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“Brutal murder scenes are traumatising, and they’re mostly indelible”: Occupational stressors and mental health among *South African* police service murder detectives at a selected station in Durban, South Africa

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Abstract: Occupational stress is rampant across various professions. The process of murder case investigation culminates in a plethora of challenges, including mental health concerns among murder detectives, which can trigger occupational stress. Stress reduces productivity and is detrimental to a worker’s health and well-being. This study explored trauma contributing to occupational stress among murder detectives in the South African Police Service. The study adopted a case study design and a qualitative approach within the constructivist paradigm. To generate rich and thick data, participants were purposively selected. Data were collected using in-depth interviews with eight (n = 8) murder detectives and two (n = 2) employees from the SAPS’ Employee, Health, and Well-being Services (EHWS) department. Data were analysed using thematic analysis. The sources of stress identified were attributed to the nature of police work, namely long work hours and exposure to traumatic crime scenes. Murder cases involving children and women were among the most emotionally challenging sources of stress. Further, most detectives reported resorting to defensive mechanisms in dealing with trauma.

ABOUT THE AUTHOR

Nonhle Sibisi holds a master’s degree in Criminology and Forensic Studies and is currently a PhD candidate at the University of Pretoria. Her current research interests include police occupational stress, mental well-being amongst police officers and the use of technology within the safety and security cluster. The research areas of the authors involved in the study are similar. Three of the authors are criminologists (Nonhle Sibisi, Slindile Ngcece & Prof Nirmala D. Gopal), and Dr Kemist Shumba holds a PhD in Psychology and Health Promotion. The study is interdisciplinary, addressing occupational stress among murder detectives, which is related to psychology and criminology, the authors were able to collaborate and effectively contribute to the study.

PUBLIC INTEREST STATEMENT

Occupational stress is widely recognised as a global problem with serious health and economic implications. Police officers are generally known to be first responders to violent and serious crimes. This study reports on trauma as a contributing factor to occupational stress among murder detectives located in Durban, South Africa. The study focused on murder detectives as they get exposed to brutal murder crime scenes. The findings of the study indicate that trauma can have prolonged negative impacts on murder detectives as they repeatedly get exposed to trauma. Murder detectives develop various stress reactions right after being exposed to graphic and dangerous incidents. These include flashbacks, insomnia, and post-traumatic stress disorder (PTSD). The study recommends education on mental health on murder detectives and holistic support structures mainly tailored for murder detectives.

Although most detectives knew EHWS, high workloads were reported to be an insurmountable challenge. The findings have important implications for intervention programmes to improve the mental health and well-being of SAPS murder detectives.

Subjects: Criminology - Law; Crime Control - Criminology; Criminological Psychology; Policing & Police Law; Criminology and Criminal Justice; Criminal Behaviour and Forensic Psychology; Police; Stress and Emotion in the Workplace; Post-traumatic Stress Disorder in Adults; Trauma

Keywords: trauma; murder detectives; detective services; stress; mental health

1. Introduction

Murder is the “unlawful and intentional killing of a human being” (South African Police Service, n.d.). It is a heinous form of violent crime. Murder is among the most disturbing challenges the South African Police Services’ (SAPS) must tackle. This study explored trauma contributing to occupational stress among murder detectives at a SAPS station in Durban, South Africa. The overall aim was to impact the mental health and well-being of SAPS murder detectives. The investigation of murder requires both extensive experience and skillful detective work. Detective work predominantly entails investigating violent crimes such as murder and rape. A detective is dispatched to the scene to initiate the investigation process (Eck & Rossmo, 2019, p. 605). Subsequently, crime scene investigators endure the effects of traumatic incidents that go beyond the standard course of work. Investigating murder involves crime scene construction and subsequent processes until the case is officially concluded (Eck & Rossmo, 2019, p. 605; Steyn & Klopper, 2020, p. 287). Exposure to trauma can occur throughout an investigation, making occupational stress inevitable among murder detectives (Cronje & Vilakazi, 2020, p. 526). Murder is one of the most violent crimes committed in South Africa. It occurs in various settings, posing many impediments for officers investigating murder cases. According to the latest SAPS crime statistics, South Africa’s murder rate steadily increased in the first quarter of 2021 (South African Police Service, 2021b). The vast majority of studies conducted on police occupational stress are quantitative in nature (Baker et al., 2021; Chikwem, 2017; Civilotti et al., 2021). This study focuses on understanding the lived experiences of murder detectives and occupational stress. The overall objective of this study is to contribute toward improved support structures in the SAPS by providing in-depth experiences of murder detectives on occupational stress and trauma as contributing factor.

