

This presentation details sensitive topics

The presentation will detail crime scene details, mental health and wellbeing topics such as PTSD.

I do not want to offend anyone however I believe this subject is important and needs to be highlighted.

I will not be offended if you leave during the presentation if you find the content upsetting.

I invite and welcome questions from you.

If you wish to contact me after, please do: **Rebecca.jones1@aru.ac.uk**

The effects of trauma exposure on Crime Scene Investigators; is it time for a new approach?

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About me

- Rebecca Jones- Course leader for Crime and Investigative Studies at ARU, Cambridge (Senior Lecturer Practitioner).
- CSI for 15 years.
- Diagnosed with PTSD during the last few years of my CSI career.
- Mum to a 5-year-old.
- Also a trained and qualified Canine Behaviour Practitioner!

The research area of trauma exposure

Lived experience

Colleagues

Police Officers-
research already
conducted and
highlighted in the
media

Some research
around first
responders

Nothing solely for
CSIs recently

The journey started

My experience

- Started CSI Career after completing BSc (Hons) Forensic Science.
- Based around the home counties stationed in Luton and various other stations in Beds and Herts.
- Attended numerous crime types, particularly major crime scenes.
- Exposed to numerous traumatic scenes.
- Mat leave.
- Returned to role when child was 10mths old.
- Attended a SUDI of one day old baby.
- Within a month of this incident, I was diagnosed with PTSD.

The Incident- tip of the iceberg

- WARNING- some sensitive and upsetting details will be given.
- It must be noted that this is an individual experience and as such the thoughts and feelings are from my viewpoint. The account is based on the incident that triggered a diagnosis of PTSD involving a Sudden Unexpected Child Death (SUDI).
- Requested to attend a SUDI, one day old baby deceased in A&E.
- Only available CSI.
- Received update that there was suspected sexual abuse involved.
- Attended with a Level 1 CSI (in training).
- Arrived at A&E – briefing given.
- Liaised with Rapid Response Nurse.
- Sexual abuse ruled out.





The Incident-continued

Processing of the body completed.

Attendance to home address.

Exhibits seized.

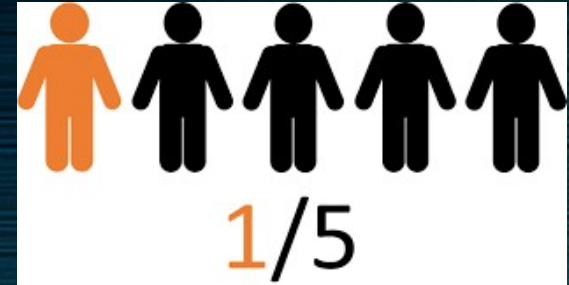
Return to office.

Reports written up.

Exhibits placed into appropriate storage.

Carried on with shift and other jobs.

The start of the research



- New career in academia.
- In recent years there has been progressive movement with Police Officers and mental wellbeing in particular PTSD.
- Dr J Miller -research focussed on PTSD and Police Officers, the research and findings made national news, the statistic of 1 in 5 Police Officers were suffering from PTSD or exposure to traumatic events within the last 4 weeks of the study.
- Dr Miller declared this as a 'clinical and public sector crisis (University of Cambridge n,d).
- Insight of speaking with colleagues.
- Gap in knowledge identified –lack of recent research for CSIs.
- Undergraduate projects- well received by students.
- Survey based projects – surveys conducted through a gatekeeper to various forces and via social media platforms- Twitter and LinkedIn.
- Good response from CSI field.

Previous research

- One of the biggest studies of CSIs undertaken by Rosansky (2019) had 225 participants in the online questionnaires, Rosansky et al placed the PTSD symptoms into groups, 50% of the participants had seven symptoms of PTSD in the month prior to the survey, 9.3% had checklist scores that were suggestive of PTSD, these symptoms will not have qualified for a diagnosis of PTSD but are indicative of psychological distress along with potential occupational impairment after the exposure of traumatic stimuli.
- A further study conducted by Nho and Kim (2017) of 181 CSIs 45 (19.9%) were deemed high risk PTSD.
- Another survey of CSIs conducted by Chapman (2005) whereby 52 respondents completed the questionnaire. This survey was designed to identify if there were programmes of psychological care in place, the paper that resulted from the survey suggests that there were programmes in place, but CSIs were rarely included in these.

