Stress and trauma among police officers: Implications for social work research and practice. <i>Qualitative Social Work</i>, 23(4), pp.682-704. Foley, J. and Massey, K.L.D., 2021. The 'cost' of caring in policing: From burnout to PTSD in police officers in England and Wales. <i>The police journal</i>, 94(3), pp.298-315.

Stress negatively effects how I treat members of the public I make quick decisions without full considerations when under pressure I seek supervisor/peer support when struggling emotionally I adhere strictly to all force policies despite stressful conditions I've observed impaired judgements in colleagues after traumatic incidents	This question was posed to participants to assess how they act when experiencing stress and what coping strategies are commonly utilised.
Question 12 Indicate how frequently these apply to you in high-stress situations: I find it difficult to concentrate after traumatic events Stress / fatigue affects my decision making I rely on intuition rather than procedure under stress I feel emotionally detached when making critical decisions I second guess my decisions after traumatic incidents	Verhage, A., Noppe, J., Feys, Y. and Ledegen, E., 2018. Force, stress, and decision-making within the Belgian police: The impact of stressful situations on police decision-making. <i>Journal of police and criminal psychology</i>, 33(4), pp.345-357. Raver, J.L. and McElheran, M., 2022. A trauma-informed approach is needed to reduce police misconduct. <i>Industrial and Organizational Psychology</i>, 15(4), pp.583-587. This question aims to address how participants make decisions following traumatic incidents and how their decision making can be changed.
Question 13 Select the options that apply in your personal circumstances: I have access to adequate psychological support services Peer support helps me to manage occupational stress My supervisors encourage mental health awareness I feel comfortable seeking help for trauma-related stress	Baqutayan, S.M.S., 2015. Stress and coping mechanisms: A historical overview. <i>Mediterranean Journal of Social Sciences</i>, 6(2), pp.479-488. Anshel, M.H., 2000. A conceptual model and implications for coping with stressful events in police work. <i>Criminal justice and Behavior</i>, 27(3), pp.375-400.

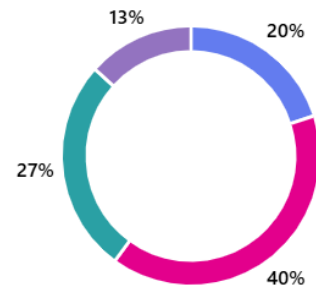
Regular de-briefs reduce the impact of trauma on my work	This question aims to clarify if participants are using effective coping strategies that are proven to be beneficial for police officers.
Question 14 Have you personally accessed any well-being or mental health support through SWP?	Newell, C.J., Ricciardelli, R., Czarnuch, S.M. and Martin, K., 2022. Police staff and mental health: barriers and recommendations for improving help-seeking. <i>Police practice and research</i>, 23(1), pp.111-124. This question aims to ascertain if participants are accessing support for mental health/stress.
Question 15 Have you ever taken time off work due to a traumatic incident, occupational stress or other mental health issues?	Newell, C.J., Ricciardelli, R., Czarnuch, S.M. and Martin, K., 2022. Police staff and mental health: barriers and recommendations for improving help-seeking. <i>Police practice and research</i>, 23(1), pp.111-124. This question aims to ascertain if participants are accessing support for mental health/stress.
Question 16 How does occupational stress affect your ability to make sound professional decisions?	Mohajan, H., 2012. The occupational stress and risk of it among the employees. Dipboye, R.L., 2018. Occupational stress. In <i>The Emerald Review of Industrial and Organizational Psychology</i> (pp. 213-263). Emerald Publishing Limited. This question aims to establish if officers find a correlation between their mental health/stress levels and their professional decision making.
Question 17 How has exposure to trauma shaped your perspective on professionalism and ethics in policing?	Burk, A., 2025. Care ethics and trauma-informed methods: Transforming the institution of policing. <i>Administrative Theory & Praxis</i>, 47(2), pp.125-140. Henry, V.E., 2004. <i>Death work: Police, trauma, and the psychology of survival</i>. Oxford University Press.

	This question asked to participants aims to assess if officers establish a correlation between exposure to trauma and ethical/professional actions.
Question 18 Do you believe that "dark humour" following traumatic incidents should be seen as unprofessional?	Young, M., 1995. Black humour-making light of death. <i>Policing and Society: An International Journal</i>, 5(2), pp.151-167. Hesketh, I., Tehrani, N., OCallaghan, D. and Pawson, S., 2025. The Use and Abuse of Dark Humour in Emergency Services. This question aims to assess a known coping strategy amongst police officers and if the influence of trauma causes unprofessional behaviour and humour.