1.1. Occupational stress

The phrase “occupational stress” refers to a collection of emotional, cognitive, physiological, and behavioral responses to potentially harmful parts of the work environment (Cho & Park, 2021, p. 2). Occupational stress occurs when the work environment demands exceed an individual’s capabilities (Singh Narban et al., 2016, p. 49). Pressure has become one of the most crucial health challenges, posing a threat to both employees and employers (Tucker, 2015, p. 305). Researchers have discovered that the experience of occupational stress is directly associated with the safety and health of employees and has significant implications for the productivity of institutions (Cronje & Vilakazi, 2020, p. 527; Steyn & Klopper, 2020, p. 285; Gumani, 2017, p. 438).

Research has linked occupational stressors with psychological, bodily, and behavioral stress reactions, such as burnout, depression, and psychosomatic disorders (Cronje & Vilakazi, 2020, p. 526). A study by Wassermann et al. (2019, p. 285) investigated stress and trauma among crime scene investigators in Tshwane among a sample of 79 crime scene investigators. Wassermann et al. (2019, p. 287) found positive correlations between the mental health, stress, and traumatic nature of crime scene scales. Gumani (2017, p. 436) conducted an exploratory study on vicarious

traumatisation experiences among SAPS members working in rural settings. Police officers reported psychological challenges due to their exposure to traumatic cases (Gumani, 2017, p. 436).

1.2. Murder detectives and trauma

Exposure to trauma may result in distress, which can progress to a wide range of psychological problems in the future (Eck & Rossmo, 2019, p. 606; Gumani, 2017, p. 436). Unresolved traumatic memories are among the factors that contribute to PTSD. Extant literature links police officers' high-stress levels to past or current traumatic experiences (Jojo, 2016, p. 22; Perkins, 2016, p. 51; Violanti et al., 2017, p. 644). Witnessing a horrific death in the line of duty has been linked to trauma (Violanti et al., 2017, p. 643). Violanti et al. (2017, p. 648) averred that the most prevalent stressful incident for police officers is the death of a fellow officer on duty. As noted by Perkins (2016, p. 52), police officers may witness the murder of civilians and their colleagues, which has been considered a significant contributor to trauma among SAPS members.

Mental health, stress, and the traumatic aspects of a crime scene are all associated. Steyn and Klopper's (2020, p. 289) findings indicated that 20.5% of the respondents were diagnosed with a mental health issue. Most respondents (60.7%) rated their jobs as stressful, and 58.2% reported trauma-related symptoms. Murder scenes involving children were identified as remarkably traumatic (79.2%). Scenes involving children and teenagers and those involving damaged or decayed remains were the most distressing. Most respondents (68.8%) reported a desire to talk with someone about their employment. Correlations between the mental health, stress, and the traumatic nature of crime scene measures were positive ($p < 0.005$).

1.3. The impact of trauma: implications for mental health and well-being

Statistics on SAPS officers suffering from psychiatric conditions are high. The Employee Health and Wellness Services (EHWS) portfolio committee reported that 89% of SAPS officers were treated and diagnosed with depression (South African Police Service, 2021c, p. 18). In their financial year report, the EHWS indicated that 22% of SAPS officers were diagnosed with PTSD (EHWS, 2016). Violent murder crime scenes and constant exposure to dead bodies may result in primary post-incident stress behaviours (Steyn & Klopper, 2020, p. 289). Police officers frequently ignore or dismiss the emotional impact of traumatic incidents, which can result in the development of extreme anger or aggressive behaviour (Rudland et al., 2020, p. 40). For Gumani (2017, p. 437), police officers can become unconsciously desensitised to human empathy. This could be attributed to the long-term effects of prolonged exposure to traumatic incidents. According to Warren (2015, p. 13), exposure to violent and traumatic incidents raises the risk of police officers developing mental health issues, including depression, anxiety, suicidal ideation, and substance addiction. Previous research has revealed that police officers work long hours, often in adverse environments, and are frequently susceptible to high levels of physical danger, aggression, and trauma (Papazoglou & Tuttle, 2018:4; Violanti et al., 2017, p. 650). The effects of stress include sleep deprivation, flashbacks, and rage issues, and such stress reactions eventually lead to emotional and psychological disorders among SAPS officers.

