From Strength to Strength:
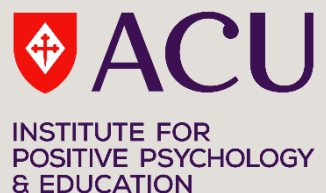## Furthering Fresh Futures for NSW Police, Psychological Strengths, Wellbeing and Retention

In collaboration with

NSW GOVERNMENT

NSW Police Force

ACU

INSTITUTE FOR POSITIVE PSYCHOLOGY & EDUCATION

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Executive Summary

The NSW Police Force (NSWPF) is investing in research to help improve the well-being of police officers and enhance their resilience to stress and trauma. This research identifies the issues that are most important to NSWPF staff while also highlighting current organisational strengths that can be built upon to further promote wellbeing amongst staff.

Policing is complex and difficult work. The daily stresses of police work have been well documented (Henry, 2004; Violanti & Paton, 1999; Violanti, 2014). Officers are regularly exposed to trauma and violence, as well as stressors such as shift-work and long hours (Violanti, 2014). What is less understood, however, is the degree to which the working environment of the NSWPF can mitigate or exacerbate existing stresses of the job. The research described in this report attempts to explore this question. It utilises both quantitative and qualitative datasets to identify organisational factors associated with improved wellbeing, functioning and retention within the NSWPF. Three studies form the basis of this report:

Study 1: A pilot qualitative interview study exploring factors associated with police wellbeing.

Study 2: A qualitative interview study exploring experiences of needs satisfaction and frustration in the NSWPF.

Study 3: A quantitative survey identifying factors associated with wellbeing, mental ill-health, and retention of officers.

We first summarise the results of Study 1, a pilot study featuring interviews of 40 participants (26 males and 14 females) of varying levels of experience, rank, and age. The aim of this study was to learn more about officer motivations for staying or leaving the NSPWF, as well as exploring factors associated with the development of poor mental health amongst staff, and protective factors or coping mechanisms associated with improved wellbeing. Participants were drawn from six Local Area Command (LAC's); three from urban LACs within the Sydney metropolitan area, and three from regional/rural areas. The research was further informed by an open-ended survey question completed by 338 officers (out of 1090 total respondents) across these commands. The pilot survey and the interviews were conducted in 2014.

Results from the pilot study provided valuable insights into the wellbeing of staff. Two further studies were commissioned to expand on the pilot study by identifying a theoretical framework to explain how the NSWPF could better support officer needs in the workplace. Study 2 (n = 45) built on the results of Study 1 by exploring officer needs satisfaction and frustration within the NSWPF through the lens of Self-Determination Theory. Qualitative data provided numerous accounts of needs satisfaction and frustration. Thematic analysis provided support for the notion that needs satisfaction was associated with accounts of positive subjective wellbeing, whilst needs frustration was associated with reports of poorer subjective wellbeing in interviews. Study 2 results also highlighted differences in wellbeing reported across career stage and position (e.g., new-recruit, 20-year veteran, restricted duties officer, commanders).

Study 3 utilised quantitative data taken from NSWPF staff (n = 5,269) and new-recruits (n = 199) to identify key factors associated with police wellbeing and mental health. Study 3 sought to explore whether qualitative data from the earlier studies were supported by statistical analysis. Our results

showed that more than half of survey participants reported clinically significant levels of psychological distress; however, wellbeing and general life satisfaction average scores were only slightly below population norms. Despite high levels of psychological distress amongst participants (>60%), only small numbers of NSWPF staff reported engagement with available support services. Results showed that there is substantial variation in wellbeing across commands, suggesting that factors within commands and work environments could be critical in understanding why some police officers experience higher levels of distress than others doing similar roles.

As predicted, basic psychological needs satisfaction appears to be positively associated with wellbeing and life satisfaction, but negatively associated with psychological distress, PTSD symptoms, restricted duties and long-term sick leave. Individual factors such as mindfulness and psychological flexibility appear to also be related to positive wellbeing, and negatively associated with restricted duties and long-term sick leave. Supervisory and social bullying was also associated with long-term sick leave. Overall, results suggest that satisfaction of psychological needs could be a precursor for the promotion of wellbeing amongst the police force.

RECOMMENDATIONS

Our recommendations are described in the report and summarised here. Recommendations were informed by Self-Determination Theory (SDT), and grounded in the self-report data of police officers:

Factors Supporting Psychological Health and Wellbeing

A. ***Increase Awareness and Effectiveness of Current Support Services***– Our survey data shows that despite over half of participants reporting clinically significant psychological distress, smaller numbers of officers report engagement with support services. We suggest that NSWPF staff be consulted in developing initiatives to improve awareness of services, but also on how to best shape current services to ensure staff needs are met.

B. ***Increase Factors Associated with Psychological Health and Wellbeing*** – Basic psychological needs satisfaction is correlated with wellbeing. Other protective factors included mindfulness, psychological flexibility and physical activity. Strategies designed to enhance wellbeing may benefit from targeting these factors.

Supporting Autonomy

A. ***Empowering Officers to Act with Agency –*** Our data shows that officers feel frustrated when they are not given the opportunity to make choices and contribute to decision making processes. Reducing micro-management, allowing officers to provide feedback and contribute to meaningful change is likely to enhance morale and officer wellbeing.

B. ***Allowing Greater Flexibility of Work*** – Officers who feel their rosters are fair, predictable and flexible report a greater sense of wellbeing. Flexibility of work includes fair allocation of leave, shift work, flexible transition from leave, and allowing for part-time work schedules. Our data indicates that flexibility of work is particularly important in maintaining healthy family relationships – a key factor in promoting officer wellbeing.

