A CONTEXTUAL APPROACH TO POST-SHOOTING TRAUMA

IN THE SOUTH AFRICAN POLICE SERVICES

by

JUAN ADRIAAN NEL

submitted in part fulfilment of the requirements for the degree of

MASTER OF ARTS IN CLINICAL PSYCHOLOGY

in the

DEPARTMENT OF PSYCHOLOGY

at the

UNIVERSITY OF SOUTH AFRICA

SUPERVISOR: MR PETER JOHNSON

OCTOBER 1994
ACKNOWLEDGEMENTS

My sincere gratitude is extended to the following:

* Mr Peter Johnson, for his support and supervision;
* Mrs Claudette Nothnagel, for proof-reading this manuscript;
* My brother, Andre, and sister-in-law, Tertia, for their technical assistance and patience in the preparation of this manuscript;
* The South African Police Services, for providing me with the opportunity to further my studies; and
* My family and friends whose encouragement and caring was a constant source of support.
CONTENTS

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABSTRACT</td>
<td>vi</td>
</tr>
<tr>
<td>INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>SHOOTING INCIDENTS IN THE SOUTH AFRICAN POLICE SERVICES</td>
<td>6</td>
</tr>
<tr>
<td>POST TRAUMATIC STRESS DISORDER IN POLICE OFFICERS</td>
<td>9</td>
</tr>
<tr>
<td>The Assumptions</td>
<td>9</td>
</tr>
<tr>
<td>The Official Diagnosis</td>
<td>10</td>
</tr>
<tr>
<td>Post-trauma Reactions</td>
<td>13</td>
</tr>
<tr>
<td>Treatment Trends and Interventions</td>
<td>15</td>
</tr>
<tr>
<td>THE ECOSYSTEMIC FRAMEWORK</td>
<td>17</td>
</tr>
<tr>
<td>CONTEXTUALIZING THE PROBLEM</td>
<td>22</td>
</tr>
<tr>
<td>Understanding the Culture</td>
<td>23</td>
</tr>
<tr>
<td>Requesting Assistance</td>
<td>24</td>
</tr>
<tr>
<td>&quot;Why Now?&quot;</td>
<td>26</td>
</tr>
<tr>
<td>Rate of Socio-political Change</td>
<td>27</td>
</tr>
<tr>
<td>Policing Apartheid</td>
<td>28</td>
</tr>
<tr>
<td>Targets of Anger</td>
<td>30</td>
</tr>
<tr>
<td>New Roles/Rules for Policing</td>
<td>31</td>
</tr>
<tr>
<td>Disintegration of the &quot;Police Family&quot;</td>
<td>32</td>
</tr>
<tr>
<td>Turnover in Personnel</td>
<td>35</td>
</tr>
<tr>
<td>Attribution of a &quot;Sick Role&quot;</td>
<td>36</td>
</tr>
<tr>
<td>Tables</td>
<td>Page</td>
</tr>
<tr>
<td>--------</td>
<td>------</td>
</tr>
<tr>
<td>Table 1</td>
<td>Suicide among Police Officers...........2</td>
</tr>
<tr>
<td>Table 2</td>
<td>Medical Boarding of Police Officers....3</td>
</tr>
</tbody>
</table>
ABSTRACT

In this article post-shooting trauma is utilized as an arbitrary punctuation to indicate how police officers communicate their distress during this period of rapid transition in South Africa. It is argued that the medical model (with its attendant lineal causal explanations and descriptions) is inhibitively limited in describing what police officers are presently experiencing. The author motivates the advantages of perceiving and describing events from an ecosystemic perspective (which provides a contextual understanding and emphasizes relationships). "Stress" is described as an aspect of the system as a whole and not singularly attributable to individuals alone. Among others, new policing rules and roles, the turnover in personnel, and the rate of socio-political changes are shown to contribute. It is argued that the Police, as society's guardians of "power", have become the "symptom bearers" for a society in the painful process of adapting to change. Recommendations regarding possible interventions are made.

Keyterms

South African Police Services; police officers; Post-shooting Trauma; Post-Traumatic Stress Disorder; trauma; shooting incidents; psychological services; contextual; ecosystemic perspective.
Introduction

Law officers are exposed to victims of violence, are themselves victims of violence, and at times, use violence against offenders. The image of the Police as immune to the subsequent pressure and stress is, however, changing, and there is a developing recognition among both law enforcement authorities and the public of the negative effects that dealing with violence has on law officers. As a result an increasing number of law enforcement agencies are providing psychological help for their officers (Alkus & Padesky, 1983; Anderson & Bauer, 1987).

The same can presently be said with regards to the South African Police Services where in recent times an ever increasing incidence of suicide and medical boarding due to stress- and anxiety-related illness, has been reported. Statistics for suicide among police officers as obtained from Colonel J.A. Du Plessis (personal communication, July 1, 1994), Medical Boards at the SA Police Services Head Quarters (compare Table 1), indicate an increase of 128% during the period 1991 to 1994.
Table 1

Suicide among Police Officers

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
<td>65</td>
</tr>
<tr>
<td>1992</td>
<td>106</td>
</tr>
<tr>
<td>1993</td>
<td>134</td>
</tr>
<tr>
<td>1994</td>
<td>148 *</td>
</tr>
</tbody>
</table>

In comparing the incidence of suicide among police officers during 1991 (60 out of every 100,000 police officers), with the incidence of suicide during the same year among the general population in the RSA (5 out of every 100,000 people), the alarming nature of these statistics becomes clear (Pieterse, 1993). Although no studies have been conducted locally to determine whether the incidence of suicide is related to the number of officer-involved shootings, it is of value to note that Loo (in Gersons, 1989), also comments on the frequency of suicide among members of the Federal Force, and that he relates this to some extent to an increase in shooting incidents. Turco (1986) states that suicide is definitely considered more often by police officers following a shooting, especially with death of the assailant.