1.4. Coping with trauma

The SAPS provides various support services to officers, such as social work, spiritual and psychological services. Psychotherapy, crisis intervention, and suicide prevention are among the programmes that have been implemented under the EHWS. Boshoff et al. (2015, p. 244) explored using a SAPS trauma intervention programme. They found that 44% of the officers were familiar with the stress management programme, and 17% reported not having used any SAPS support programmes. This can be attributed to how individuals' appraisals change in response to their assessment of available coping resources. Further, officers use different coping methods to deal with trauma, which may culminate in shunning or not utilising support services (Wassermann et al., 2019, p. 92). The most common coping strategies used by police officers to deal with trauma include proactive problem-solving, constructive self-evaluation, and confrontive coping (Wassermann et al., 2019, p. 92).

1.5. Significance of the study

The police's mandate is to prevent, fight, and investigate crime, maintain public order, uphold, and enforce the law, and secure inhabitants and their property in South Africa (South African Police Service, 2021c). However, their nature of work usually hurts their emotional and mental well-being. This is because police are usually the first to be in contact with victims of any crime. In some cases, the police officers also encounter perpetrators in violent confrontations and gruesome situations. According to Warren (2015, p. 61), work stress has become a significant problem for SAPS detectives. Organisational stress (which may be related to job demand and a lack of resources) and operational stress (such as dealing with aggressive and chaotic situations) are two elements that lead to occupational stress among SAPS officers. The SAPS has attempted to address these issues by increasing the number of detectives and forming many support systems, but occupational stress remains a problem (Wassermann et al., 2019, p. 94; Mofokeng, 2015). A contextual gap was identified and occupational stress among murder detectives in township settings where crime rates remain under-researched. Moreover, studies on occupational stress are quantitative in nature and the focus is mostly on the extent of stress and development of stress measurements tools (Baker et al., 2021; Chikwem, 2017; Civilotti et al., 2021). The current study presents a profound understanding of the experiences of occupational stress among SAPS detectives in township areas with reference to trauma.

This study is essential in acquiring a better understanding of occupational stress and contributing to the literature on qualitative studies on occupational stress and detectives working on murder cases. The study informs policymakers who oversee the formulation of SAPS policies to develop policies and programmes that will enhance policing, work satisfaction, mental health awareness and support structures for murder detectives. The framework on trauma development based on the psychoanalytical theory provided a rich background for theoretical implications on occupational stress among murder detectives.

2. Psychoanalytic theory

Psychoanalytic theory was applied to support the study. Sigmund Freud developed the psychoanalytic theory in the late 19th and early 20th centuries. His work started in the medical profession and focused on studying and treating patients with mental disorders. Sigmund Freud asserted that our minds are divided into three distinct regions (Hossain, 2017, p. 42). His initial discoveries were in the fields of psychoneurosis, dreams, jokes, and what he called "everyday psychopathology," such as a slip of the tongue. The second is a pre-conscious system, and the third is a conscious system. However, Sigmund Freud became more interested in psychology, specifically the psychology of the unconscious mind. The purpose of psychoanalysis was to demonstrate that the unconscious and conscious interacted to affect behaviour. Psychoanalytic theory was to aid in understanding a person's personality and development. It assumes that people's behaviours are determined by their pre-stored memories of recurring experiences (Hossain, 2017, p. 42; Sibi, 2020, p. 75).

According to Sibi (2020, p. 76), the unconscious mind stores all things that are not easily accessible on a conscious level, such as our instincts or drives, memories, and trauma-related emotions. This forms a significant element of one's personality. The unconscious mind functions as a repository for primal desires and urges, whereas the preconscious mind plays a role of a mediator. The unconscious mind is central to Sigmund Freud's psychoanalytic theory because it affects people's behaviour to the greatest extent. The re-narrativisation of a person's life is the goal of psychoanalytic therapy. It has placed a high value on the relationship between the unconscious and cognitive processes (Sibi, 2020, p. 76).