C. ***Internalisation of Organisational Values and Goals*** – When organisational values and goals are internalised by officers, officers report a greater sense of commitment to their

roles. The NSWPF can promote congruence of personal and organisational values by encouraging management to link decisions back to values rather than disseminating arbitrary rules. Facilitating discussions about officer values and creating opportunities for officers to pursue professional interests in line with values may enhance motivation.

Supporting Competence

A. ***Enhance Competency of Management –*** Our data suggests that officer wellbeing is closely linked with the perceived quality of management. Qualities of competent managers include appropriate practical experience, people skills, and emotional intelligence. Officers value managers who support proactive policing as opposed to meeting arbitrary targets based on statistics, and those who are genuinely invested in the wellbeing of officers on the frontline. Evaluation and improvement of supervisor training and selection may help to assist in achieving these goals.

B. ***Reinforcement of Successes and Strengths*** – Officers report that receiving positive feedback about their successes and acknowledgement of strengths helps them to feel competent and motivated. In contrast, officers who do not feel acknowledged are likely to feel cynical and unmotivated. Supervisors can enhance officer competency by providing regular, specific praise to officers who achieve, but also for those who exhibit continued dedication to the team.

C. ***Promoting Fair and Reasonable Assessment*** – Some officers shared concerns that the current promotion system was unfair and favoured individuals who lacked people skills and policing experience. Officers also reported they felt the promotion system was unnecessarily stressful. Accountability of officers was another concern – primarily that the current complaint system provided excessively harsh punishments. Evaluation of promotions and complaints systems that consults officers may be useful in addressing contexts that thwart psychological needs.

D. ***Fostering Efficiency*** – Officers reported they flourished under conditions that promoted efficiency but struggled with excessive paperwork which left many officers feeling overloaded. Adequate resources and training for officers is also likely to enhance officer wellbeing and performance. Reducing unnecessary administrative tasks may minimise feelings of burnout and stress amongst staff.

E. ***Promoting Manageable Workloads*** – Officers report that they feel less burnt out when they have manageable and fair workloads*.* This appears particularly important for General Duties officers who are regularly exposed to trauma. Officers suggested that rotating between high and low intensity roles could assist in mitigating the effects of burnout. New-recruits may also benefit from reduced intensity of study load during training and as they commence full-time work in the force.

Supporting Relatedness

A. ***Encouraging Supportive and Respectful Working Relationships*** – Our data shows that the quality of officer relationships is critical in fostering wellbeing. Officers report they do their best when they feel supported by those around them, and when they are treated with respect and fairness. Some officers felt that discrimination, mental health stigma, racism,

and favouritism made it hard to feel connected with other staff. Strong organisational policies regarding bullying and discrimination may be useful in tackling these issues. Management can also model prosocial work environments where mateship, comradery, and respect are rewarded and demonstrated by senior staff.

B. **Communicating that Management Cares** – Officers reported that it was important to feel genuinely cared for by senior leadership. Personal check-ins as opposed to automated responses following incidents may be useful in assisting officers to feel cared for. Officers also appreciated small gestures such as commanders and supervisors knowing their names or saying hello in the station.

C. **Enhancing Organisation Level Support** – Our data shows that organisational level support can assist in enhancing feelings of connectedness. It is critical that wellbeing programs such as the Employee Assistance Program counselling (EAP) and WellCheck support are reliable and effective. Awareness of these services is important, and so is tailoring of staff support (e.g., providing specialist supports to General Duties officers who are regularly exposed to trauma). Early intervention could help to prevent crisis further down the track. Regular consultation and feedback from officers may assist in ensuring organisation supports are meeting the needs of officers.

D. **Foster Support from Outside the Force** – Officers who receive support from outside the force are less likely to feel isolated. Promoting opportunities for staff socialising was reported as helpful for officers. The organisation should also be attentive to the link between mental ill-health and family functioning. Helping families understand the impacts of trauma and policing on wellbeing may help families to better respond to their loved ones' needs during times of stress. Likewise, developing work schedules that support work-life balance may reduce family stress and conflict caused by demanding and unpredictable schedules.

E. **Encourage Clear and Open Communication** – Our data shows that clear and open communication between colleagues and from management to officers is essential in maintaining good working relationships. Officers also need to be encouraged to share concerns and feedback early on. To do this, it is important that management are open and receptive to feedback.

This report synthesises the results from the above research, and provides evidence-based, theory-driven recommendations for the NSWPF. Results suggest that optimising the contexts in which basic psychological needs are satisfied and minimising the extent to which they are thwarted will yield the benefits of a healthier workplace.

Professor Rhonda Craven

Rhonda Craven

UNDERSTANDING WELLBEING

*We see record numbers of officers leaving the NSW Police Force with significant work related injuries, which continue to disable them post-employment and prevent them from ever working in a meaningful way…**a fresh approach needs to be considered.** (PANSW, 2011)*

Over the last decade, the NSW Police Force (NSWPF) has become increasingly concerned that record numbers of their employees take extended medical leave or exit the police force due to psychological stress and trauma. Research has shown that over 80% of those taking medical leave do so primarily for psychological reasons, and at least 80% of that number will experience partial or permanent injury and medical discharge from the police force (PANSW, 2011).

Most personnel (98.4%) exit the NSWPF via medical leave, primarily due to PTSD (NSWPF, 2011). In addition, research by Police Association of NSW (PANSW) and the Safety Command found that more than 70% of all claims relate to 'internal issues', including interpersonal conflict and poor human resource management (PANSW, 2011). A significant proportion of new recruits leave within the first five years of service, presenting concerns for the retention of a new generation of police officers.

There is a belief amongst police officers that there has been a significant increase in the number of officers suffering from psychological and other injuries who remain within the organisation. This places great stress on the organisation to find non-operational positions for those who are injured or ill for a long period of time, or those who are medically found to have reached 'Maximum Medical Improvement' (MMI). Following a review of the organisation by former Assistant Commissioner Peter Parsons in 2011, the New South Wales government accepted a recommendation that each operational command maintain 90% of staff who can be deployed to operational duties. Again, anecdotal evidence indicates that, due to increases in officers suffering illness and injuries remaining within the organisation, in many commands operational level is not currently being achieved.

