



UK Health
Security
Agency



The National Police
Wellbeing Service

Operation Hampshire:

A qualitative interview study to understand the impact of repeated assaults in policing

Summary Report

Prepared for the College of Policing by the UKHSA Behavioural Science and Insights Unit (BSIU) at UK Health Security Agency (UKHSA).

This report summarises the study outcomes and recommendations, described in full in the accompanying research paper:

Dennis A., Davidson L., Theodoropoulou A., Carter H., Amlôt R. & Hesketh I. (2023)

“I don’t want to be a victim again”: the impact of repeat assault on police officers.

Submitted for review to Occupational Medicine (<https://academic.oup.com/occmed>).

Executive summary

The frequency of assaults on police officers in the UK is rising and evidence suggests that exposure to work-place violence can negatively impact well-being for example, increased perceived stress, symptoms associated with being worn out, and emotional exhaustion. Despite the prevalence of assaults on police officers, little research has examined the impact of repeat assaults. For the current study, twelve semi-structured interviews were conducted to investigate the impact of repeat assaults on wellbeing and occupational outcomes in police officers and staff, including impacts on their mental and physical health, impacts on their work, the impact of prior assaults on future assaults, and what support they were provided with. Findings indicate that repeat assaults had a negative impact on participants mental and physical well-being. Furthermore, a lack of support and a culture of minimisation within the police force was found to further exacerbate the impact of repeat assaults. However, several mitigating factors (e.g., peer support) were identified which helped to protect participants from some negative impact of assaults. Findings provide a unique in-depth perspective into police officers' experiences following repeat assaults, which can in turn inform national policies and help tailor effective support services within the police force.

Recommendations arising from this study include:

- Given the reported psychological and wider quality of life impacts of repeat assaults, including their impact on personal and professional relationships, appropriate support should be provided for officers experiencing them.
- In some instances, officers may need further support to return to the workplace, including addressing any mis-perceptions about the impact of experiencing of assaults and the act of seeking help may have on their future work and careers.
- To address perceived gaps in support from colleagues and superiors, peer support should be commonplace, with appropriate training in place for peer-supporters.
- Seeking appropriate support should be seen as the correct response to the experience of assaults, and this action should be championed by colleagues

and superiors. A cultural shift may be required to ensure that the experience of assaults and the difficulties they may cause are not minimised, and that seeking appropriate help and support is seen as the 'strong' choice.

Introduction and Aims

Police officers and staff face confrontation and violence on a regular basis. Being assaulted on duty is an operational risk but is not something that should be considered as acceptable or part of the job. All assaults, regardless of severity, have an impact of some kind, and the impact of being assaulted may sometimes be even more damaging than the actual injury to an individual. People in policing deserve and have the right to full victim support and care if they are assaulted. Processes for offering such support and care need to be consistent across all UK forces, with minimum standards for support clearly set and delivered.

In order to provide consistent standards for offering such support, Operation Hampshire (Op Hampshire) is a National Police Wellbeing Service (NPWS) initiative which provides a comprehensive framework for the response to assaults. This framework incorporates the key themes of supervision, wellbeing, communication, investigation and criminal justice. Adopting comprehensive Op Hampshire strategies across all UK forces can ensure that all officers and staff who have been assaulted will be supported in a consistent and effective way. To support the national initiative an Op Hampshire network has been created with senior level representation in all UK forces. The network provides a strong level of engagement with the ability to support the development of strategies and the opportunity to share best practices.

There is a need to understand the various factors that may mitigate and exacerbate the impact of repeat assaults, to better understand both the demographics that may be most at risk of adverse effects from repeat assaults, and how organisations can best provide support for victims. The aim of this study is therefore to investigate the impact of repeat assaults on wellbeing and occupational outcomes, using qualitative interviews with police officers and staff who have experienced repeat assaults by members of the public in the workplace.

The study sought to explore the following research questions:

- i) How repeat assaults affect personal wellbeing (e.g., mental and physical health);
- ii) How repeat assaults affect occupational functioning (e.g., confidence, risk appetite);

- iii) How prior experiences of assault might influence subsequent experiences;
- iv) The factors which may exacerbate or aggravate the impact of repeat assaults;
- v) The factors which may mitigate the impact of repeat assaults, including support resources.

Method

Twelve participants took part in an interview. Ten participants were male, two were female, and their ages ranged between 20 – 43 years old. Participants completed a screening questionnaire before being invited to take part in an interview and were eligible to take part in the study if they had experienced two or more assaults in the last year and were over 18 years old.

The online screening questionnaire included basic demographic questions (i.e., job role, age, gender, ethnicity) and questions about workplace assaults in the last year (i.e., number, injuries, and type of assault). Participants provided contact details (name, email address) to enable the research team to contact them to arrange an interview.