Furthermore, three psyche or personality structures were proposed by Sigmund Freud. The three systems, the Id, Ego, and Super-Ego, are closely related to the conscious and unconscious mind (Mohammed, 2021, p. 12). They also work together to control behaviors that shape an individual's personality. The id is a selfish, primitive, infantile pleasure-oriented component of the psyche with

no ability to wait for the reward (Mohammed, 2021: 12). Super-Ego refers to internalized societal and parental norms of “good” and “bad,” “right” and “wrong” behavior. Between the Id and the Super-Ego, the Ego acts as a mediator, finding compromises that will satisfy both. It is akin to our sense of time and place (Hossain, 2017:42).

The psychoanalytic theory supports this study in that it emphasizes that traumatic experiences repressed in the unconscious mind can influence a person’s behaviour. This is especially true in cases where murder detectives are repeatedly exposed to horrific incidents. However, some repress such events into their unconscious mind as a coping mechanism. The suppression of traumatic experiences may affect investigators’ behaviour, manifesting as tension, stress, and anxiety (Cronje & Vilakazi, 2020, p. 527).

The three structures of the human psyche have also been linked to an increase in stress among SAPS murder detectives. The id, which is defined as an infantile pleasure-oriented or impulsive component, is related to investigators’ job stress. This happens when the investigators or police officers consistently believe that their demands for relaxation, security, and safety while investigating murder cases should be met. When they cannot acquire those needs, they may feel helpless and anxious (Warren, 2015, p. 27). The ego is the second component and functions as a mediator. It is in charge of reality and behaviour organisation. It can address workplace stress among SAPS murder detectives in situations where the ego is used to meet the officer’s needs. If these demands are not met, the investigative officers may feel overwhelmed and powerless, leading to increased stress levels (Warren, 2015, p. 29; Hossain, 2017, p. 44).

Police officers’ line of work requires them to meet the public’s demands, investigate and solve murder cases, bringing about justice for the families of victims. The superego emphasizes the societal expectations of good and bad behaviour. The investigative officers are expected to serve and protect; this puts them under a lot of pressure and inversely causes stress and anxiety. Furthermore, the trauma they may have experienced during the murder investigation may not be considered. Instead, the focus may be on getting the desired results and solving crimes. As a result, an imbalance in all three components of the human mind can lead to occupational stress at work (Jonyo, 2015, p. 68).

3. Method

3.1. Research approach and selection of participants

The study adopted a qualitative approach because the goal was to explore the lived experiences of purposively selected SAPS murder detectives regarding occupational stressors and mental health. Ten participants, comprising eight ($n = 8$) murder detectives, and two ($n = 2$) employees from the EHWS department were selected. All the participants were purposively selected from a single SAPS station in the Durban metropolitan area. The sample size was predetermined, given that there was a staff complement of 72 officers, inclusive of 25 detectives at the station, where only eight ($n = 8$) were working under the serious and violent crimes section. The eight were responsible for investigating murder cases. EHWS was manned by four employees ($n = 4$), including a social worker, a psychometrist, and two ($n = 2$) pastors. Only two ($n = 2$) EHWS employees, a social worker and a psychometrist were selected, based on the relevance of their scope of work vis-à-vis the focus of the current study.

3.2. Data collection

Data were collected using in-depth interviews to elicit relevant narratives on participants’ experiences on the topic. An interview schedule was used as the data collection instrument to ensure that all the relevant aspects of the topic were adequately covered. The duration of the interviews ranged from 45 to 60 minutes. Participation in this study was voluntary, and no payment or benefits were extended to the participants. Interviews were audio-recorded with the permission of study participants.

3.3. Data analysis

The subjective experiences of murder detectives are presented below. During the interviews, participants described their experiences, reactions to trauma, coping strategies, and knowledge about the support services offered by the SAPS. The study employed thematic analysis to identify and describe how participants in the sample selected viewed trauma as a contributing factor to occupational stress. The analysis was manually done. It is essential to highlight that the participants' comments were not edited to maintain authenticity.