Internal issues, such as interpersonal conflict, are a significant factor in medical leave claims. The NSWPF acknowledges that the occurrence of internal issues can be minimised, as stressors that arise from policy/practice within the organisation can be addressed through organisational approaches that support psychological empowerment and autonomy (as defined in Self Determination Theory).

There is little control over police officers' exposure to acute stressors that arise as part of their duty. However, we can identify the organisational factors that help staff develop characteristics that enable them to become more resilient and that empower them to have sufficient autonomy at work, find their job meaningful, feel supported by the organisation and their colleagues, and believe that they actively contribute and have an impact both as police officers and employees of the NSWPF.

PSYCHOLOGICAL NEEDS SATISFACTION AMONGST POLICE

Ryan and Deci's (2000) Self Determination Theory (SDT) posits that there are three basic psychological needs that humans require for optimal wellbeing, motivation, and engagement. These basic needs are: 1) **Autonomy**; 2) **Competence**; and 3) **Relatedness**. Critically, SDT proposes that when these psychological needs are either not supported or are thwarted within a social context, there will be a corresponding deterioration in wellbeing, engagement, and performance.
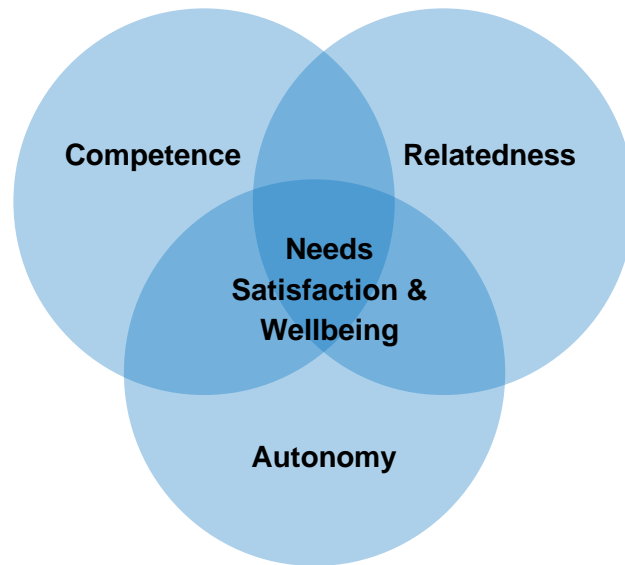
Figure 1. SDT Basic Needs. Psychological Needs Satisfaction and wellbeing stems from the satisfaction of the three basic psychological needs: 1) Competence; 2) Relatedness; and 3) Autonomy.

In this report, **autonomy supporting contexts** were understood as any context that allowed opportunities for officers to feel a sense of choice in their own life, where officers could endorse their actions as freely chosen, and/or situations in which officers reported they were acting in harmony with their own values and goals. **Competence supporting contexts** were understood as any contexts that allowed officers the opportunity to experience a sense of mastery and control in their day-to-day lives. Finally, **relatedness supporting contexts** were understood as contexts that allowed individuals to feel a sense of connectedness and belonging with others.

It is important to clarify the specific meaning of autonomy within the context of policing:

> "*According to the SDT formulation, a person is autonomous when his or her behaviour is experienced as willingly enacted and when he or she fully endorses the actions in which he or she is engaged and/or the values expressed by them.*"

- Chirkov, 2003

In practice, this means that police personnel can fully and willingly endorse following the rules outlined by the NSWPF and the commands of superior officers while also operating autonomously. That is, officers can be intrinsically motivated to follow orders (i.e. they will follow orders because they believe it is in the best interests of the force and because they value being a high functioning team member).

The three basic psychological needs of competence, relatedness and autonomy, if satisfied, can contribute to an employee's sense of empowerment and positive adjustment to their job. A primary aim of this study was to explore the ways in which different contexts within the NSW Police Force supported or thwarted these three basic psychological needs.

POLICE WELLBEING AND CAREER STAGE

A second aim of this study was to examine wellbeing and need satisfaction across police career stages. Some studies have examined police wellbeing across career stage, but none have explored how needs satisfaction may change across time. Research on police wellbeing across career stage includes outcome variables that encompass wellbeing and mental ill-health (e.g., stress, work-family conflict, psychological distress), attitudes towards police work (e.g., job satisfaction, commitment, cynicism, burnout), on-the-job-performance (e.g., productivity, number of citizen complaints), and physical wellbeing (e.g., reported physical health concerns). This is consistent with current definitions of wellbeing as a multi-faceted variable.

Research has documented that police officers experience higher wellbeing during their early career years. Attitudes related to work generally peak within the first two years of an officer's career, but decline with increasing tenure (Bragg, 2003). Indeed, early career officers are significantly less cynical, demonstrate higher levels of job satisfaction, and are on average more productive than their more experienced peers (Burke & Mikkelsen, 2005; Fagan & Ayers, 1982; Johnson & La France, 2016). While there is limited evidence of impaired occupational wellbeing at the beginning of police officers' careers, McElroy et al. (1999) found that continuance commitment, investment in the force, and perceived cost of leaving were lower among younger officers (< 31 years old). Despite this, the authors found that there was also lower inclination to leave among younger officers.