*(Note that the total for 1994 is a projected estimate based on the figure of 74 suicides for 1 Jan - 22 June 1994 (6 months)).*
Baratta (1993) says that in America, Police have a high proportion of medical retirements, largely due to so-called stress-related disabilities. He, however, expects occupational stress to be much higher in the South African Police Services, considering that locally there is a much higher incidence of assaults and murders of Police. As mentioned, there has also been a dramatic increase in applications within the SA Police Services for medical boarding on psychological grounds, including diagnoses of Post Traumatic Stress Disorder. Compare statistics obtained from Colonel J.A. Du Plessis (personal communication, July 1, 1994), as supplied in Table 2.

Table 2

Medical Boarding of Police Officers

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Boarded</th>
<th>Psychological % of Total Reasons</th>
<th>Boarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
<td>517</td>
<td>37</td>
<td>7%</td>
</tr>
<tr>
<td>1992</td>
<td>788</td>
<td>236</td>
<td>30%</td>
</tr>
<tr>
<td>1993</td>
<td>1166</td>
<td>379</td>
<td>33%</td>
</tr>
<tr>
<td>Jan-Jun 94</td>
<td>887</td>
<td>335</td>
<td>38%</td>
</tr>
<tr>
<td>Total</td>
<td>3358</td>
<td>987</td>
<td>29%</td>
</tr>
</tbody>
</table>

These statistics all contribute to the contention that many police officers experience their present circumstances as traumatic and feel rather unsupported and unable to cope
during these times. Precisely with this in mind the Psychological Support Services of the SA Police Services' Institute for Behavioural Sciences have in recent years made more of a concerted effort at expanding its services, assessing the psychological needs of members and to become more accessible to all police officers. Similarly these services attempt to understand police officers' experience of trauma and stress.

The author's interest in the field stems specifically from being employed as a psychologist within the SA Police Services for a period of eight years, from being responsible for the overall management of Psychological Support Services in the capacity of Section Head since 1990, from often being witness to the trauma police officers suffer, and from previously serving for two years on the SA Police Services Stress Task Group.

Concern regarding the distress of police officers is shared by the other helping professions (Social Work Services and Chaplain Services), by top management and the general public. Despite the formation of a variety of multi-disciplinary task groups over the last couple of years to investigate and address phenomena such as the high rate of suicide, stress in police officers, alcohol abuse, shooting incidents, and so forth, very little progress appears to have been made in the understanding or combatting thereof. There still appears to be confusion and uncertainty about how to understand what is happening to so
many officers, how to intervene, and also about who is responsible for dealing with the situation.

Although many areas of police work are said to have the potential to be traumatizing, the specific focus in this article is on post-shooting trauma (i.e. the traumatic after-effects of shooting incidents). Aside from the fact that police officers have clearly indicated the impact these incidents have on their lives (see next section), the community at large also regard these incidents in a very serious light.

Limiting the focus of the study in this manner serves as a punctuation. As such a distinction is drawn which serves as a means of organizing thoughts. This act of drawing distinctions as a means of making sense of the world is deemed inevitable by Atkinson and Heath (1987).

Against the backdrop of shooting incidents and post-shooting trauma the author attempts to describe, and understand the experiences of police officers at this particular period of our country's history. This is done with a view of making certain recommendations regarding how to intervene in the situation, and to suggest who is responsible for the mental health of these officers.
Shooting Incidents in the South African Police Services

Attempting to establish what factors primarily contribute to police officers' experience of trauma and stress, a workshop on Trauma in Police Work was presented by the Psychological Support Services in the Western Cape Region in 1992. Police officers who attended the workshop made it clear that they experienced shooting someone, being shot by someone, or viewing someone being shot, among other aspects of their duties, as particularly traumatic (Jacobs, 1992). Not surprisingly, the severity of post-shooting trauma is also confirmed by literature from abroad (Carson, 1982; Hill, 1984; Jones, 1989; Kroes, 1985).

A trend that is, however, reflected by official police statistics and also clear from newspaper reportings (The Citizen, 18 February 1994), is that, in comparison to most Western European and North American law enforcement agencies, a greater number of police officers of the SA Police Services are more regularly involved in shootings (Gersons, 1989; Hill, 1984; Loo, 1986). Furthermore the number of shootings between criminals and Police in South Africa is said to have increased drastically due to the propensity of criminals to use firearms. The statistics of the Western Cape Region for the period February 1991 to October 1993 indicate a monthly average of 95 shooting
incidents, of which 5 per month on average would be fatal (SA Police Services Register for shooting incidents, Western Cape Region: 1991-1993). A recent newspaper article asserted that almost every police officer on the Witwatersrand had fired his* firearm more than twice in the execution of duties (The Citizen, 17 February 1994). Despite many attempts, these statistics could not be verified officially. They are, however, believed to be grossly exaggerated, as many police officers perform administrative or other duties and seldom, if ever, have contact with criminals. Yet, this newspaper article serves as an indication of the general media perception of police work in South Africa.

In stark contrast the Royal Canadian Mounted Police, Ottawa, Canada is said to typically only experience two or three shooting incidents a year (Loo, 1986), and in the city of Amsterdam, with its population of more than 700 000 and a large drug addiction problem, an average of 27 shooting incidents occur each year, of which only five on average result in serious injury or death (Gersons, 1989).

Accepting the assumption that within every community societal needs and conflicts are projected onto the Police, it is interesting to read what Vastola (in Marshall, 1986, p. 280) has to say about the so-called

* "He/his" is used in its generic sense throughout this manuscript and is interchangeable with "she/her".
Police personality: "Simply put, the police personality is merely a reflection of the dominant cultural personality of the citizens with whom police primarily interact." This statement reflects rather badly on our society, if one takes into consideration how often violent means are necessitated during the execution of police duties in South Africa.

