

Chapter 5 - Findings & Conclusion

5.1 Introduction

This chapter will use the survey findings to address the primary research question: To what extent do British police forces adequately support officers' return-to-work (RTW) after periods of stress or mental health-related sick leave? It will summarise the key findings in relation to the research objectives and reflect on their significance in the context of existing literature, before presenting the research's limitations, recommendations, suggestions for future research and overall conclusion.

5.2 Key Findings

Twelve eligible participants took part in the survey, and eleven had completed a RTW. Respondents were mostly police constables (92%), evenly split by gender, and all identified as White. Most had between one and five years' service (83%). The small and relatively similar profile of participants limits the broader applicability of the findings, so they should be considered indicative of this force and rank rather than representative of wider U.K. policing.

In relation to the first research objective, participants reported mixed and inconsistent experiences with RTW support. Some officers benefited from phased returns or supportive management. Others, however, described feeling pressured to resume duties before they were ready or being dismissed by their manager, suggesting that the quality of support received depended heavily on managerial approach. A significant proportion also turned to external resources such as their GP and private counselling, suggesting that internal support was not always sufficient or appropriately targeted.

In relation to the second objective, the findings suggest that while formal RTW processes did exist, their application was inconsistent in practice. Many officers had formal RTW plans, but nearly half did not feel emotionally or professionally ready to return, highlighting a gap between policy and real-life readiness. Heavy workloads emerged as a significant barrier, with many participants returning to the same or increased workload, leaving the original stressor unresolved. Policing culture also shaped experiences, with several officers referring to mental health stigma and guilt. One participant cited a complete lack of organisational trust as the reason they did not RTW at all.

In relation to the third objective, the survey findings suggest that shortcomings in RTW support can contribute to repeated absences, though evidence was limited in this small sample. One participant reported taking additional leave due to unresolved workload pressures, while two others had only recently returned, making longer-term outcomes uncertain. Although the proportion of repeat absences was lower than in Cartwright and Roach's (2020) research, the findings suggest that when underlying stressors, such as workload, remain unaddressed, the risk of additional absence persists. As workload management often depends on support from line managers, the inconsistency in leadership identified earlier may also play a role.

5.3 Findings in Relation to the Literature

The research aligns with existing literature on police mental health. Organisational stressors, including heavy workloads, lack of managerial support, and poor work–life balance, were identified as leading contributors to participants' initial absences, which

mirrors research that shows these pressures are often more harmful to wellbeing than operational factors (Galanis et al., 2019). These stressors re-emerged during the RTW process, with several officers returning to unchanged or heavier workloads. This echoes earlier warnings that reintegration is unlikely to succeed if officers come back to the same conditions that led to their absence (Cameron et al., 2016), and suggests that without systematic workload adjustment, RTW procedures may function as little more than temporary relief.

The research also underscores the limitations of reactive support models. While some officers described positive managerial support and phased returns, others reported poor communication or pressure to return early. This reflects broader evidence that organisational support is inconsistently experienced, with occupational health and counselling not always perceived as effective (Whybrow, Jones and Greenberg, 2015). The findings support wider critiques that reintegration support should shift from reactive, policy-based models towards proactive, tailored support (Van der Velden et al., 2010).

Cultural stigma was also evident in the survey findings, with officers describing feelings of guilt and fear of judgment from their colleagues. This aligns with research on the "cultural shield" and the fear of a "spoiled identity" when police officers disclose mental health difficulties (Abdollahi, 2002; Bullock and Garland, 2017). Moreover, national survey data shows that many officers expect negative responses when disclosing mental health problems and only a minority feel fully supported after doing so (Police Federation of England and Wales, 2024). This may explain participants' reliance on external services, such as GPs and private counselling, even when internal services were available.

5.4 Recommendations

The survey findings highlight several areas where current RTW support could be improved. Heavy workloads were the most significant driver of absence and a barrier to reintegration. The first recommendation is that police forces use structured workload management as part of RTW planning, including temporary caseload reduction, prioritisation meetings, and short-term administrative support. Without adjustments like these, officers risk immediate re-exposure to the same stressors that led to their absence.

Second, RTW processes should be tailored and proactive rather than procedural. Although formal RTW plans were often in place, many participants reported feeling unready to return, suggesting a disconnect between policy and actual readiness. RTW planning should therefore include closer attention to timelines, phased duties, and follow-up check-ins. This would help ensure the RTW process functions not only as a process but also as meaningful support.