Research suggests that wellbeing levels tend to drop during mid-career years (Burke, 1989; Cannizzo & Liu, 1995; Cooper, 1982; Fagan & Ayers, 1982; Johnson & La France, 2016). For example, Fagan and Ayers' interviews with police officers documented a shift in wellbeing that occurred after officers entered their 30s. This shift in wellbeing was described as a "crisis" that involved feelings of bitterness towards the job, questioning of career choice, and recognition of discrepancies between initial expectations and realities of the job. Similarly, Cooper found that constables with 9 or more years of service were vulnerable, distressed, and bitter compared to officers at different career stages. Furthermore, Burke demonstrated that Canadian constables in mid-career stages had the highest levels of perceived negative work setting, stress, burnout, work-family conflict, low job satisfaction, and enthusiasm. Cannizzo and Liu also found that officers with 16-25 years of experience had the highest levels of burnout, emotional exhaustion, and depersonalisation. There is scarce research evidence demonstrating that mid-career is associated with positive gains in police wellbeing outcomes. For example, Padhy et al. (2015) also found that police officers with over 10 years' experience had higher optimism compared to officers with below 10 years' experience; however, no significant differences for personal wellbeing between these two groups were found.

There is mixed evidence regarding police wellbeing in later career stages. Some studies have shown an increase in productivity from mid-career lows that reflected a curvilinear relationship across the career-span from early career to late career (e.g., Johnson & La France, 2016). Others have demonstrated a negative correlational relationship between self-reported resilience and age, length of service, and time in the force (e.g., Balmer et al., 2013). Burke (1989) found that older officers had the highest level of reported physical health concerns, reflecting their advancing age. Some studies have pointed to divergent pathways, with some officers experiencing higher job satisfaction towards the ends of their careers, while others experience marked declines (Fagan & Ayers, 1982).

The above research demonstrates that career stage can be an important factor in determining police mental health and wellbeing; however, less is known about what factors contribute to changes in wellbeing across career stage. Exploring the degree to which psychological needs are supported across the career may prove helpful in better understanding how wellbeing can be maintained across career stages.

1 Study: Pilot Findings & Recommendations

BACKGROUND

The goal of Study 1 was to provide initial scoping data regarding the key factors police officers believe to be important in cultivating and fostering wellbeing. The pilot report is based on qualitative data collected in 2014.

PARTICIPANTS

Interviews were conducted with 40 officers from three Sydney metropolitan LACs with demographics as displayed in Figures 2 and 3.
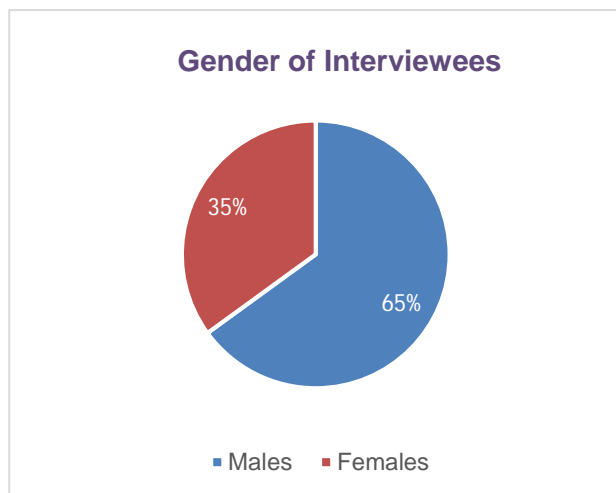
Figure 2. Gender of Pilot Study Interviewees

Figure 3. Gender of Pilot Study Interviewees

The male/female ratio of responses closely correlates with the percentage of total male and female staff within NSWPF for the years 2012-14 (NSWPF, 2014). Unsworn staff, who make up almost 18% of the NSWPF workforce, were underrepresented. Interview participants were selected to give maximum representation of the whole force, and the survey was deployed to all staff, with voluntary participation. Participants to the open-ended survey question also held ranks from Probationary Constable to Superintendent.

METHOD

Purposeful maximum variation sampling was used to select potential interviewees (Creswell, 2009). This method ensures selected participants provided the best representation of the total force. Forty individuals were purposefully selected to include long serving officers (15+ years), officers with 5-10 years of service, and new recruits with up to 5 years of service. Selection also encompassed ranks including: Probationary Constable, Constable, Senior Constable, Leading Senior Constable, Sergeant, Senior Sergeant, Inspector, Superintendent, and unsworn staff.

Participation in interviews was voluntary. All participants were reassured that they could withdraw at any time, they did not have to answer any question they were not comfortable with, and they would not be identified to NSWPF within any subsequent report. Participants were also made aware that if they became distressed, the interview could be immediately terminated, and a list of counselling services and their telephone numbers could be supplied. Participant confidence in this research

approach was indicated by the fact that existing participants encouraged other officers to contact researchers and participate in the study.

Researchers spoke to participants 'off the record' for approximately 5-10 minutes about the aims, method, and goals of the research and general conversation before formal commencement of the interview.

INTERVIEW QUESTIONS

The interview questions were:

1. What are the motivations for joining and staying in NSWPF and the reasons for people to leave NSWPF?
2. What are the existing problems with the job – the events or causes leading to problems with NSWPF staff well-being?
3. How does working as a police officer impact on overall well-being, including home life and social aspects?
4. What are the coping mechanisms and protective factors used by police officers?
5. What are the positive characteristics of the command and the organisation?
6. What are the negative characteristics of the command and the organisation?
7. What might be some innovative solutions and recommendations for improving NSWPF well-being?

ADDITIONAL SURVEY OPEN-ENDED QUESTION

NSWPF employees were also given the opportunity to respond to an open-ended question via online survey: *"Do you have any other suggestions about how to boost NSWPF and morale?"*. This was completed by 338 participants comprising 69% males and 31% females from all ranks, including 7% unsworn. It is worth noting that the open-ended question was the last of 252 questions asked in the survey, and 26% of participants did not reach the end of the survey. Of those who completed the survey, 31% answered the final question.