From this section the prevalence and traumatic nature of police shootings is apparent. Subsequently an indication is given of what is reported in local and international literature regarding post-shooting trauma. It is apparent from the literature review that these writers make certain assumptions regarding post-shooting trauma. Fish (in Denton, 1990) has pointed out that our basic assumptions about the nature of clinical problems may remain implicit and be taken for granted. They, however, warn that these assumptions are then all the more influential, since they are less open to review, questioning, and possible revision. In most of the reviewed literature, post-shooting trauma is considered to either precede the development of, or to be synonymous with Post-Traumatic Stress Disorder (PTSD). The meaning, implications and underlying assumptions of the psychiatric diagnosis, PTSD, will be the focus of the following section. This section also provides an indication of present views, treatment trends and interventions.
Post Traumatic Stress Disorder in Police Officers

Many writers, mostly abroad, have contributed significantly to the literature on the subject of PTSD. Most of these writers, however, describe PTSD and other stress reactions in lineal terms, with historical, causal explanations for the distress and viewing these reactions as intrapsychic phenomena (Anderson & Bauer, 1987; Gersons, 1989; Jones, 1989). They mostly define PTSD according to the official Diagnostic and Statistical Manual of Mental Disorders (DSM I - IV) (APA, 1994), and therefore adhere to the medical or objective/descriptive model, according to Denton (1990).

The Assumptions

One assumption of writers adhering to this model, is that symptoms arise from processes occurring within individuals (intrapsychic phenomena), and that the individual is the receptor of lineal causal effects, and therefore the site of pathology. Even though provision is made for consideration of the social context with the inclusion of axis IV: severity of social stressors in a multiaxial classification system, this information is considered optional only, as the first three axes constitute the official diagnostic assessment. This has
the implication that "Regardless of what may be occurring in peoples' families or other social contexts, the distress and impairment they experience is assumed to be due to a dysfunction within them as an individual" (Denton, 1990, p. 118). Whatever is the matter, it is seen to be the responsibility of the individual alone. The aforementioned is deemed consistent with the definition of mental disorder, and also with a medical or "stress-diathesis" model, which regards social factors as generic stressors which can elicit latent individual weaknesses (Denton, 1990).

Utilizers of the DSM IV, apparently assume that it is a useful exercise organizing observations, so that certain names are ruled in or out on the basis of the prevalence or absence of critical factors. A discussion of the critical factors for a diagnosis of PTSD follows.

The Official Diagnosis

Criteria for PTSD according to the DSM IV (APA, 1994, p. 424), include that the person

has experienced an event that is outside the range of usual human experience and that would be markedly distressing to almost anyone; e.g., serious threat to one's life, one's children or spouse; sudden destruction of one's home or community; or seeing another person who
has recently been, or is being, seriously injured or killed as the result of an accident or physical violence.

Given this definition, a police officer-involved shooting incident (whether the officer fires the shot or is fired at), will clearly fit the criteria for a traumatic event.

PTSD is described as an anxiety disorder, and symptoms according to the DSM IV (APA, 1994) include:

* The traumatic event is persistently re-experienced
* Recurrent distressing dreams about the event
* Sudden acting or feeling as if the traumatic event were recurring
* Intense psychological distress at exposure to events that symbolize or resemble an aspect of the traumatic event
* Decreased responsivity and involvement with regards to the external world, and
* Persistent symptoms of increased arousal, such as sleep disturbances, excessive startle responses, decreased memory and concentration.
The disorder is generally subdivided in:

* Acute PTSD with onset within 6 months of the trauma and duration less than 3 months, and

* Chronic PTSD with delayed onset (at least 6 months after trauma) and duration of 3 months or more.

Meek (1990) warns that PTSD is, however, not the only diagnostically significant mental disorder possible as a response to a severe trauma, and that other mental disorders can also develop in response to severe stressors. She says that it is not unusual for people to develop an anxiety, depressive, or organic mental disorder after exposure to a significant stressor.

It is interesting to note that also in the SA Police Services, there is a tendency to consider any stress reaction as PTSD and not to focus on nor report other diagnoses at the rate applicable to PTSD. This might imply ignorance or a general assumption that other symptoms and diagnoses are not so clearly linked with exposure to job related stressors, as is PTSD. Other diagnoses might also be considered to have more of a stigma attached to them.
Post-trauma Reactions

The symptoms of a stress or shock reaction is generally said to last a few days, weeks or even months, depending on the intensity of the traumatic event, and the availability of emotional and social support. According to Horowitz (in Elridge, 1991) other clinical symptoms commonly associated with trauma, include substance abuse, depression, psychosomatic disorders, adjustment disorders and antisocial behaviour. Chronic substance abuse or excessive involvement in work, sports or sex may be effective means of avoiding intrusive recollections and emotions, at least temporarily, and in so doing may mask more serious problems. Clinicians in the SA Police Services, but also in private practice, who render psychological, social work or psychiatric services to police officers, often report these symptoms in their clients (Captain Elize Jacobs; personal communication, July 13, 1994).

In describing the psychological effects a shooting has on a police officer, Carson (1982) applies the five phases in the coping process of human beings as distinguished by Kubler-Ross. These are denial and isolation, anger and resentment, bargaining, depression and acceptance. He furthermore states that in his experience the depression phase is the one to last the longest. It is said that this phase has a lot to do with the officer's basic
personality, current life situation and personal history. Together with this, the depth of the depression is also linked to the amount of trauma involved in the incident, the way the particular agency deals with shooting incidents and the officer's social support network (Carson, 1982; Gersons, 1989).

Symptoms are generally seen to be most intense for the first 48 to 72 hours following the event (Carson, 1982; Loo, 1986). The first reaction is seen to be that of psychic or emotional numbing, followed by feelings of intense isolation with a tendency to deny that there is any difficulty in dealing with the post-shooting stress. In relating to family and friends, the officer may show emotional constriction and unresponsiveness, according to these writers. A sense of preoccupation and behavioural changes may be noticeable with the advent of intrusive thoughts or even flashbacks. Family members are said often not to suspect the traumatic event as a possible cause for the police officer's changed behaviour (Gersons, 1989). Sleep disturbances, mostly due to feelings of fear or guilt, are expected to occur regularly. Anxiety or specific fears associated with the event may appear and often a loss of interest in work is reported. An increase in alcohol consumption may occur. A final element of the stress reaction is said to be a reconsideration and
reevaluation of value systems, goals and status (Carson, 1982). The average time for feeling that the officer was his usual self regarding his working, social, and family life, is said to be 20 weeks (Loo, 1986).