The findings showed that line managers had a significant impact on how the RTW was experienced. Some provided constructive planning and support, while others communicated poorly or put pressure on officers to return. Police forces could consider developing formal leadership training, with guidance on communication, phased duties, and workload planning for managers. This would improve consistency and ensure that manager support is experienced as genuinely helpful rather than procedural.

Finally, the findings highlight the ongoing impact of cultural stigma. Officers described feelings of guilt and fear of judgment, reflecting broader concerns about how mental

health is perceived in policing. Forces should continue efforts to normalise mental health conversations, but with greater emphasis on tackling peer stigma and ensuring that related absences do not have negative implications. The leadership training outlined earlier could include mental health education, equipping managers with the knowledge and sensitivity to support officers both during their initial absence and during their RTW.

5.5 Limitations

While the sample provided valuable insights, its small size and specific participant demographics limit its transferability to other ranks, demographics, or police forces.

The reliance on voluntary participation also raises the possibility of self-selection bias, as officers with particularly strong or negative experiences may have been more inclined to participate. This may have skewed the data towards specific perspectives while underrepresenting others.

The use of an anonymous online survey allowed participants to be open and honest, but limited the depth of qualitative data. Responses could not be probed or clarified, and interpretation was limited to what participants shared. Similarly, the study relied on self-reported experiences, which may be influenced by recall bias or subjective perceptions of organisational support.

Finally, the nature of the one-time survey captures officers' perceptions at a single point in time. The longer-term outcomes of RTW, such as whether participants went on to take further leave, could not be more thoroughly assessed during the limited time frame available for this dissertation.

Steps were taken by the researcher to mitigate some of these limitations. The study is framed as exploratory, with the findings presented as indicative rather than representative. Moreover, considering the findings in relation to existing research helped to confirm it aligned with broader research into mental health within policing. Finally, the anonymous survey format reduced barriers to participation and encouraged honesty, offsetting some of the risks associated with self-selection bias.

5.6 Future Research

This dissertation contributes to an underexplored area of research, but its small scale highlights the need for further study. Larger studies across multiple police forces would help assess whether these findings are representative of U.K. policing more broadly.

Longitudinal research would also be valuable in assessing whether officers who RTW after stress-related leave experience longer-term reintegration or further absences, providing greater insight into the effectiveness of RTW processes.

Finally, the prominence of managers in participants' accounts suggests a possible area for future research. Further research into the role of direct line managers could provide additional insight into how leadership styles and managerial behaviours influence RTW outcomes.

5.7 Overall Conclusion

This dissertation set out to evaluate the extent to which British police forces adequately support officers' return to work following stress or mental health-related leave. Evidence from a small, single-force survey suggests that while formal processes exist and some

officers benefit from phased duties and supportive managers, effective RTW support is inconsistent in practice.

Formal RTW procedures were in place but did not always translate into genuine readiness, with nearly half of respondents reporting that they did not feel prepared to RTW. And, in many cases, the original stressors remained unresolved. Where these issues continued, the likelihood of further absence remained. These shortcomings were compounded in some cases by a policing culture of stigma and mistrust, which may have influenced how support was perceived and experienced.

The survey findings suggest that current RTW processes are only partially adequate. While they provide structure, the conditions needed for a sustainable RTW are not always in place. In this sample, adequacy appeared to rely on three areas that were experienced inconsistently: whether workload was adjusted as part of RTW planning, whether processes were individually tailored and appropriately timed, and whether managerial support was consistent and sufficient.

Although the study is small and limited to a single force, its conclusions reflect wider research on organisational stressors and police culture. This reinforces the broader argument that, without reducing workloads upon return, improving manager support, and actively reducing stigma, RTW processes in U.K. policing will remain insufficient in ensuring the long-term recovery and retention of police officers who take stress or mental health-related leave.

The primary contribution of this dissertation is to highlight the RTW stage as an underexplored area of police wellbeing. For U.K. police forces, the recommendations

are clear. RTW must be treated as an operational priority rather than an administrative formality. When reintegration addresses the causes of absence, officers are more likely to recover, and the quality of public service will improve as a result.

Word count: 1,700 (*I know this is a bit over but I ended up adding the 500 word "recommendations" section due as part of the final draft at this stage since I was already doing the rest of this section - thanks*)

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