The interview schedule centred around five topics: types of assault that the participant had experienced; the impact of the assaults on the participant's personal well-being; the impact of these assaults on the participant's work; any differences between the assaults that the participant had experienced; and support provided to the participant following the assaults. We used a semi-structured interview schedule to enable flexibility to explore topics during interviews. The interview schedule included open-ended questions and prompts to try to develop a conversational style that would elicit rich descriptions.

Study outcomes

Six main themes and 18 sub-themes were identified during qualitative analysis of the interviews: (i) experience of assaults; (ii) impact on personal well-being (stress, anxiety, and negative emotions; personal relationships; and physical effects); (iii) impact on work (confidence; hypervigilance; changed feelings towards work; and changed working style), and (iv) support (continuing shift and time off; support received; transparency of support; minimisation of assaults; and worrying about reaching out). These themes are summarised in Table 1, and the outcomes summarised in the sections that follow.

Table 1. Themes from analysis of in-depth interviews (continued overleaf).

Themes	Description
1. Experience of Assaults	The assaults that participants experienced – physical and verbal
2. Impact on personal well-being	
<i>2.1 Stress, anxiety, and Negative Emotions</i>	The impact of the assaults on stress, anxiety and negative emotions outside of work
<i>2.2 Sleep</i>	Impact of assaults on participants ability to sleep
<i>2.3 Blame</i>	Any blame placed on the participants for the assaults happening, either by themselves or by someone else.
<i>2.4 Personal relationships</i>	Any impacts of the assaults on participants’ relationships at home e.g., with family, partner, friends etc.
<i>2.5 Lasting physical pain</i>	Physical pain that endures and impacts on participants’ day-to-day life.
<i>2.6 Uncertainty</i>	Uncertainty about what effect the assault will have on their health and future.
3. Impact on work	
<i>3.1 Confidence</i>	Impact of assaults on participants’ confidence in approaching new situations and responding to calls.
<i>3.2 Hypervigilance</i>	Participants reported increased hypervigilance (i.e., scanning everything, heart rate going up, assessing possible scenarios and trying to find solutions, being more wary)
<i>3.3 Changed feelings towards the job</i>	Participants reported negative feelings associated with working following the assaults (i.e., feeling more stressed and overwhelmed, worry about getting back to work, overthinking about the assaults, being anxious)

3.4 *Working Style*

The changes to working style as an impact of the assault such as desk duty and time constraints

Table 1 (continued). Themes from analysis of in-depth interviews.

Themes	Description
4. Support	
4.1 Continuing shift + time off	Participants reported they would have liked to take the shift off if given the option.
4.2 Lack of support	Participants reported lack of support following the assaults from both management and colleagues and also not being aware/informed of services available.
4.3 Transparency of support	Participants not knowing what support is available to them
4.4 Worry about reaching out	Participants reported worry about reaching out to their managers or asking for help with dealing with assaults mentally or for referrals, worrying if this could impact their jobs and what other would think about them
4.5 Questioning if support would help	Participants unsure if support that is offered to them would help them.
5. Factors exacerbating the impact of assaults	
5.1 Minority groups	Any unique impact on minority groups, such as race or gender.
5.2 Minimisation	Participants reported assaults getting minimised, existing culture of minimisation, joking about the assaults being the norm, penalisation being insufficient etc.
5.3 Court proceeding	The impact of seeing their assaulter or waiting on investigations from the assault
6. Impact of assaults on future assaults	The experience of being assaulted also affected the way that police officers dealt with future assaults.

The following sections describe the outcomes of the qualitative analysis of interviews organised under the four aims of the study.

Impact of repeat assaults on police officers' mental and physical well-being

The impact of repeat assaults on police officers' mental and physical well-being was substantial and well-documented throughout the interviews, with the consequences of repeat assaults being wide-ranging and stark, affecting many different aspects of police officers' personal lives.

In terms of physical well-being, many officers reported lasting physical pain following physical assaults on their person, as well as continuous health concerns. The effect of assaults where bodily fluid (e.g., saliva) was aimed at police officers causing contamination risk (e.g., from Hepatitis B) was also substantial. For example, a

significant number of police officers reported having to have their bloods taken for months following the assault due to ongoing infection concerns.

Regarding the impact of the assaults on mental well-being, findings indicate several common themes. A high number of police officers reported an increase in negative emotions during the period following the assaults (e.g., anxiety, depression, stress, fear, uncertainty), as well as high levels of overthinking and replaying the experience. Importantly, reported negative feelings were not only a result of the assault itself, but also of different aspects surrounding the assaults, such as having to go to court and deal with court proceedings. Personal relationships were also affected. For instance, some police officers reported feeling withdrawn and avoiding contact with friends and families following the assaults, while in cases of possible contamination the behaviour changes were even more significant, with many officers reporting avoiding physical contact with their partners and family members.