There appears to be general consensus that, in many cases, this initial stress reaction leads to PTSD, whether due to a predisposition, the severity of the trauma, or lack of social support or treatment.

Clearly these writers primarily adhere to the medical model with their descriptions of symptomatology. Although they make provision for the influence of circumstances, this is, however, again done in a linear, causal fashion. An indication follows of what the treatment of PTSD entails from this perspective.

Treatment Trends and Interventions

Treatment from the perspective of the medical model, consists of finding the etiology of the so-called illness and then instituting a treatment, such as administering psychotropic medication or devising other means of altering or blocking those bodily processes which are considered responsible for the patient's state (Hoffman, 1981). The assumption is thus that an expert can "diagnose" objectively and linearly apply a solution. In this vein, focused psychotherapy, in combination with working through of the incidents, and sometimes
psychopharmacological intervention, is said to be of value in addressing PTSD or other severe stress reactions in police officers (Gersons, 1989).

In an article conveying a psychoanalytic approach to police shootings, Turco (1986) emphasizes the importance of the reactivation of earlier trauma, conflicts and impulses prompted by such extreme experience. His assumption is that this reactivation must be understood and worked through in psychotherapy, to provide the best guarantee for the resumption of normal living. This approach implies individual and often long-term interventions by an expert.

As previously illustrated, predisposition constitutes one of the basic premises of the medical model and DSM IV classification system. Meek (1990), however, warns about the negative effects the stigma of predisposition had on Vietnam war veterans and advises that clinicians would probably work much more effectively with many sufferers of PTSD if they do not emphasize predisposing factors in their treatment. She suggests that a useful attitude with which to approach clients is that every human is vulnerable and anyone can develop symptoms if he or she has been exposed to the applicable circumstances.

This section touched on the more traditional view of PTSD and other stress-related disorders, the basic assumptions underlying the diagnoses, and the epistemology
from which they are derived. While not contesting the "correctness" or possible value, the author is, however, of the opinion that the medical model does not really prove useful in attempting to understand what is happening in the lives of traumatized officers. This perspective also tends to label and blame and limits the options for intervention. Consequently many officers in need of support either go undetected, untreated or are simply boarded on medical grounds, without matters really changing in the broader context of the problem.

Subsequently a theoretical explanation is given from an ecosystemic perspective, following which an attempt is made at contextualizing the problem and providing a different description of post-shooting trauma.

The Ecosystemic Framework

According to Trickett (1984) and Mann (1973), the ecosystemic approach provides a broad range of contextual understanding. This approach suggests an interest in what Trickett (1984, p. 265) calls "environmental reconnaissance and the identification of resources". It also suggests an interest in the role relationships between people, in policies and programs, in change over time, and in the contextual meaning of the variables of interest (such as post-shooting trauma).
Marshall (1986) states that the individual, the job, and the organization are embedded in a social system. From this perspective, stress (and arguably also post-shooting trauma) is an aspect of the system as a whole and cannot singularly be attributed to any part, such as the predisposing psychological traits of an individual worker, alone. Stress is seen to be a system characteristic, even though it is eventually expressed through individual experience. System characteristics contribute to individuals' experience of stress. Individuals and occupational groups complement contextual forces and perpetuate the total system. Notions of lineal cause and effect are suspended. Furthermore, in relation to stress, an occupational group's social status, functions in society, and methods of occupational socialization are some of the more obviously relevant aspects. Other people's anxiety and tension, and general social denial of stressful issues contribute to, and are in turn reinforced by, the focal individual's experience (Marshall, 1986).

Marshall (1986), states that for members of the police service a focal job pressure is feeling threatened by physical violence. This, she says, accords with a potential interpretation of their job as that of society's guardians of "power". Thus the cultural dilemmas they mirror are those surrounding how this power is used: whether for good or evil, for the benefit of the
collective or to uphold the rights of individuals (compare the present situation in South Africa as described in the next section). Marshall says society copes rather poorly with, among other, the fundamental existential issue of power, and it represents a reservoir of unresolved conflict and potential stress. Policing is thus seen as a focus for the social anxiety attached to power. Individual members live with these inherent conflicts, and their attendant anxieties, not only for themselves, but for society as a whole. Implicit in this model are notions that many of the pressures involved in policing are largely unavoidable and irresolvable because they are artefacts of our particular society's attempts to cope with essential aspects of the human condition.

Systems theorists highlight the importance of social relationships. Similarly a police officer involved in a shooting, can be viewed as participant in an open interpersonal system, in which his efforts to cope with the trauma are influenced and even constrained by a number of factors, including peer support, the legal system and the formal and informal procedures that come into operation following the incident (Jones, 1989).

Focusing on processes occurring within the SA Police Services in the aftermath of a shooting, coping is best conceptualized as a systems affair. What needs to be done in coping with the incident - the tasks or issues that
coping entails - is shaped by what each roleplayer in the investigation does and how the other responds. To a large degree, such give and take, not just the individual's perception of the event, determines how the event unfolds and reverberates in these people's lives.

Coping with a stressful situation can thus be seen as having three seemingly competing functions: managing one's own distress (emotion focused), attending to various instrumental tasks (problem focused), and grappling with each other's presence and emotional needs (relationship focused) (Coyne, Ellard & Smith, 1990).

Coyne and Smith (1991), state that according to a widely recognized model of stress and coping, a person facing a stressful event makes an appraisal of the threat, loss, or challenge posed by the event (primary appraisal), as well as the resources available to deal with it (secondary appraisal); engages in problem- and emotion-focused coping; and experiences positive and negative emotions, and other adaptational outcomes as a result. These authors consider this model to represent an improvement over conceptionalizations of stress simply as the occurrence of environmental events or as an individual response. They, however, still consider it to be too narrowly focused on the efforts of the individual and they and others (Coyne & DeLongis, 1986), state that the concept of social support is the main acknowledgement that adaptation to stress occurs in the context of interpersonal relationships.
According to Keeney (1979), the shift toward a more ecosystemic epistemology involves moving away from blaming the identified patient or group for his or its idiosyncrasies and/or blaming etiological factors for causing symptoms. Symptoms are instead seen as metaphoric communications about the ecology of relationship systems or about the ecological condition of whole systems. These symptoms are also considered to be inextricably a part of relationship systems such that the site and nature of symptom manifestation may shift. Difficulties in any part of the relationship system may give rise to symptomatic expression in other parts of the systems. The major implication for therapists is that they should look for the communicative function of symptomatology within an ecological relationship system (Keeney, 1979). Marshall (1986) expresses a similar sentiment when she states that, unless the total system changes, adaptive coping at one level typically increases experienced stress in another.