3.4. Trustworthiness

There are four essential criteria to enhance trustworthiness in any qualitative inquiry, which are credibility (internal validity), transferability (external validity generalisability), dependability (reliability), and confirmability (objectivity; Guba, 1981). To ensure credibility, researchers paid attention to negative cases whereby the participants cited negative experiences and viewpoints from others about the topic under investigation; retrieved and presented verbatim quotes from audio recordings, and different members of the research team conducted data analysis to enhance inter-coder reliability (Nyambuya et al., 2021, p. 102). Dependability was achieved through independent co-coding of the data by two researchers (NS & KS), ensuring that the analysis was grounded on the data with supportive verbatim quotes in all the themes and sub-themes presented in the findings. The transferability of the results was ensured through the clear exposition of study participants and providing a nuanced description of the background, methods, and conclusions. To enhance confirmability, the entire research process was documented using audio recordings and field notes, coupled with the active participation of the research team in the process of data analysis.

3.5. Ethical considerations

Ethical clearance for this study was obtained from the University of KwaZulu-Natal's Humanities and Social Science Research Ethics Committee (HSSREC) (HSS/0633/018 M). Gatekeeper permission was obtained from SAPS national and provincial offices. Written informed consent was sought from all the participants. Importantly, gatekeeper permission from the responsible authority did not replace individual consent. Participation was voluntary, and participants were alerted that they were free to withdraw from the study without the fear of negative consequences emanating from taking such a decision (Wassenaar, 2006).

4. Findings

The data generated themes related to trauma contributing to occupational stress among SAPS murder detectives. These were the frequency of murder crime scenes, traumatic nature of crime scenes, detectives' reactions to trauma, and detectives' perceptions of SAPS support services and coping with trauma.

4.1. Frequency of murder crime scenes

South African police statistics indicate an increase in murder cases. Data from the SAPS crime statistics release for 2019/20 showed an increase from 209 to 231 points in Inanda (South African Police Service, 2021a, p. 32). Such an increase contributes to the workload that murder detectives must bear and exposure to trauma through brutal crime scenes. Participants shared details regarding the average number of murder crime scenes they attend monthly.

I attend four to six murder crime scenes per month, and sometimes it gets up to nine (K2).

Similarly, another participant indicated that:

In two days, you can attend around 3 murders and when I'm on call it would be around 6 murders a month and it gets hectic especially around payday, like the 15th and the 30th or 1st, its hectic around those days (K7).

Another participant delved into the matter regarding their work as murder detectives, illustrating the inflow of murder cases in SAPS station under the Durban metropolitan area.

We do calls four times a month, and on average, we attend two scenes per call, so I respond to about eight scenes per month, and that's eight dead bodies. (K1).

Further the following was added:

We have different crime scenes, there is a shift process called a "Call" shift and is when you attend to crime scenes. There are a lot of different crime scenes involved though. You have to work this shift two days a week, it could be weekday or weekend and during the week you can attend 2/3 Murder Crime Scenes a week but during the weekend you can attend up to six murder crime scenes and in a month, I would say, maybe each detective, or let's just say I would attend maybe about 10 murder scenes. Let's not forget that sometimes in one crime scene there might be maybe 3 casualties or four casualties (K6).

4.2. Traumatic nature of crime scenes

This theme discusses the experiences of murder detectives that respond to murder cases. The participants were asked to discuss their experiences related to occupational stress. They described the nature of the crime scenes they attend as mainly being traumatic.

I don't know; I guess we are experiencing the trauma of dealing with dead bodies; when you deal with dead bodies on a regular basis, you end up worrying about the fact that one day you will also die and wonder how you will die if people are killed so brutally (K3).

Consequently, when murder detectives respond to murder crime scenes, they tend to dehumanise the victims and treat them as evidence rather than as humans. Other participants described the traumatic nature of murder crime scenes and indicated that they strive to suppress the impact of trauma after exposure to graphic scenes.

I would say it's very stressful and depressing. For now, I won't say I experience stress, but the scenes we attend do cause a lot of stress that also affects your personal life. It's just overwhelming, and sometimes you come upon brutal crime scenes, but you tell yourself that you just need to switch off when you go home and act as if everything is normal (K6).