7.5 Questionnaire answers

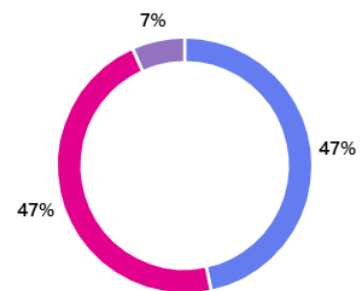
1. What age range are you within?

18-25	3
26-35	6
36-45	4
46-55	2
56+	0



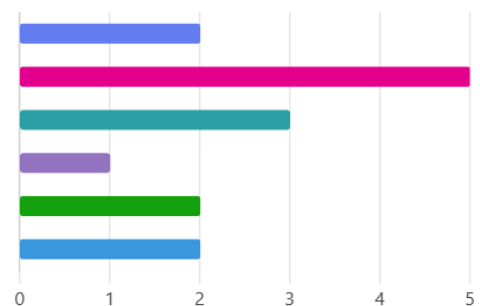
2. What gender do you identify as?

Female	7
Male	7
Non-binary	0
Prefer not to say	1



3. What length of service do you have within South Wales Police?

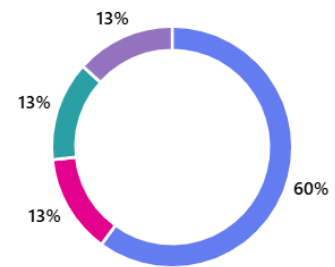
0-2 years	2
2-4 years	5
4-6 years	3
6-8 years	1
8-10 years	2
10 years +	2



4. What department are you currently attached to?

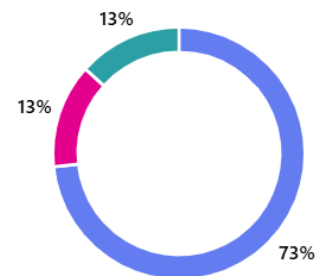
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● Response	9
● Neighbourhood Policing Team	2
● Hub investigation department	2
● CID/RIT/ other DC role	2
● Other specialist department (roads policing, firearms, TST, dogs, mounted)	0



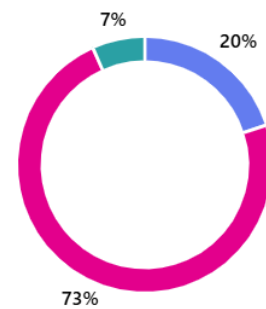
5. What is your current rank?

● Constable	11
● Sergeant	2
● Inspector	2
● Chief Inspector & above	0



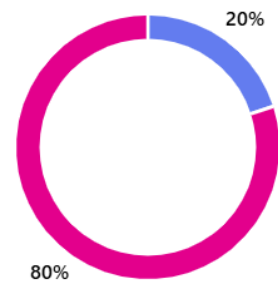
6. Which BCU are you currently working within?

● Cardiff & Vale	3
● MidGlamorgan	11
● Swansea, Neath & Port Talbot	1



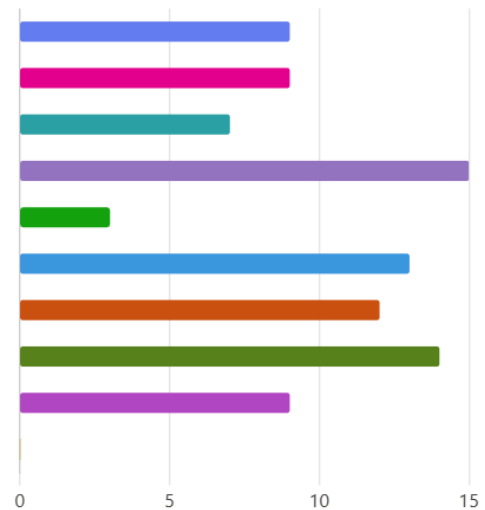
7. Have you ever received formal mental health or stress management training?