QUALITATIVE ANALYSIS

De-identified verbatim transcripts were made of the interviews. Content analysis classified data into categories coded according to phrases or responses that related to the research aims and questions about well-being and organisational factors. This coding was initially performed separately by two researchers, who then met to formulate a framework based on their individual perspectives on the transcript data. This co-classified framework was then used to code all interviews and the responses to the open-ended survey question with a focus on looking for solutions.

NVivo (version 10) qualitative data analysis software was used to organise the data, provide rapid access to concepts as they emerged from the data, and assist in reporting. Themes relating to the research aims and questions were workshopped by the team using an emic approach (a contextualised approach to reveal participants' implicit perspectives) and the key dimensions identified in the study's conceptual framework. This preliminary analysis formed the basis for further discussion and refinement of the coding categories. String and pattern searches were then conducted on the transcripts and open-ended question responses to identify additional patterns in the responses.

RECOMMENDATIONS

Analysis grouped recommendations under the following categories:

A. Replicating Positive Command Culture and Leadership Practices

Participants reported they preferred being granted autonomy in their daily work instead of being micro-managed. Participants also commented that clear communication from superiors was helpful in cultivating motivation and purpose within the force. Participants reported that they felt their motivation increased when surrounded by supportive, well-trained colleagues with co-workers and supervisors.

B. Further Strengthening Support for Injured Officers

Participants reported that they felt the NSWPF could provide better support for injured officers. Some officers reported that they felt subject to stigmatisation, did not always feel valued, and often felt isolated from the organisation and colleagues. Furthermore, officer interactions with insurance agencies were often reported as highly stressful. Officers reported a need for follow-up when placed on sick leave, but stressed that impersonal follow-up procedures were unhelpful. Some participants reported that psychological difficulties were seen to represent weakness amongst NSWPF officers. Other officers mentioned that the process of applying for stress leave was inherently stressful due to worries of being suspected of "rorting the system".

C. Enhancing Recruitment and Early Career Training

The report revealed a strong perception amongst officers that many recruits were not suitable for the role. Some officers suggested that better screening processes to identify people at risk of anxiety or depression during the training process may be useful in avoiding psychological harm further down the track. Other participants commented that they felt current recruitment promotional materials focused too much on the positive, and not enough on the potentially traumatic parts of the job. Some officers believed that this may create unrealistic expectations of policing. Furthermore, some officers suggested that training which better prepares for the realities of police work may assist in managing new-recruits' expectations of the job.

D. Promoting Physical Wellbeing

Many participants reported that exercise was an excellent way of relieving work-related stress. Some participants reported that they use exercise to improve sleep quality, improve concentration at work, build up resilience, reduce hypervigilance, and as an alternative to more maladaptive strategies such as the abuse of alcohol for relieving stress. Throughout the interviews, it was clear that the frontline police were aware of the positive benefits of exercise but felt that the NSWPF failed to recognise its importance.

E. Promoting Psychological Wellbeing

There was a strong perception among participants that there is a lack of support for frontline officers (77.5% of interview participants responses and lack of support was the most mentioned survey response). Participants regularly described the policing profession and PTSD as "going hand in hand." Other mental health difficulties and alcohol use were also commonly reported by participants. Many participants felt that the additional burden on their partners around childcare, family events and the running of the household also meant that it was unfair for them to also share their work experiences. The report found that overall there appeared to be an over-reliance on

informal support networks because internal support mechanisms were not trusted. The following graph details coping mechanisms reported by officers in this study.
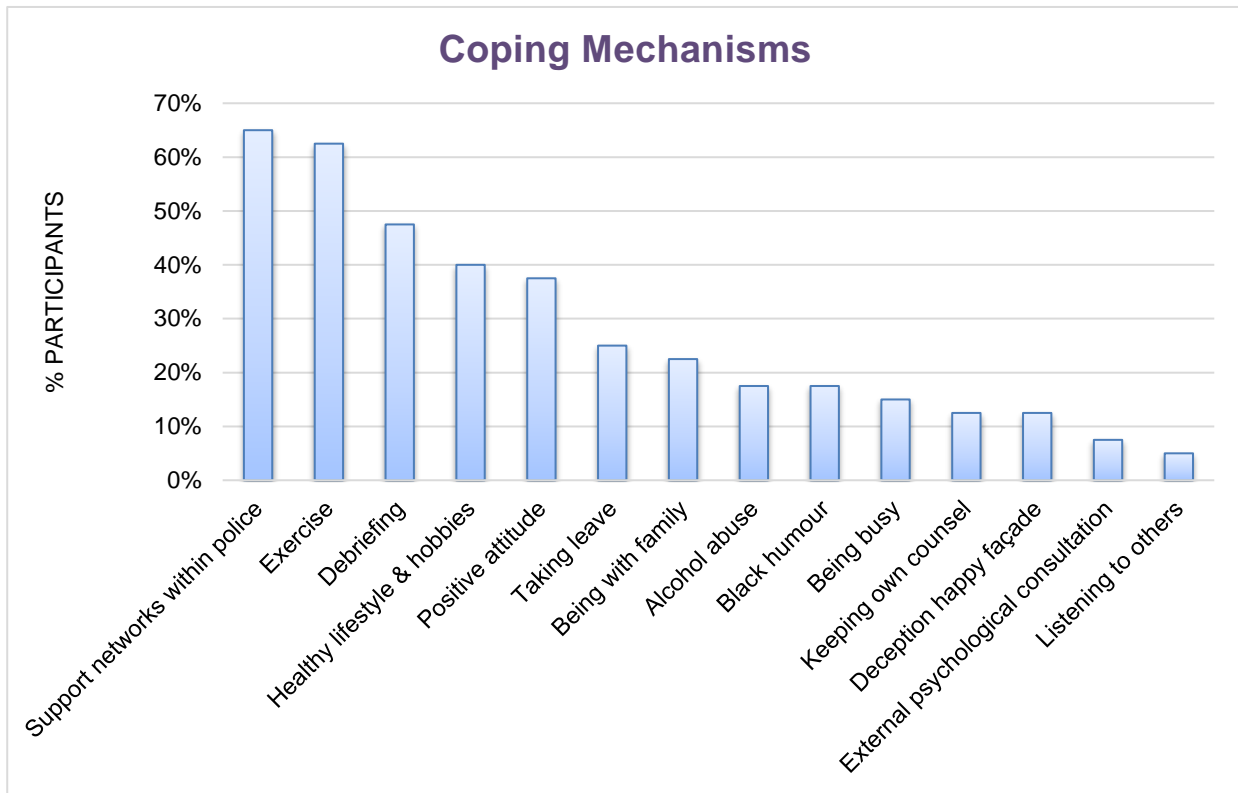
Coping Mechanisms