- 84 responses (limited to 100 due to GDPR)
- 20 questions
- The research is ongoing and progressive, however from the first surveys completed (Knights, J 2020 Appendix 2) by CSI personnel and data from the second survey (Michea, K 2021) there are common themes that have been identified.

Results from first surveys



Survey 1 – selected questions

- Q1 ‘Have you ever attended a crime scene and felt unable to carry out the work needed due to the distressing nature and the effect this had on you?’
- Q2 ‘Have you ever tried to avoid incidents that you know will affect your psychological wellbeing?’
- A further finding from the first questionnaire (Knights, J 2020) was that 29% (24/84 respondents) of the participants had sought psychological health treatment due their occupation, of the 29%, 5% had suffered from traumatic stress and been absent from their employment due to this.

Question	Result	Responses
1	12%	84
2	33%	84

Survey 1 – selected questions continued

- A follow-on question was also asked to those that answered 'yes' to seeking psychological help, to see if they were referred or self-referred for help and support; 42% were referred and 58% sought self-help.
- Further to this the participants were then asked if they had spoken with a member of staff regarding their psychological wellbeing, 52% (12/24 respondents) of participants confirmed they had.
- Offloading to colleagues- has austerity cuts reduced this?
- Mendel et al (2017) supports this research by stating that police forces have received cutbacks, these cutbacks and collaborated forces means that there is a change in usual working relationships, Mendel et al (2016) continue that staff had to travel further distances resulting in staff becoming more isolated and therefore some CSIs may not see their colleagues to offload too.

Seeking help	Result	Responses
Occupational referral	42%	10/24
Self Referral	58%	13/24

Survey 1 – selected questions continued

- The next question asked ‘if the participants felt that receiving a wellbeing check every six months or yearly would be beneficial?’
- 85% of the participants agreed that it would be beneficial
- The interesting statistic here is the 15% that answered ‘No’

Seeking help	Result	Responses
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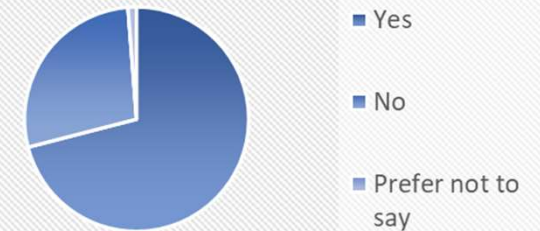
Results from most recent surveys

99 responses (limited to 100 due to GDPR)

The opening questions to this survey were asking CSIs if they felt anxiety before, during and after attending crime scenes, 73% felt anxious before attending, 69% felt anxious at a scene and 34% still felt anxious after the scene; anxiety is negatively correlated to 'performance effectiveness' supporting that anxiety is associated with less effective performance and reduction in job confidence, (Tehrani, 2010).

The following question was asking the participants if their anxiety kept developing after attending scenes, 29% stated 'yes' and 23% of those participants sought professional support. One interesting statistic is that 89% of the participants are aware of the support that is available to them.

Have you ever felt anxiety while attending a crime scene?



Results from most recent surveys

Following on from the last statistic showing more awareness of support-why?

Subject being raised with Police officers and in the media, the counter affect:

Police forces have responded with more visible policies and procedures around mental health and better signposting is in place

College of Policing (2021) has a section dedicated to wellbeing comprising of trauma in policing, psychological risk management and various guidance documents.

Oscar Kilo is the home of the National Police Wellbeing Service that work closely with College of Policing, Fire and Rescue services, National Police Chiefs Council, and Home Office

Oscar Kilo have most recently introduced Wellbeing and Trauma support dogs project to support the wellbeing of Police Officers and staff.

The survey continued with 41% of participants that have used the support in place, with 29% of those stating that it helped them.