Subsequently the broader context is outlined in which post-shooting trauma is but one of the many ways police officers show their distress. Attempting to indicate causality does not fall within the realms of this article. Similarly, it will become clear that not all, if any, of the factors mentioned are directly linked to post-shooting trauma per se. It should be noted, however, that the intention of this paper is not to present a solution to the so-called "problem", but rather to initiate another kind of
discussion around it, and to illustrate the potential advantages of perceiving post-shooting trauma differently.

Contextualizing the Problem

Much of the post-shooting trauma experienced by a particular officer can be understood in terms of factors in the surrounding context. Auerswald (1971) states that one of the keynotes of ecological thought is concern with the context in which a phenomenon occurs, that is, broadening the field of enquiry first before narrowing the field by looking into the problem "in depth".

Bateson (1972, p. 244), postulated what can be described as his basic rule of systems theory: "If you want to understand some phenomena or appearance, you must consider that phenomenon within the context of all completed circuits that are relevant to it."

These guiding principles of Auerswald (1971) and Bateson (1972) are subsequently utilized in an attempt to understand and describe post-shooting trauma. Rappaport (1987), states that the cultural context in which phenomena occur matters, as individuals as well as settings bring with them a variety of cultural assumptions. In this regard, many aspects of the police culture have struck clinicians and researchers as remarkable.
Understanding the Culture

The police culture has often been blamed for police violence (some may consider the regularity of shooting incidents as evidence of such police violence). The disposition of some members of the Police who have witnessed irregularities, but stand by their guilty comrades by suppressing or distorting the truth rather than to get them into trouble, has been described as a mistaken notion of Esprit de Corps (Brogden & Shearing, 1993). The strong sense of cohesion and propensity to oppose influences disturbing the sense of "family togetherness", so typical of the SA Police Services since its inception more than 75 years ago, has undoubtedly also contributed to the "us/them" mentality and the gap that is said to exist between Police and the community.

Similarly it is clear that through the years, police officers have developed their own methods to deal with the trauma associated with their jobs, including post-shooting trauma. Criticism is often expressed by theoreticians and clinicians regarding many of these methods (such as the use of alcohol, denial, joking, socializing exclusively with police officers as they share similar perspectives of "reality" and understand each others' experiences, and so forth), but clearly not all of these methods have proven dysfunctional.
Considerable pressure results from police officers' relationships to clients or the public in general. This so-called police culture can be seen to serve as a defence against stress according to Marshall (1986) and as such has become a strong occupational norm. She says that the police culture has to a great extent become enshrined in official organisational structures and procedures, many of which contribute to social isolation. This social isolation could, however, have a protective function, can provide much needed emotional and professional support and as such acts as a buffer against stress.

Requesting Assistance

Regarding the current police culture and so-called police self-identity, it is clear that police officers in general do not easily complain about psychological issues, nor discuss emotional reactions and feelings with each other. Gersons (1989) suggests that fellow police officers and clinicians in the Police scarcely recognise traumatized officers, and that the police culture to some extent helps to hide the effects of such intense psychological experiences, by offering denial. As such, occupational norms often strongly oppose the open expression of feelings, attitudes, or admitting to experiences of stress and promote adherence to the "cowboys don't cry" principle. Gersons (1989) furthermore says that the police culture
stands in the way of recognizeing and addressing what he considers as distressing situations. Most social workers, psychologists and chaplains in the SA Police Services, will certainly agree on how difficult it is to convince the organization of the relevance of their services, and to render support to police officers. It deserves to be mentioned that very few police officers in general utilize these services of their own accord.

The helping professions most certainly are seldom approached for assistance following shooting incidents. It is almost as if barriers exist between police officers and the helping professions.

Marshall (1986) states how officers could have good relations with colleagues and immediate superiors, but poor communication with more distant administrators and/or senior management, who are considered incapable of understanding the "true" nature of their work. The gap between the Police and community would also render police officers unable to reach out to the community for help or assistance. Similarly, society can foster such polarization by failing to acknowledge the "reality" of police officers, or by denying them legitimate means of expression. "Unsocial" working hours further contribute to the abovementioned process of polarization (Marshall, 1986).

Nevertheless, the previous sections have clearly indicated that "symptomatology" (i.e. suicides, diagnoses
related to stress, PTSD and depression, medical boardings, and so forth) have shown a dramatic increase during the last three or four years. It may be useful to ask why this is occurring at this particular time.

"Why Now?"

According to Stanton (1992) asking this question and the drawing of what he refers to as a time line, elucidates the proximity of life cycle events to the onset of problems, showing how the two interact and are interrelated. Clues to the ways in which events may have triggered difficulties - and the feedback loops between the two - can be identified and used to direct interventions. He furthermore states that this process minimizes blame and reframes as normal the events and reactions. It can make the "symptom" seem acceptable and understandable.

In attempting to understand why police officers previously seemed able to cope rather well, but now appear unable to, or claim that they can't cope with the many stressors associated with their work, Gioscia (in Auerswald, 1971) seems to have a point worth considering. He suggests that the rate of change in social systems varies markedly from system to system. He says that within a given social system, an individual functions most efficiently as a sub-system when his operations, including his social behaviour and thinking, are synchronous with the
operations of that system. According to him, a state of achrony develops if change occurs in an individual, as subsystem, at a slower rate than in the social system he inhabits.