● Yes	3
● No	12
● I am unsure	0



8. Select any/all options that are applicable if you have attended them in the line of duty:

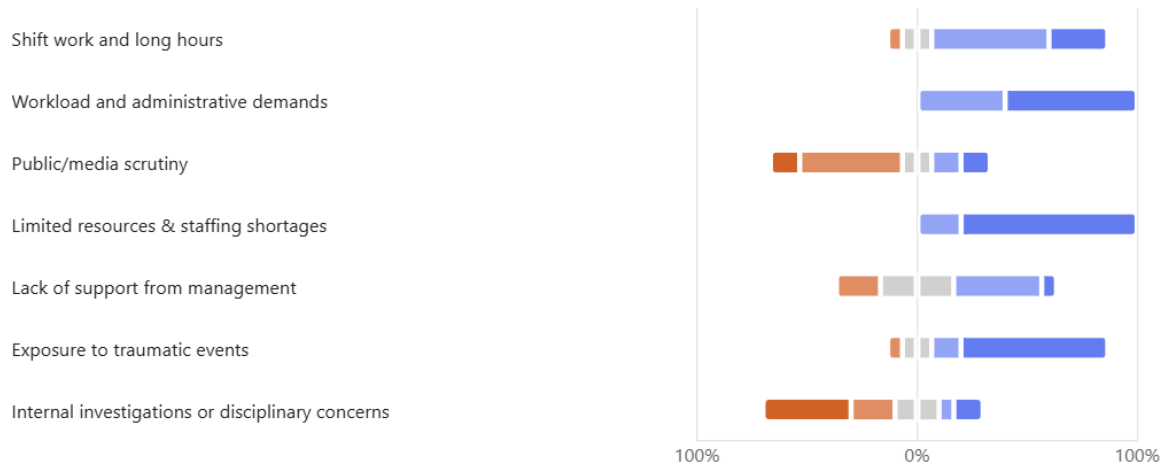
● Responded to a fatal accident scene (RTC or otherwise)	9
● Witnessed a violent death or serious injury	9
● Personally threatened with a weapon	7
● Responded to serious incident involving child victims	15
● Experienced colleague death or serious injury	3
● Engaged in life-threatening situation	13
● Performed life saving first aid	12
● Responded to a death by suicide	14
● Personally assaulted/injured on duty	9
● Other	0



9. Rate the extent to which each of the following contributes to your stress at work:

!

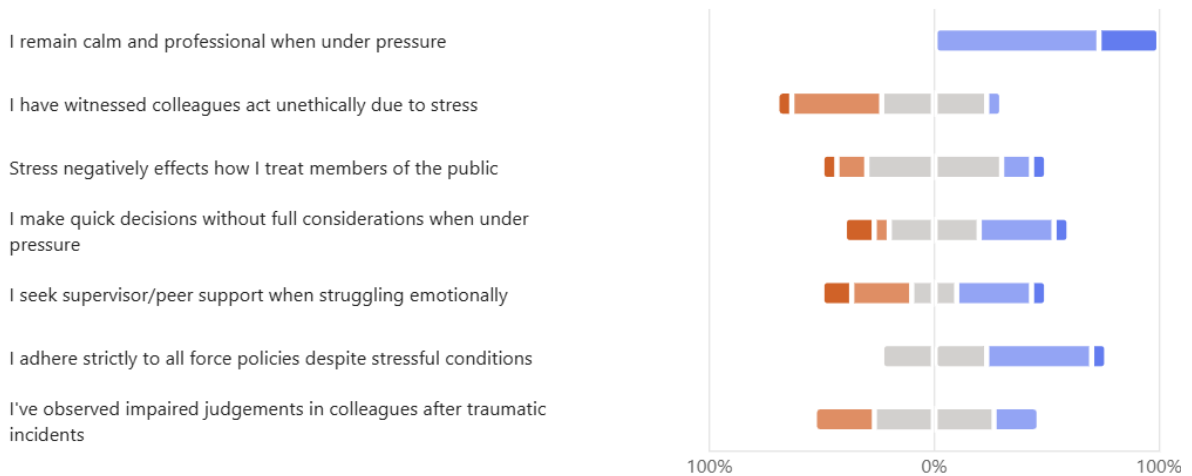
● 1. Not at all ● 2. Slightly ● 3. Moderately ● 4. Very ● 5. Extremely



10. Indicate if/how often the following occur in your professional environment:

!

● 1. Never ● 2. Rarely ● 3. Sometimes ● 4. Often ● 5. Always

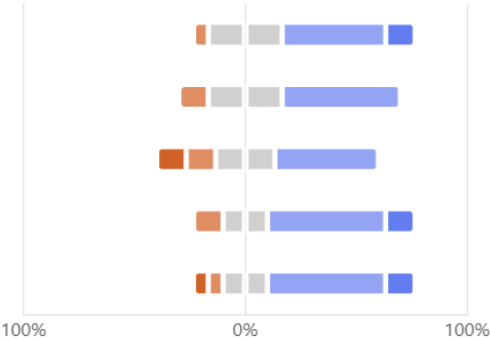


11. Indicate how frequently these apply to you in high-stress situations:

[N](#)