The participants that had sought wellbeing support were asked what they would do to improve the services offered, this was an opened ended question.

Common themes:

Wellbeing screenings needed to be mandatory, regular, and consistent

Responses from line managers were inappropriate, ineffective and that better training and awareness was need by line managers

Education and awareness of the signs and symptoms needed to be improved

Organisations that are available to emergency services and personnel such as PTSD999, PoliceCare Uk, PTSDcare.org.uk, Policecare.org.uk

Results from most recent surveys

Common Themes



Participants were asked if they were diagnosed with PTSD, 7% responded 'yes' and of these 7% there were 5% that left the role of CSI.

For those that returned to work after a period of absence with a diagnosis of anxiety or PTSD they were asked about their return to work and if there were any improvements that could be made

Common themes:

Reflective of the lack of support from line managers and senior managers

Reducing the stigma associated with mental health diagnosis

Lone working should be reduced

Personal contact giving insight into further themes around compassion fatigue and desensitisation

Results from most recent surveys



Would a wellbeing check be beneficial?

Participants felt that receiving a wellbeing check every six months or yearly would be beneficial, 85% of the participants agreed that it would be beneficial, the 15% that said 'no', this could be for a number of factors, one being that those that said 'no' may have been in service for a length of time that they view the trauma they are exposed to as normal and are desensitised.

The participants that had sought wellbeing support were asked what they would do to improve the services offered, this was an opened ended question, however the common themes were that wellbeing screenings needed to be mandatory, regular, and consistent.

Should there be regular mandatory check-ups for the mental health...



■ Yes
■ No
■ Prefer not to say

Unknown how many forces distributed to their staff

Unknown what forces due to anonymity

Mistrust of confidentiality

Stigma/ Police culture

Lived experience- element of bias

Limited number of participants

Limitations of the research

What is happening now?

There has been recent developments and the issues around trauma exposure and the effects of mental health is gaining momentum.

The most recent paper: Stress and Support in the workplace: The perspective of forensic examiners (Almazrouei, M, Morgan, R; Dror, I June 2021).

Some correlations in the paper are inline with the results I have from the surveys conducted to date:

Interaction between managers and staff can be a source of stress.....the higher the level of perceived management and supervisory support, the lower the level of workplace stress.

This paper also explores the factors that affect decision making due to stress factors and levels.

Research conducted in 2018, The role of psychological screening for Emergency service responders (Tehrani, N; Hesketh, I) , this research is targeted at Emergency Service Responders(ESRs) focusing on three categories- frontline responders, those exposed to psychological hazards (child abuse, DV, Firearms, Family liaison) and those that respond and specialize with major disaster.

The same research is one of the Literati Lookback campaign winners, looking at the impact of this research.

What is happening now?

The review of the National Police Wellbeing Service identified that psychological screening is beneficial and this was extended to more roles and police personnel such as FLOs, Firearms Officers, Collision Investigators and CTO's.

My research has also reflected that this would be a welcome step forward for CSIs.

The evidence-based approach for practical policing is relied upon to put theory into practice.

There is still a gap whereby CSIs have not been included in this notion in most Police forces, however some forces are being proactive and have introduced screening, or another intervention scheme to check on wellbeing.

There is also some thoughts that psychometric testing should be introduced to those applying for the role of CSI.

Moving forward

- There is more awareness within Police Forces.
- There are services such as Oscar Kilo (doing a fantastic job) supporting forces with various approaches including visits to forces, Wellbeing dogs, training and podcasts to name a few.
- Various organisations such as PoliceCare Uk, PTSD999, PTSD Education, Educate Police on Mental Health.
- Managers are receiving training about awareness and 'spotting signs'.
- However, most forces occupational health units are understaffed particularly with psychological wellbeing practitioners.
- Self referral or managerial referral- optional not mandatory.