Impact of repeat assaults on police officers' occupation

The impact of repeat assaults on police officers' occupation was similarly well-documented, with several common themes emerging. First, being assaulted had a substantial impact on police officers' confidence. For example, following the assaults most police officers reported a significant decrease in their confidence regarding their own abilities and their suitability for the job.

Second, experiencing repeat assaults had an impact on police officers' feelings towards their job. For instance, most police officers reported negative feelings towards their job following the assaults, such as lack of motivation, anger, disappointment, job stress, job dissatisfaction and reduced commitment, as well as conflicted emotions regarding the constant risk and the impact of the job compared to the benefits, while some also indicated a desire to leave the force.

Third, the experience of repeat assaults resulted in most police officers experience hypervigilance to surroundings, as well as in behavioural changes in their working style. For example, many reported an increase in hypervigilance-related cognitive tendencies toward suspicion, mistrust, and negative expectations for the future, such as profiling people immediately and automatically, as well as anticipating the worst outcome from any situation. Moreover, many also reported behavioural and

physiological symptoms associated with hypervigilance, such as an increase in safety-keeping behaviours (e.g., planning escape routes, making sure there is adequate coverage and protection, and avoiding situations requiring conflict), as well as an increase in physiological arousal (e.g., increased heart rate).

Impact of past assaults on future assaults

Given the impact of repeat assaults on police officers' behaviour and working style, it follows logically that the experience of being assaulted also affected the way that police officers dealt with future assaults. For example, as noted above, in accordance with the presence of hypervigilance symptoms, many police officers had marked changes in their working styles, which in turn affected the way they approached future assaults. For instance, many reported a change in working style towards more protective behaviours geared towards minimisation of consequences and speedy resolution of conflict, such as having less patience, being more aware of their surroundings, making sure they were protected and visible to witnesses, profiling people automatically, thinking of adverse outcomes and avoiding conflict and confrontation. Moreover, many highlighted the learning aspect of the assaults, noting that it taught them a lot about themselves and what they need to change going forward when dealing with similar situations.

Factors exacerbating the impact of repeat assaults

Several factors have been identified as exacerbating the impact of repeat assaults, the most important being the lack of support received. A significant number of police officers reported receiving no support or not sufficient support after being assaulted, with several also reporting being unaware of the support services in place and the processes involved. Moreover, many police officers also reported feelings of frustration and disappointment about having to continue their shift following the assaults, as well as not having the option to take time off work.

Importantly, many police officers remarked specifically on the lack of support received by their work colleagues following the assaults, with some commenting that this had a bigger negative influence on them than the lack of support from their superiors or the inadequate services in place. Thus, ensuring that peer support is adequate and a

common practice among police officers with appropriate training in place should be a priority of the police force given the mitigating factor of peer support.

Finally, another important factor commonly reported by police officers throughout the interviews as worsening the impact of the assaults was the minimisation of the assaults by their colleagues and superiors, as well as the existing police culture which resulted in many of them not reaching out for help even if they needed it. For example, many police officers reported that the assaults were not taken seriously, especially if there was no severe lasting physical damage, while it was also common practice for other officers to minimise them and joke about them. Police officers also commented on the pressure of the existing police culture and the emphasis on appearing strong and “manning up” which created a fear of reaching out and appearing vulnerable, which in turn prevented many of them from seeking help. Thus, a cultural shift within the police force might be required to ensure that effective support is in place to minimise the impact of assaults.

Conclusions

Taken together, the findings indicate that the experience of repeat assaults have a significant negative impact on many areas of police officers' lives, including their mental and physical well-being and their occupation. Furthermore, a lack of support and a culture of minimisation within the police force was found to further exacerbate the impact of repeat assaults, while several mitigating factors, such as peer support, were also identified. The findings provide a unique in-depth perspective behind police officers' experiences following repeat assaults, which can in turn inform national policies and help tailor effective support services within the police force.

Recommendations arising from this study include:

- Given the reported psychological and wider quality of life impacts of repeat assaults, including their impact on personal and professional relationships, appropriate support should be provided for officers experiencing them.
- In some instances, officers may need further support to return to the workplace, including addressing any mis-perceptions about the impact of experiencing of assaults and the act of seeking help may have on their future work and careers.
- To address perceived gaps in support from colleagues and superiors, peer support should be commonplace, with appropriate training in place for peer-supporters.
- Seeking appropriate support should be seen as the correct response to the experience of assaults, and this action should be championed by colleagues and superiors. A cultural shift may be required to ensure that the experience of assaults and the difficulties they may cause are not minimised, and that seeking appropriate help and support is seen as the 'strong' choice.

Research completed by the UK Health Security Agency on behalf of the National Police Wellbeing Service.

Prepared by: Amelia Dennis, Louise Davidson, Ian Hesketh, Neil Collinson, Holly Carter and Richard Amlôt

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