1. Never 2. Rarely 3. Sometimes 4. Often 5. Always

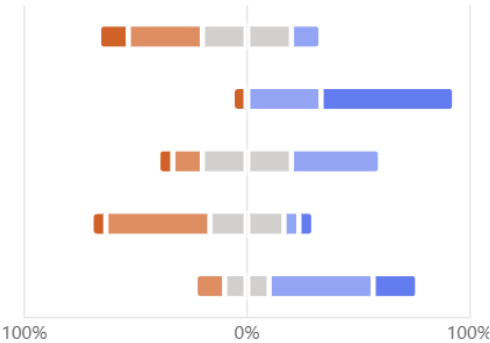
- I find it difficult to concentrate after traumatic events
- Stress / fatigue affects my decision making
- I rely on intuition rather than procedure under stress
- I feel emotionally detached when making critical decisions
- I second guess my decisions after traumatic incidents



12. Select the options that apply in your personal circumstances:

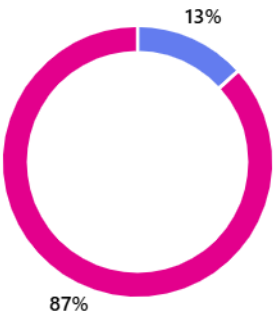
Strongly disagree Disagree Neutral Agree Strongly agree

- I have access to adequate psychological support services
- Peer support helps me to manage occupational stress
- My supervisors encourage mental health awareness
- I feel comfortable seeking help for trauma-related stress
- Regular de-briefs reduce the impact of trauma on my work



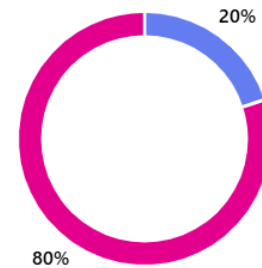
13. Have you personally accessed any well-being or mental health support through SWP?

Yes 2
No 13
Prefer not to say 0



14. Have you ever taken time off work due to a traumatic incident, occupational stress or other mental health issues?

● Yes 3
● No 12
● Prefer not to say 0



15. How does occupational stress affect your ability to make sound professional decisions?

15 Responses

ID ↑	Name	Responses
1	anonymous	When I am stressed I am unable to work as effectively and do not consider the wider picture when making decisions
2	anonymous	When under occupational stress I find I am second guessing decisions made. I will replay incidents in my head and question if I have made the correct decision. I often find that will make me take my work home with me. You feel like you cannot escape.
3	anonymous	It is extra pressure
4	anonymous	I'm always professional in making decision even under stress
5	anonymous	It makes me make quicker decisions.
6	anonymous	It can blur the lines as by continually making decisions can hinder making high stress decisions
7	anonymous	I can become delayed in my decision making which can cause issues in time sensitive incidents

8	anonymous	occupational stress can cause me to make poor decisions under pressure because I get overwhelmed and cant make as good decisions
9	anonymous	occupational stress sometimes affects my ability to make decisions, I have previously found that I have become more argumentative or difficult to reason with when I am stressed
10	anonymous	occupational stress can cause me to make rash decisions without always considering their outcome
11	anonymous	affects confidence in decisions
12	anonymous	It can affect my ability to make decisions negatively. Causing to make bad or rushed decisions
13	anonymous	Occupational stress caused me to make rushed decisions in a dangerous situation
14	anonymous	Occupational stress makes me feel exhausted emotionally and causes me to make bad decisions
15	anonymous	Occupational stress amounts up and can change how I deal with my workload or decisions I make at incidents

16. What support systems or changes do you think would most effectively reduce stress related misconduct/poor decision making?

15 Responses

ID ↑	Name	Responses
1	anonymous	The management of workloads should be discussed and changes made to detract from daily pressures - it is impossible to be up to date with your workload and answer emergency calls
2	anonymous	Time to debrief with colleagues and supervisors. Reflect and review incidents, what we did well, what would we change, but in a positive manner, not criticise. Management to look at whole picture when reviewing incidents, i.e how long had the officer been at work, what other incidents did they deal with that day. Volume of case load, staff shortages etc
3	anonymous	Debriefs
4	anonymous	More frontline officers and less needless paperwork
5	anonymous	More wellbeing facilities for staff
6	anonymous	More officers on the frontline
7	anonymous	Mandated check ins with supervisor following particularly significant incidents & regular check ins regarding workload