Moving forward

- I am part of the working group for the FCN wellbeing strategy whereby I can share the insights from the ongoing research.
- Still conducting this with CSIs and also now with Fire Fighters.
- One area of interest is if the effects of anxiety and in particular PTSD affects decision making and the introduction of bias at a scene examination.
- This is an area of growing interest as the FSR has stated that all Forensic Science Examiners should be impartial- is this possible if mental wellbeing issues are affecting that person in their role?
- Particularly if the individual is not aware that they may be affected by their role?



Moving forward

- With regular screenings used as a preventative measure rather than reactive response may address the signs and symptoms resulting from exposure to trauma and compassion fatigue.
- The latest research by The Chartered Institute of Personnel and Development (CIPD) has reflected on the Well-being at work survey and found that managers play a major role in health and well-being, however the survey has also revealed that only 50% of managers are trained to manage stress and less than a third are confident to discuss sensitive areas about mental health and to signpost individuals to sources of help.



Moving forward

- Another theme that reflects the CIPD research from my research was that the responses from line managers were inappropriate, ineffective and that better training and awareness was needed by line managers.
- Participants were asked if they were diagnosed with PTSD, 7% responded 'yes' and of these 7% there were 5% that left the role of CSI.
- For those that returned to work after a period of absence with a diagnosis of anxiety or PTSD they were asked about their return to work and if there were any improvements that could be made, the common themes from this question were reflective of the lack of support from line managers and senior managers and reducing the stigma associated with mental health diagnosis.



Moving forward

- The area of compassion fatigue has also been raised in the responses to the open-ended questions, gap in knowledge that needs to be researched further, could be mistaken for anxiety. Missed opportunities to use preventative measures before an individual reaches a crisis or burnout that could make them vulnerable to PTSD.



Moving forward

“There comes a point where we need to stop pulling people out of the river. We need to go upstream and find out why they’re falling in”.

Desmond Tutu



- The topic area of trauma effects needs more in-depth exploration to steer a working solution for a mandatory screening programme to be trialled within several Police forces specifically designed for the CSI role.
- Research conducted looking at coping strategies that are adopted by those affected as this could give some direction for training packages to be adapted or updated that are in existence.
- A training programme that is mandatory for all those that manage CSI staff, this needs to have regular participation and updated yearly refreshers so that current services and strategies are available to those managers.

Recommendations

- This will also enable individuals being signposted early to the correct service and to break down the taboo of mental health by having early conversations.
- A tool such as a weekly log to record scenes or incidents that trigger the stressors and give a more tailored approach to that individual and potentially give early intervention to that individual.
- Reassurance in regard to the confidentiality that will be maintained should an individual seek support from the services in force.
- Lastly is it plausible to recommend psychometric testing to those applying for the role of CSI, this is an area that needs exploring and researching to see if there would be a benefit to this. These tests may give indicators that a certain personality and character type are more susceptible to anxiety and PTSD.

Recommendations

Conclusion

The aim of the research was to determine the effects of exposure to trauma on CSIs, the data that has been reviewed from the surveys conducted has reflected the research conducted previously and is also in line with similar research conducted amongst Police officers.

There is stigmatism present with the Policing culture and mental health, however what is encouraging from the data is that there is more awareness of the support in place for individuals.

Indication that there is a change happening within the culture as this must be signposted to staff so therefore there are conversations taking place and a better awareness of mental health.

Conclusion

The overwhelming point from the research is that 85% of the participants in the latest survey agree that there should be mandatory check-ups or screening for CSIs just like other specialized police roles have.

Beneficial to CSIs but also to the police forces to reduce stress induced illness accounting for absence and termination from the role.

It is hoped with this research that the information highlights the issues with CSIs in particular, the area of PTSD has been explored within policing however the area of trauma exposure and the role of CSI is under researched.

The recommendations will hopefully be utilised, the Forensic Capability Network has formed with the aim of looking to work together nationally to share knowledge, improve resilience, efficiency, quality and effectiveness, it is now a prime opportunity to engage with forces nationally to have a consistent approach to a screening method that can support and assist those in the CSI role.

“There’s no point in being committed to a vision if you’re not equally committed to making it a reality”.

Tim Fargo

Thank you for listening