**Rate of Socio-political Change**

From this perspective, it is hypothesized that a changed political scenario and social order in South Africa, has much to do with the current state of affairs. When political and social transformation occurs in a society at the rate with which it is happening in the "New South Africa", it obviously goes hand in hand with much experiencing of anxiety and uncertainty. While politicians and academics devise new "rules" for policing and make up their minds regarding the role of the Police in the "New South Africa", police officers are very much stuck in the middle. Since the process of social and political reform gained momentum and the state of emergency was lifted in South Africa during 1990, there has been a dramatic increase in violent incidents, both politically and economically inspired. Statistics have shown that more people have died annually in these four years than in any other corresponding period in the history of this country. It certainly is no simple task for police officers to adapt to all the changes which clearly affect their own lives and work, while also having to ensure the stability and law and
order within a society in the process of adapting to these changes. It goes without saying that in times such as these, circumstances also more regularly necessitate the use of firearms in maintaining law and order.

It could be hypothesized that the rate of change in the Police and in ideas about what policing ought to entail, might be slower than the rate of change in the political and social spheres. A state of achrony may well develop as the Police attempt to reform, to redefine their roles from state to community policing, and to establish their legitimacy.

**Policing Apartheid**

Some commentators are of the opinion that previously the SA Police was a political 'pawn' in the hands of politicians. This sentiment is clear from South African President Nelson Mandela's comment in Weekend Argus of 19 September 1993: "...the SAP was developed, established and trained to defend white supremacy". Compare what Brogden and Shearing (1993, p. 8) have to say in this regard: "The rules, legal and political, that govern South African state policing are essentially enabling devices that permit the SAP to conduct whatever actions are appropriate to safeguard the State against the citizens, not the citizens against the incursions of the State." These authors furthermore state that, policing apartheid required the use
of extraordinary coercive measures and thus gave rise to inhumane police practices. These arguments could in all probability also be extended to police officers' use of firearms. "Casual brutality to black people has been the normal practice of South African policing in this abnormal society, commencing with street confrontation and continuing behind police station doors" (Brogden & Shearing, 1993, p. 19). The authors maintain that the previous president of South Africa, Mr F.W. de Klerk, admitted to these features of South African policing early in 1990 when he set out his agenda for police reform.

The fact of the matter, however, is that police officers previously enjoyed status among the white minority whom they were seen to serve and thus received a lot of support. As a result the Police had a lot of authority and their actions (including the excessive use of violence) were seldom questioned. They furthermore seldom questioned their own actions, which were often based on dichotomous thinking, such as: Blacks are criminals and Communists; Whites are law abiding citizens and Christians. Brogden and Shearing (1993) state that despite extensive organizational powers to ensure internal accountability over police practice, these were seldom utilized to control police violence. They thus conclude that the use of violence was organizationally sanctioned. In this manner the organization, however, served as a buffer between police
officers and the community. As state police they thus had clear roles, specific rules, and enjoyed ample support.

Targets of Anger

Brogden and Shearing (1993) mention that the Police in this country are viewed by the previously disenfranchized sector of the community (i.e. blacks), as a source of insecurity (not security) and as a direct and indirect source of violence. Through a mutual reinforcing process of social definition, police officers are often typecasted as deviants and a vicious cycle of guilt and blame is set into motion in this manner. It has become impossible to establish who the perpetrators and who the victims of violence are in this complex society and many accusations and counter-accusations are made in this regard.

With an escalation of the anger and frustration of black people, police officers often pay the price. Given the role the Police previously played in the political arena, it comes as no surprise that police officers are at times specifically targeted in violent attacks, and that since 1991, there have been more than 830 murders of police officers (of whom a total of 330 were on duty at the time), according to Colonel J.A. Du Plessis (personal communication, July 13, 1994), SA Police Services Head Quarters.
New Roles/Rules for Policing

Many theorists believe that police officers like operating according to rules that are certain, in a context of goals that are specific (Brogden & Shearing, 1993), and that the need for security and a clear definition of role, is precisely what makes a career as police officer attractive to certain recruits (Nel, 1989). It is suggested that the clear role definition applicable in the past (i.e., to protect the interests of whites from the communist onslaught), gave police officers this sense of security. Given the new Constitution, police officers are, however, now expected to serve and protect the rights of all. In community policing, they are seen to be accountable to the community and according to Brogden and Shearing (1993, p. ix)

they are being called upon to establish relationships with the public that are process - rather than rule-based and that have broad rather than narrowly defined objectives. ...they are now being called upon to work within a framework of dual power.

The new style of policing furthermore demands that officers use their own discretion. The need is thus almost for a totally different "type" of recruit (Nel, 1989).
In the following section it is stated that the SA Police Services no longer is a cohesive body, and as organization, no longer always fulfils the role of the "parent" that protects, supports and prescribes to "family members". Many individual officers may be left feeling abandoned and they might find their present circumstances rather anxiety provoking.

Openness to public opinion about the quality of their work performance, creates additional pressure, and with the strengthening demand for social accountability (also with regard to the investigation of shooting incidents), will contribute significantly to increased pressure in the future.

Disintegration of the "Police Family"

As the "Apartheid walls" come tumbling down, many police officers only now consider the roles they themselves played in maintaining the legacy of Apartheid. Given the public and political outcry regarding police brutality and injustices in the past (to a lesser extent also the present), many officers might now question the roles they played during the previous era. This might also apply to the ease with which they applied lethal force in the service of law and order.
These officers might be left feeling disillusioned with themselves, the Police as organization, and also the previous government. It is interesting to note the observation of a police psychologist, Captain Elize Jacobs, during a meeting where strategies were planned to combine the efforts of psychologists, social workers and chaplains, to address the current Police experience of trauma. She stated that in her experience, 90% of the police officers who were debriefed in the Western Cape Region, following incidents during which they were shot and wounded while on duty, expressed anger not at the assailant, but at the Police as a system for failing to protect and support them, and for treating them as dispensable items (personal communication, July 13, 1994). In this regard the similarities with the American experience in Vietnam as outlined by Meek (1990) are quite clear.