Figure 4. Coping Mechanisms employed by members of NSWPF

F. Managing Workload to Support Wellbeing

In general, shift-work was regarded as an expected part of the job. However, long shifts, along with inconsistent, variable and short-notice roster changes appear to be a major source of angst for police officers and their families. Data collected in this study reveals that a reluctance to work overtime, diminished social activities, and lack of time to exercise is also attributed to the 12-hour shift. All interview participants mentioned understaffing as an issue, especially at the frontline. It was viewed as a contributory factor to many problems such as work-related stress and fatigue. The interview data revealed a believed lack of relief staff for those on maternity, sick, stress, or other leave. The data strongly suggested that a 'one size fits all' approach to well-being across the organisation may not be appropriate, and that support mechanisms would need flexibility to allow for differences in stressors between commands and units. The quality of leadership is very variable between commands, and this has significant impact on the well-being and motivation of the officers serving at those LACs. Moving from a relatively quiet LAC to a busier and more demanding one, or into a specialist unit, can involve adjustment to new stressors and workload management, and this emerged as an area in which leadership and management support are important. Officers working in rural towns reported a higher incidence of attending a critical incident involving someone they knew, which created additional anxiety. Finally, a clear division was reported between sworn and

unsworn staff, and an almost adversarial division between general duty officers and detectives and senior management.

G. Refining Processes and Procedures

Frontline officers reported that they experienced additional occupational stress from the sheer volume of meticulous record-keeping and paperwork required. As many police officers pointed out in the interview and surveys, an integral part of this is to allow more time for paperwork. It is understood that a great deal of work has been undertaken by the NSWPF to cut the duplication of detail gathering and streamline the reporting processes. Despite this, the feedback received throughout the interview process highlights that there is a great deal more to be done. While complaints of this nature from the public are inherent in the job, participants noted that the stress of external complaints combined with an unsupportive complaint management process can create a great deal of stress and personal hardship.

WHERE TO NEXT?

The pilot study provided a broad scoping overview of issues concerning NSW police officers. Questions regarding how to best implement change strategies within the organisation to improve current wellbeing remain. Effective change interventions should be guided by both empirical data and theory. Theory-driven interventions can help organisations provide a model to understanding current difficulties, and to anticipate future issues. These models are important because they give organisations a framework that can be consulted when designing new initiatives. Our goal was to identify a theory that NSWPF could use to help understand current difficulties, but also utilise and consult when developing new initiatives aimed at improving staff wellbeing. NSW police officer responses in the current study seemed to reflect three key factors:

1. a desire to increase feelings of support and connectedness;
2. a need for better trained and more competent officers and organisational procedures;
3. a preference for officers to maintain some autonomy and freedom in daily decision-making.

We believe that Self-Determination Theory (SDT) is a potentially powerful way of explaining these concerns in police officers' current difficulties, but also in understanding what types of initiatives would likely be helpful in furthering wellbeing within the NSWPF. SDT proposes that wellbeing is a function of the degree to which people's needs are fulfilled in the domains of relatedness, competence, and autonomy. Notably, these three psychological needs are markedly like the concerns reflected by NSWPF staff in Study 1. As such, the aim of Study 2 was to explore this hypothesis, and begin developing a framework for NSWPF to understand staff wellbeing.

2 Study: Needs Support and Thwarting in the Force

The goal of Study 2 was to investigate NSWPF officer experiences of needs support and thwarting (as described in SDT) within the context of policing.

BACKGROUND

Forty police officers ranging from new-recruits to twenty-year veterans were interviewed in either individual or group settings to explore the effects of different contexts within the NSWPF upon psychological need satisfaction. SDT proposes that all humans have three basic needs:

- **Autonomy** – the need to make choices and endorse one's own actions,

- **Competence** – the need to have effective agency in the world, and

- **Relatedness** – the need to belong and have satisfying relations with others.

Different contexts can either support or interfere with the degree to which a person feels satisfied in these three basic needs. The research investigated three main questions:

1. What contexts support or thwart the needs of police officers?

2. Are experiences of needs satisfaction and frustration different for officers across different career stages?

3. Are experiences of needs satisfaction and frustration different for officers who report poor mental health or wellbeing?

The report describes a range of key contexts that affect psychological need satisfaction including:

- The Degree of Empowerment of Officers
- Flexibility of Work
- Internalisation of Organisational Values and Goals
- Competent Management
- Positive Reinforcement and Acknowledgement of Strengths
- Fair and Reasonable Assessment
- Efficiency of the Police Force
- Manageable Workloads
- Supportive and Respectful Working Relationships
- Management that Cares
- Organisational Level Support
- Support from Outside the Force
- Clear and Open Communication

There is a vast amount of research showing that satisfaction of basic psychological needs not only leads to enhanced wellbeing, but increased work engagement and performance. This report replicates these findings, clearly showing that those who experienced higher wellbeing were more likely to have their needs satisfied than those who experienced lower wellbeing. Furthermore, there

appears to be an effect across the lifespan of police, whereby those in their first year of the job were much more likely to have their needs satisfied than twenty-year veterans. Those on restricted duties reported the fewest examples of need support and the most examples of need thwarting from the police relative to the other groups. These results suggest that optimising the contexts in which basic psychological needs are satisfied and minimising the extent to which they are thwarted, will yield the benefits of a healthier workplace.