Most participants reported that the most traumatic murder crime scenes involve the murder of women, children, teenagers, and those with disfigured or decomposed bodies.

Mostly, cruel cases come back to you. It takes time for you to be able to live with it. At times it becomes normal to see a dead person or someone who has been shot but as I said, if its vulnerable people like women and children it's often very disturbing (K7).

Similarly, another participant concurred and added:

My experiences in working with murder cases relate to cases that you just can't forget easily, and they haunt you for some time. For instance, there was a case where six kids were killed with no mercy and it was traumatizing to see all of this, especially since it involved kids. These kids were butchered and piled up in a bathroom. I become very emotional when it comes to child homicide (K4).

Most murder detectives indicated that murder cases involving women, infants, and children were the most traumatic. One participant corroborated the above and gave the following example:

At one stage, I attended a scene where a 3-month-old baby and her mother was murdered. They were both burnt, and can you imagine attending to such a scene. Remember I also

have children and to witness such brutality, it was very disturbing. The cases that we attend to are, it all comes back to you because you imagine if your child was in that situation (K7).

4.3. Detectives' reactions to trauma

This theme explores SAPS detectives' reactions to trauma when responding to murder cases in the study setting. Participants were asked about the challenges they faced due to occupational stress and murder crime scenes. Their responses depicted different reactions to trauma. One of the participants explained:

One of the participants explained:

Sometimes it's hard to sleep especially when it's dark. I feel as if there's a dead body in the room. I really feel like that especially when I respond to a body that was assaulted, and badly bruised. It's horrible (K1).

The above was corroborated by another participant that explained how attending to murder scenes psychologically impacts detectives:

Attending to murder crime scenes can be pretty traumatizing as some of these murders occur in a very cruel manner, so cruel that you would it will never allow you to sleep peacefully (K5).

Participants admitted that murder crime scenes can be traumatic, citing examples of cases they had worked on and how they responded to their traumatic nature.

The findings also indicated that detectives develop behavioural challenges such as short temper and absenteeism from work. One participant indicated that:

I've also known cases where some members are affected by occupational stress, and you see by the change in their behaviour such as the development of short temper and regular absenteeism (K3).

Another participant shared the following:

Our job is very challenging, and you end up being short-tempered to everyone around you (K1).

4.4. Detectives' perceptions of SAPS support services

This theme is defined by the participants' understanding of the available SAPS support structures. It explores whether detectives were familiar with support services offered by the EHWS. Since the primary focus of the current study was on occupational stress related to the trauma experienced by murder detectives, it was critical to capture their perceptions of SAPS support programs. The perceptions of SAPS murder detectives on support structures were quite comparable. There was a clear understanding in participants' comments on what support services entailed, demonstrating a thorough comprehension of the topic.

The ability to identify the components of EHWS indicated a deeper level of understanding of the available support services. Although participants were aware of accessible support services, most did not see them as effective. Some participants indicated that immediate support was not offered. An example is cited below:

Yes, there are chaplains, psychologists, and psychiatrists. If you go to them, sometimes you don't find them or if you do find them, they don't really give you any immediate help because they often book you for a later date. After sessions with them, they don't even give you any feedback (K6).

On the contrary, some participants' reflections on the effectiveness of SAPS EHW support structures were positive. They indicated that EHWS was critical to assisting officers affected by occupational stress.

They are very effective in dealing with occupational stress. They support our workers and help them deal with stress; we have had cases of people who came back rejuvenated and stress free from these programmes after going in very distraught and in critical situations (K3).

Most detectives indicated that they were not utilising SAPS support services. The following is an example:

I heard that they tell you to talk to others and not bottle up about the scenes that you have been exposed to but in reality, that is not helping, just talking about traumatic cases that you have been exposed to won't change the psychological damage that has been already done. We need solutions to our psychological being (K2).

Further, another participant shared the little knowledge they had of the SAPS EHWS. They stated that:

There is a department that deals with stress related matters within the members of the SAPS, I'm not sure about the name of that department because I have never been there, and I don't know if it's helping or not, but I have asked people who have been there they never get assisted with the trauma they have (K6).

4.5. Coping with trauma

Various coping mechanisms were identified.. The comment below shows a senior officer's level of support in suggesting adaptive coping methods to detectives responding to murder cases.