Understandably it is no easy task to be a police officer in South Africa during these troubled times, and the demands associated with the job have undoubtedly increased substantially. That many long-serving and conservative police officers could experience their new policing roles as somewhat confusing, as a culture shock, or even as traumatic, should not be forgotten. It is hypothesized that many police officers are not fully prepared for the magnitude of these changes, and perhaps others might even be unwilling or unable to adapt to them. Clearly many police officers might currently be experiencing much
uncertainty, especially with the implementation of the "Truth Commission" which aims at exposing all injustices in the past. This uncertainty is reflected in a newspaper article where a police officer is quoted as saying: "Everything we did, we did for the government. But now that another government is coming to power, we are being exposed" (The Citizen, 17 February 1994).

With some senior officers jockeying for positions now that a new government has come to power, an increase in their use of formal organisational controls, such as reprimands, demotions, unfavourable postings and dismissals (also following shooting incidents), may well occur. Some officers would possibly be willing to confess to wrongs of the past and even consider testifying against each other. The implications for cohesion in this "police family", are clear. This knowledge serves as an additional stressor and could leave officers rather demoralized and with a notion of meaninglessness. Meaningfulness or commitment to a worthy cause, is however thought to ameliorate the effects of great stress according to Frankl (in Meek, 1990).

According to many researchers, it is important to assess the meaning a stressor has to the individual. In terms of losses, the literature indicates that these also include psychological losses. The person may have lost a sense of personal "invulnerability", and may feel that the environment and the people in it are no longer friends upon whom the person can depend. There is evidence that the
meanings a person assigns to the world and the events may contribute to the exacerbation of a stress-related disorder (Meek, 1990).

**Turnover in Personnel**

A great turnover in personnel due to political, but also economic considerations, has become characteristic of the SA Police Services over the last three years or more. According to Captain H. Labuschagne of SA Police Services Head Quarters 23 362 members (more or less 10% of members per year) quit the SA Police Services since April 1991 (personal communication, July 27, 1994). Similar statistics were also supplied in a recent newspaper report (Sunday Times, February 20, 1994).

Due to the great turnover in personnel and increased medical retirements, the average age of police officers has decreased drastically, resulting in a shortage of senior officers to provide the necessary guidance and support. This again contributes to police officers' experiencing a general feeling of unpreparedness for the stringent demands of their jobs; another of the reasons why police officers now more often present with the symptomatology previously described.
**Attribution of a "Sick Role"**

In the introduction the drastic increase in medical boardings of police officers, also on psychological grounds, was mentioned. It was hypothesized earlier in this article that a diagnosis of PTSD or other stress-related diagnoses, seemingly have become acceptable within the context of the SA Police Services. One can almost say that it has become a stereotype that police officers ought to present in this manner, given the extent, but also regularity with which they are exposed to traumatic situations.

Many private practitioners (psychiatrists, psychologists and general medical practitioners), whether knowingly or not, for financial gain or otherwise, seem to collaborate in this process of stereotyping and reinforcing the "sick role"-behaviour many officers (often in senior positions) have adopted. The aforementioned most probably occurs due to the decontextualized approach many professionals have to issues of mental health.

The role of the media in this process of stereotyping should also not be underestimated. Previously they sketched officers as "sick" for their use of excessive force, and now they are deemed "sick" due to the stress related to their jobs and amount of violence they are exposed to. It might be said that now that police officers no longer enjoy the support of the government, organization nor community,
and accept this definition of themselves as "sick", they tend to internalize their feelings of aggression previously legitimately expressed during the execution of their duties.

This section highlighted the context in which police officers find themselves at present. The importance of understanding the functions of the police culture, and police officers' ways of making sense of their world was elucidated. It was shown how the rules of the "game" (policing) were changed, without consulting, considering, or preparing the "players" (community and police officers) for the changes. Factors such as the violence, stress, instability and trauma that accompany the rapid societal transformation were indicated. To some extent it was implied that the Police have become the "symptom bearers" for a society in distress as this society adapts to the "New South Africa".

In conclusion certain recommendations are made regarding the need to consider the implications of procedures in response to shooting incidents. The importance of intervening with caution is elaborated on and finally those responsible for the mental health of police officers are identified.
Recommendations

Balancing Interests

Brogden and Shearing (1993) are of the opinion that there is perhaps too much emphasis in South Africa on the difficult circumstances under which officers have to police and that the courts are often biased in favour of law officers. These authors and others furthermore believe the rights of criminals/members of the public to proper investigation following a shooting incident, are often neglected (Captain P. de Bruyn of Legal Support Services in the Western Cape; personal communication, November, 20, 1993).

Brogden and Shearing (1993, p. 32) maintain the following:

The history of court decisions...indicates that South African courts have not consistently sought to ensure that even the few limits that the legislation does impose on the police use of coercive capacity are applied. South African courts...repeatedly give the police the benefit of doubt.

Foster and Luyt (in Brogden & Shearing, 1993) state that the Police are not too diligent in policing themselves nor
in dealing in any serious fashion with their own infringements of the law.

The Standing Order 251(A) (i.e., official policy) according to which all shooting incidents within the SA Police Services are investigated and managed, is presently in the process of being rewritten by SA Police Services Head Quarters. It is very much done in a collaborative style with members (albeit mostly senior members in leadership positions) participating in the process. All previous directives (a total of more than 30), written to address shooting incidents and the investigation thereof, were integrated into this Standing Order.

It is proposed that there is a need to look at the implications of this revised policy and that it is important to establish how it will affect the people whose interests it is supposed to serve. Rappaport (1987) writes that the historical context in which a person, a program, or a policy operates has an important influence on the outcome of the program. It is therefore also important to understand the conditions that prevailed before the latest policy was devised.

For precisely this reason the South African Police Services ought to consider submitting the revised Standing Order 251 to a community forum for recommendations and approval, before the final implementation. Not only will this step be in line with the official policy of community policing and the principle of transparency, but will also
afford the organization and individual officers the confidence that their policies and police actions with regard to shooting incidents are legitimate and have the blessings of the community it is paid to serve.