PARTICIPANTS

To explore how police experience and cope with stress at different stages of their careers, we interviewed 45 officers from 4 distinct groups: 1) new-recruit officers at the academy and later in the field; 2) veterans with twenty years of experience and over; 3) officers on restricted duties; and 4) officers with the rank of commanders or those who worked in business management.

- 13% (n = 6) of respondents identified as female, while 87% (n = 39) of respondents self-described as male (*see Figure 6*).

- 29% (n = 13) of officers were new-recruits, 51% (n = 23 [8 individual interviews]) of officers were veterans with 20 years' experience, 9% (n = 4) of officers were on restricted duties (*see Figure 5),* and 11% (n = 5) of officers were in senior leadership roles (commanders or senior business manager [n = 1]). New recruits were asked to participate twice (firstly while training at the police academy; and secondly on the field following their graduation).

- Age ranges of officers varied. The age range of new-recruits was between 21-40 years. Veterans with 20 years' experience were aged between 40-50 years. Officers on restricted duties were aged between 45-59 years.
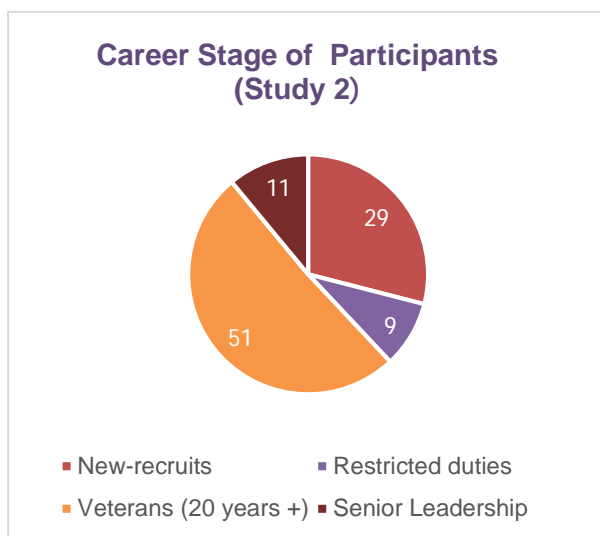
Figure 5. Career Stage of Participants: Study 2
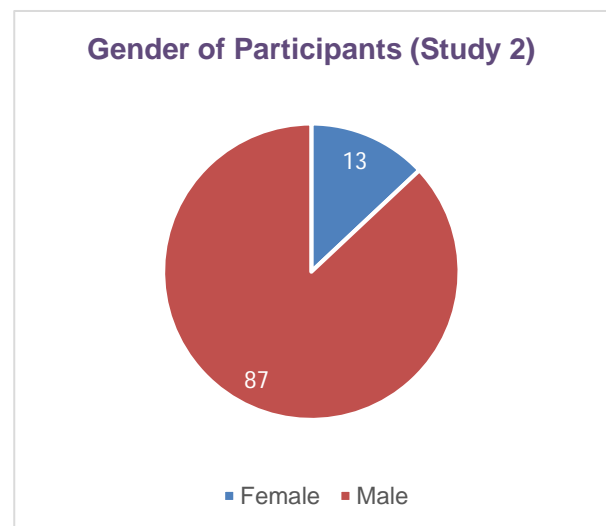
Figure 6. Gender of Participants: Study 2

METHOD

Interviews were conducted in one-on-one and focus group format. The coding framework was organised so that officers' experiences were coded under three main themes: 1) Autonomy; 2) Competence; and 3) Relatedness. Within each of these themes, data was segmented into two categories – instances where needs were supported, and instances where needs were thwarted. Each category is supported with a representative quotation from a participant. While we report quotes from T2 new recruits once they had been sworn in, we do not report quotations from T1

students at the NSW Police Force Academy in Goulburn as their experiences there do not reflect typical police experience. Under each category, further sub-themes that emerged from the data are reported. These sub-themes reflected specific contexts that needs were supported/unsupported (e.g., flexible work was a subtheme under the main overarching theme of autonomy).

RESEARCH QUESTIONS

The key research questions of this study were as follows:

1. **What contexts support or thwart the needs of police officers?**

    1.1. What are the contexts under which psychological needs of competence, relatedness, and autonomy are experienced as supported or thwarted by NSWPF officers?

2. **Are experiences of needs satisfaction and frustration different for officers across different career stages/outcomes?**

    2.1. Are there differences in the proportion of participants reporting examples of needs support versus thwarting across different career stages (e.g., from new-recruit to veteran/restricted duties)?

    2.2. Are there differences in the proportion of participants reporting examples of needs support versus thwarting between twenty-year veteran officers and restricted duties officers?

    2.3. Are there differences in the salience of competence, relatedness, and autonomy themes in the responses of officers across different career stages?

3. **Are experiences of needs satisfaction and frustration different for officers who report poor mental health or wellbeing?**

    3.1. Are there differences in the proportion of participants reporting examples of needs support versus thwarting between officers who report mental health difficulties[1] and those who do not?

The first focus of this report was to understand the circumstances that supported the needs of autonomy, competence, and relatedness within the NSWPF. We also hoped to better understand the situations in which these needs were thwarted. Themes that emerged from the data were as follows (see Table 1, next page).