8	anonymous	better supervisory support can address problems prior to misconduct taking place
9	anonymous	I believe that supervisors have more of a responsibility in addressing stress amongst teams and should be raising individual concerns prior to stress causing misconduct
10	anonymous	I think that de-stigmatising mental health support would effectively help officers to understand stress prior to making poor decisions
11	anonymous	better de-brief procedures
12	anonymous	I am unsure - this needs to be researched
13	anonymous	Understanding officers require further mental health support from managers/supervisors on a daily basis
14	anonymous	I think we need to make seeking help more accessible and regular check ins to address when someone is stressed
15	anonymous	I think that Professional Standards should aim to support officers that make poor decisions because of trauma instead of punishing them. Officer mental health and stress should be taken more seriously

17. How has exposure to trauma shaped your perspective on professionalism and ethics in policing?

15 Responses

ID ↑	Name	Responses
1	anonymous	My exposure to trauma has made me understand that needs to be downtime for officers after serious incidents so that we can reflect and check in with each other. Even time for a refreshments break and a chat can completely change how you would respond to the next call and improve my headspace.
2	anonymous	I have always had the privilege of working with colleagues who act professionally at incidents. I have never felt uncomfortable with the way my colleagues deal with incidents. However I do have to be actively sympathetic and empathetic to people, as I know my colleagues do too. For example at a sudden death, this is traumatic to the family, but I find the longer you work as an officer it numbs you to trauma and your reaction can sometimes reflect that. Dealing with death and trauma is part of your daily work.
3	anonymous	It should be weighed against the circumstances of the incident and trauma
4	anonymous	Not sure
5	anonymous	It has made me even more detached emotionally

6	anonymous	Showed me how to be more professional
7	anonymous	Exposure to trauma has made be realise how easy it could be to act unprofessionally and without considered ethics when under significant stress
8	anonymous	trauma has effected the way I view ethics. I always aim to be professional and in line with the code of ethics however there have been times where I have acted unprofessionally in situations as that was my response to trauma
9	anonymous	I think that trauma exposure has made me realise that most officers remain professional in major incidents however I have also seen officers that have acted unethically in a situation which could be regarded as traumatic
10	anonymous	Exposure to trauma has made me realise that it could be easy to make unethical decisions when feeling emotional or unregulated
11	anonymous	changed how I understand the effects of trauma on professionalism
12	anonymous	Trauma has caused me to understand how you can not predict your reaction to serious incidents and can become unprofessional without realising
13	anonymous	My perspective has been changed as I now am aware how easy it is to allow trauma to take over and to act unethically when emotional
14	anonymous	I have experienced a few traumatic incidents throughout my career so far and do not think it has changed my ethics/professionalism
15	anonymous	I think that exposure to trauma has made me realise that it can be hard to not take situations personally and to remain professional when emotional/upset

18. Do you believe that "dark humour" following traumatic incidents should be seen as unprofessional?

15 Responses

ID ↑	Name	Responses
1	anonymous	I think that there is a time and a place for dark humour, with officers needing to be able to talk to each other for support in the safety/comfort of stations away from the public. I think that this is a natural and healthy way to process trauma and should not be seen as unprofessional. Police officers are human too and need to be able to process things in their own way.
2	anonymous	No absolutely not, officers face really traumatic incidents daily and unfortunately we always see the worst of society. Dark humour is often a way of release and an output to get over the incidents. I don't see it as offensive but a way for people do deal with and compartmentalise their own trauma from what they have seen.
3	anonymous	No power of laughter is good coping mechanism
4	anonymous	No - its a needed coping mechanism. Without it people would not be able to open up about deeper issues
5	anonymous	No, this is the only thing that helps in any way as a jovial debrief after a serious incident.
6	anonymous	No i believe that it has its place after high stress incidents
7	anonymous	I believe that dark humour is a healthy way to debrief as a team. I understand members of the public may see it as unprofessional but feel as though it is difficult to understand how much it helps if you haven't been in that situation
8	anonymous	No. I think dark humour is natural and something that most officers do without even realising. Police officers have to be able to speak confidentially out of view of the general public in order to support each other
9	anonymous	No. I think its normal to have a way to decompress after dealing with serious incidents.
10	anonymous	No. Most teams I have worked on use dark humour. As long as everyone is happy with the type of humour, then it should not be an issue
11	anonymous	I think it's normal and professional still
12	anonymous	I think dark humour should be kept away from the general public but think it is a normal coping mechanism for officers
13	anonymous	No. I am used to dark humour and think most other officers are too.
14	anonymous	I think we are all guilty of using dark humour to cope with horrible incidents. It becomes very normal for officers & teams
15	anonymous	Not at all. I think that it should be done in appropriate circumstances (in stations, vans etc) and not in front of members of the public