One needs to evaluate themselves and not think they are too strong which is why I always stress that they take leave so they can rest their minds and body (K3).

One participant identified drinking alcohol as a measure to cope with the stress of exposure to traumatic crime scenes.

Most of us do anything to cope, sometimes we meet over drinks and talk things over with other colleagues, that's what I do to cope, it does help me to forget about some incidents, but I never drink during work hours (K5).

Participants shared their perceptions of seeking support from the available SAPS support structures. The following was said:

We were once told that after three months or so we would have sessions where we see therapist or have some form of programme that helps you to distress but that doesn't happen, the only thing they care about is your work and not your mental state (K7).

Most detectives were aware of the support services within SAPS, but the concern was the lack of time to utilise the programmes due to high workloads. For example, one participant stated that:

There are programmes, but we don't get time to attend because if you leave to attend support services your work will pile up so what's the point? (K1)

On the contrary, EHW practitioners indicated that they were offering programmes to murder detectives to help them cope with the nature of their work.

We have proactive programmes where we do inductions and also provide more information as to how detectives can cope with stress at work while holding group works for those that

have similar cases thus creating a comfortable environment while we empower them to cope better on their own selves and not depend on people, so we equip them most importantly (EHWS K1).

EHW K2 explained further how the types of programmes offered by the EHW:

We do hold pro-active workshops preparing them for the environment they work in and how they must cope in their work environment. We have programmes such as anger management, suicide prevention, stress management and we do a follow up, and we also do referrals. When we have workshops we go there as a group, with social workers, psychiatrists because some questions that may pop up may need a social worker or a psychiatrist, so we do it as a team. Listing one example, if any of our members witness a suicide or murder scene, we have a program called DBV. How it works is we group the members that were present in the scene within 72 hours and have them talk about their experiences so that they can get the help they need and that they don't isolate themselves. We give them coping mechanisms (EHWS K2).

After being exposed to trauma, detectives may actively engage in avoidance behavioural coping methods to escape from reality. As a result of their exposure to stress and trauma, police officers' would often resort to avoidance behavioral coping techniques such as alcohol consumption, absenteeism, and even substance abuse.

5. Discussion

The purpose of this study was to explore murder detectives' occupational stress with specific reference to trauma. A substantial body of research has demonstrated that trauma and police work are strongly connected (Baker et al. (2021, p. 59); (Gumani, 2017, p. 439); (Steyn & Klopper, 2020, p. 288). It is vital to comprehend the nature of trauma among SAPS murder detectives. Moreover, the literature suggests that psychologically stressful elements of crime scenes lead to the development of trauma; therefore, this research has direct relevance to the body of knowledge regarding police mental health in that the participants' views were elicited regarding their experiences in murder cases investigation and trauma. To understand the experiences of murder detectives on occupational stress, the workload of murder detectives, the traumatic nature of crime scenes, detectives' reactions to trauma, SAPS support structures and strategies for coping with trauma were identified. Participants shared details regarding the average number of murder crime scenes they attend monthly. The cases ranged from 6 to 10 per month and they attend calls at least two times a month.

Participants in the current study reported some form of exposure to violence or traumatic events, with such exposure being associated with undesirable psychological outcomes in most cases. The study's findings indicated that graphic crime scenes and trauma were related to occupational stress among the police. These include murder crime scenes that involve the murder of women, children, teenagers, and those with disfigured or decomposed bodies. Participants averred that cases involving young children were the most difficult to deal with. Masson & Moodley, 2020, p. 181) similarly found that exposure to crime scenes involving children who had been battered and killed was traumatic. The findings from this study are consistent with results from previous studies that suggested that police officers were often exposed to many traumatic events (such as violence and or even death), which ultimately lead to occupational stress (Wassermann et al., 2019, p. 95; Gumani, 2017, p. 437; Steyn & Klopper, 2020, p. 286; Perkins, 2016, p. 52). This study fills a significant research gap by identifying trauma as a contributing factor occupational stress among murder detectives.