From a review of available literature the procedures that are implemented abroad following a shooting incident, seem to favour the criminal/public, at the expense of the police officer. This could have the effect of traumatizing those law officers who acted legitimately in the course of their duties even more. It will be of the utmost importance to prevent this from happening in South Africa, where police officers already suffer much trauma and have rather poor relations with the legal system and public at large.

The helping professions of the SA Police Services ought to highlight the plight of members and ought to ensure that their rights and needs are also considered by policy makers. In doing so, caution is called for however.

Intervening with Caution

The importance of designing interventions and understanding organisations, policies and programs, in a manner that is not victim blaming, has been documented (Rappaport, 1987). The author considers it vital to design so-called preventive interventions (also for post-shooting trauma) with this in mind. Thus there is a need to be collaborative, and to be concerned with providing or
facilitating resources to free the self-corrective capacities of a system (SA Police Services) or individuals (police officers). Interventions need to be delivered in a context that avoids the one down position of many helper-helpee relationships, and in a manner illustrating sensitivity to the culture and traditions of the settings and individuals involved (Rappaport, 1987; Ritterman, 1982). These people need to have a large and controlling voice in determining what takes place and how it is done. One furthermore needs to take cognizance of the impact, the unintended consequences and the meta-communications of interventions (Rappaport, 1987).

Auerswald (1985) describes the above manner of functioning to be that of a "nonblaming ecological detective" (p. 6); the aim being to seek out and identify the ecological event shape in time/space that includes the situation that led to the issuing of a distress call, following which the aim is to construct a plan of action to alter the evolution of the event shape by adding a therapeutic event in such a way as to alleviate the distress. The ecosystemic perspective is interpersonal rather than intrapsychic in nature and looks at the communication and behaviour of everyone present, with the behaviour of the afflicted person part of a larger, recursive pattern (Hoffman, 1981).

With the above as a guiding principle, it will serve Social Work Services, Chaplains Services and Psychological
Support Services of the Institute for Behavioural Sciences well to consult not only senior management, but also those police officers whom they wish to reach with their interventions, and even the community at large, before hastily becoming involved in, for example, addressing post-shooting trauma in police officers.

Medical Boarding of Officers

The organisation owes its employees appropriate assistance and compensation for work related injury (Jones, 1989). It is, however, clear that the diagnosis of PTSD may present opportunities for secondary gain, and consequently, incentives for exaggeration or fabrication of symptoms (Elridge, 1991). While it is of the utmost importance not to label officers who apply for medical boarding on grounds of PTSD, or for other psychiatric reasons, as malingerers, this must be considered as a possibility.

The organization has a duty, not only insofar as accountability to the public, or as a pro-active manner of caring for employees is concerned, but also in terms of self-protection, to limit the escalating costs of medical boarding and subsequent loss of trained employees (Jones, 1989). The needs and interests of police officers, the organization, but also those of the community, need to be considered whenever decisions are made in terms of policies regarding medical boarding.
It might be argued that these medical boardings fulfil a positive role in some cases as a means of self-selection of members for the new policing role. Yet this is undoubtedly an expensive method and it proves difficult to motivate why the tax payer ought to foot the bill for officers unable or unwilling to adapt to the socio-political changes. According to Colonel Swart from the Efficiency Services at SA Police Services Head Quarters, the medical boarding of 904 police officers in the first 6 months of 1994, was done at a cost of R250 000 000 (personal communication, September 15, 1994).

The author is of the opinion that some of the officers who apply for medical boarding are overreacting to their present situations and to the uncertainty regarding their future. Not only can Psychological Support Services perform the present role of evaluating the merits of applications, but perhaps the helping professions could play a more definite role in addressing the security needs of police officers during this period of political and social transition. The helping professions could possibly also fulfil the position of a buffer between the community and police officers; and police officers and the government. They could furthermore facilitate improved relations and challenge stereotyped views of each other.
The author agrees with Brogden and Shearing (1993), that not enough is done by the South African Police Services to ensure efficient internal functioning, particularly in relation to the recording, control and utilization of information. The following is a case in point: Although mechanisms already exist in the SA Police Services to channel data regarding shooting incidents to a central register at Head Office and also in the separate regions, the author remained unable to verify several newspaper reports in this regard, despite making every effort. The importance of processing and transforming all data into information managers can utilize, cannot be stressed enough.

Only when this information is available, will the Police be able to assess the extent of the "problem", to control the possible excessive use of force, to minimize the incidence of unlawful shootings and take action against those officers who clearly abuse their positions by exploiting the so-called leniency of regulations. This information will also enable psychologists, social workers and chaplains to devise programs not only to assist those officers who might be traumatized following a shooting, but also to assess and possibly address the general tendency among officers to use excessive force. Psychologists can play a role in the evaluation, but also treatment of those
officers who clearly abuse their positions. Having this
information readily available for anyone to scrutinize,
will also instill confidence that the Police is there to
serve the interests of all, and have nothing to hide.
Mechanisms need to be devised, however, to ensure that the
media report statistics correctly and cautiously.

Responsibility for the Mental Health of Officers

Traditionally top management and senior officers in the
SA Police Services have been slack in acknowledging their
share of responsibility for the mental health of officers.
The fact that some policy makers are unable to comprehend
the need for psychologists and other helping professionals
within the Police, serves to indicate the extent to which
they are out of touch with the "realities" and needs of
their personnel. Yet, when Parliament or the media have
questions regarding what is done to assist police officers,
the same policy makers are quick to shift responsibility
for problems onto the helping professionals.

Although this slackness and insensitivity is very much
reflected in the many inhumane policies still in place
(compare the placement and transfer policies), more and
more senior officers are becoming actively involved in
addressing the many problems of their personnel.

It is, however, of the utmost importance to realize that
the mental health of police officers is the responsibility
of all: This includes individual officers themselves, their commanding officers, the helping professions, the organization at large, the community and politicians. The importance of the policing role within a society should not be underestimated, and it is not far fetched to state that our society will not be able to heal, without also healing the Police. Police officers need the support and assistance of their communities and need to be given clarity regarding their roles, the new rules governing their behaviour, and their futures. This ought to happen as soon as possible.