Participants revealed that they were experiencing behavioural challenges due to trauma. This includes anger issues, aggression, and a short temper. This statement is supported by the findings by Lawhorne-Scott & Philpott, 2012, p. 81). It was found that the challenges that police face as a result of occupational stress and exposure to trauma was associated with having short temper and anger issues. Similarly, Boshoff et al. (2015, p. 251) found that a short temper is associated with

anger issues. The findings from the current study revealed that anger issues among SAPS murder detectives emanate from the stress associated with police work.

Furthermore, different reactions to trauma were identified in the study which included flashbacks and insomnia. This has been affirmed in the study conducted by Boshoff et al. (2015, p. 252). It was reported that police officers would usually develop different stress reactions right after being exposed to graphic and dangerous incidents. These include flashbacks, insomnia, and PTSD. Participants also indicated that they tend to dehumanise the victims. They normalise the brutality and violent nature of the scenes they respond to. However, this is similar to Boshoff et al.'s (2015, p. 253) findings which indicated that detectives had accepted dealing with dead bodies as part of their job that they could not change, thus when responding to murder crime scenes, they would dehumanise the victims and treat them as evidence and not as human beings. Boshoff et al. (2015) described this as a process where police numb their emotions, therefore, murder detectives avoid using their emotions when confronted with graphic and traumatic crime scenes.

The findings that murder detectives use both formal and informal coping mechanisms. They tended to dissociate themselves from trauma through denial. Masson & Moodley (2020, p. 184) found that police officer were suffering from trauma whilst investigating murder cases, however, they would suppress trauma as a temporary strategy to deal with stress. The informal and maladaptive coping mechanisms that were identified include avoidance behavioural coping techniques such as absenteeism and alcohol addiction. Wassermann et al. (2019, p. 98) also found that some coping strategies used by police officers were maladaptive in certain situations. Extant literature suggests that drinking with colleagues after work to alleviate stress and trauma is widely accepted among police officers (Mushwana et al., 2019:2; Warren, 2015, p. 53). Formal coping mechanisms that were identified included utilising SAPS support structures and taking vocational leave to recuperate. The existing literature suggests that seeking psychological support can reduce stress (Civilotti et al., 2021, p. 2). Using adaptive coping strategies such as counselling and seeking support assists in alleviating stress and trauma (Mushwana et al., 2019, p. 2).

SAPS murder detectives' perspectives on support structures were similar. Their comments demonstrated an understanding and awareness of the SAPS support structures. Their remarks showed that they were aware of and comprehended the SAPS support structures. The findings also indicated that there were support services available to officers that included social work, spiritual and psychological support. The police were aware of these services; however, they rarely utilised them or find them compelling. To deal with these challenges, officers often found alcohol and socialising with their colleagues as another way to cope with stress (Warren, 2015, p. 105). In other instances, the police would tend to try and suppress their feeling and thoughts, and they would dissociate themselves from trauma through denial. Lack of utilising support services was because there is work overload and detectives felt as if they did not get assistance as immediately as they would like to. Therefore, it is essential that support services are tailored specifically for murder detectives. Psychological well-being continues to be a challenge amongst the police and requires reviewing the support structures and providing sufficient support to the police (Boshoff et al., 2015, p. 244; Wassermann et al., 2019, p. 92).

6. Conclusion

The objective of this study was to explore trauma as a contributing factor to occupational stress among detectives working with murder cases. The findings will aid researchers, policymakers, and interventionists in addressing issues relating to murder detectives and occupational stress. Exposure to traumatic murder crime scenes was identified as a critical factor causing stress among detectives. Most detectives did not consider that provided support structures were effective. Therefore, SAPS support structures should invest in promoting their department so that detectives can gain more knowledge of psychological programmes in place and make use of them. The current findings of occupational stress among detectives demonstrate the critical importance of facilitating early interventions and support for officers exposed to traumatic crime scenes. Addressing the needs of murder detectives will ultimately improve their sense of

commitment and motivation toward their work. Furthermore, interventions should be implemented to prevent and reduce stress and to initiate coping mechanisms for murder detectives. To guarantee that they effectively recover from trauma and stress, it is recommended that detectives prioritise their mental well-being through the use of adaptive coping mechanisms.

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Data availability statement

Data analyzed in this study were a re-analysis of existing data, which are openly available at the university repository <https://ukzn-dspace.ukzn.ac.za/handle/10413/18767>

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