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[1] *Mental health difficulties include disclosure of depression, suicidal ideation and behaviour, panic attacks, excessive substance and alcohol use, post-traumatic stress symptoms, and severe anxiety. We did not include descriptions of mild distress (e.g., nervousness about an exam).*

TABLE 1: NEEDS SUPPORT IN THE NSWPF

Needs Support in the New South Wales Police Force: What Works?	
Autonomy Supports	- Empowerment to Act with Agency - Flexibility of Work - Internalisation of Organisational Values and Goals
Competence Supports	- Competent Management - Positive Reinforcement and Acknowledgement of Strengths - Fair and Reasonable Assessment - Efficient Force - Manageable Workloads
Relatedness Supports	- Supportive and Respectful Working Relationships - Management that Cares - Organisational Level Support - Support from Outside the Force - Clear and Open Communication

2.1   RESULTS: CONTEXTS THAT SUPPORT AUTONOMY

This next section highlights the experiences of the participants in relation to supporting autonomy.

2.1.1   Acting with Agency

> *"I get to make a lot of the choices… Well, I've got a broad statement that I run by, and I run by that. And so yes, we make our own decisions as to how we can best achieve the goals of that statement. So yes, we make a lot of the decisions of where we go, what we do ourselves."*

-    20-year veteran

Being supported to make choices and being involved in decision-making processes was experienced positively by many participants.

Examples of these positive experiences where autonomy needs were supported included:

- Being supported to use discretion in decision-making on the job;
- Being trusted to make decisions independently; and
- Being involved in decision-making processes within the organisation (e.g., resource allocation).

Officers also reported times where they were not given the opportunity to act with agency. These situations were often discussed in the context of feeling frustrated or disgruntled towards the job.

> *"We're not involved in decision making at our level and there's no input. It goes through a higher level than us."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Being denied opportunities to make own choices and decisions on the job;
- Being denied opportunities to provide input regarding the management of NSWPF;
- Micro-managing and controlling management styles;
- Controlling performance indicators (e.g., having to choose jobs to meet statistics as opposed to doing what needs to be done); and
- The paramilitary lifestyle of police academy was challenging for some new recruits.

Senior Leadership Perspectives:

Like officers, commanders reported times where they felt disempowered. Many of these instances were related to commanders being restricted with regards to staffing decisions.

> *"We rarely get an opportunity to pick our team. So, it's about trying to work with what you've got. It's very challenging."*

- Commander

Only one commander reported an example where they overtly discouraged officer's autonomy needs in relation to staff querying a decision.

> *"Well, you just tell them, that's the job. Why? Because I told you to, that's why."*

- Commander

Nearly all commanders reported that they were empowered to act with agency in their roles. However, only three out of the five officers in senior leadership roles discussed how they supported officers' agency in decision making within the force.

Commanders who successfully supported officers' agency were active in prompting feedback and consultation from their employees, creating new, meaningful career opportunities for injured

officers, and supporting grassroots initiatives to support wellbeing rather than implementing wellbeing programs without staff input. The following quote discusses how senior leadership at one station support staff in developing their own wellbeing initiatives:

> *"We do everything we can to give the person time to work that idea out. Resources and support them rather than just going: "Yes, constable, we've thought about it before and we decided not to." But giving them ownership and giving them empowerment. We've found that it's created a really good culture."*

- Commander

2.1.2 Flexibility of Work

Flexible rostering and work arrangements were regarded positively by NSWPF officers.

> *"In a big station we're working shifts, the main issue that upsets people is rosters. So, good rostering, good effective, fair rostering is what… If you have a good roster person who is there and is able to do, keen to do their job, the morale is just, everything else, you can put up with everything else."*

- 20-year veteran

Examples of these positive experiences where autonomy needs were supported included:

- Flexible rosters (e.g., opportunities for part-time work);
- Rostering that is fair (e.g., allocating leave and nightshifts fairly throughout team); and
- Allowing flexibility in recovery time/transition back to work.

Some officers reported that they felt the rostering system was unfair and inflexible, particularly for officers with a family.

> *"These poor people have to negotiate how they care for their children and it's just dreadful."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Unfair and unsustainable working arrangements for people with children;
- Unpredictable roster (e.g., rosters that changed at the last minute – resulting in employees being unable to maintain family and social commitments); and
- The transition to shift work was experienced as challenging by some early-career officers.

Senior Leadership Perspectives:

In contrast to officers, only one out of the five commanders raised concerns around flexibility of work. In this case, one commander commented that flexibility of work was more challenging for regional officers due to fewer job opportunities.

> *"Unlike Sydney where you can just be moved somewhere else, in the country you have to physically move your whole family to have a job."*

- Commander

Commanders who reported that they had successfully encouraged flexible working environments emphasised the following strategies:

- Emphasis on work life balance and family;
- Ensuring that transition back to work from injury is tailored according to individual's work readiness; and
- Allowing flexibility of rostering and job roles to allow respite for frontline officers.

A rotational, flexible roster system was discussed by commanders as helpful in minimising the risk of staff burnout:

> *"I say that to the troops, if you're not feeling 100% during those Thursday meetings. Tell someone, we can do stuff. We've got plenty of support, plenty of police around, we can swap things around and just be honest… If something's going on and you're not feeling good for it, it might be just 24 hours it might be you just need a breather."*

- Commander

2.1.3 Internalisation of Organisational Values and Goals

Alignment between personal and organisational goals and values – or internalisation of the organisation's values – occurred to varying degrees amongst officers. New-recruit officers and commanders were the only officers who spontaneously recalled examples of internalising organisational values and goals. Officers appeared more satisfied about their jobs when their personal goals and values aligned with the force.

> *"Sometimes the enforcing of it seems a little harsh or unrealistic, but I sort of get to the understanding for most things. Some things, I can't understand, but most of them, I can. The need to follow instructions and orders, regardless of your own personal beliefs or understandings, I get all those sort of things, and I believe, or feel, that that's why they're trying to enforce particular things here in the academy, so that we will take those attributes out to the field."*

- New-recruit T2

Examples of positive experiences where autonomy needs were supported included:

- Belief that orders and requests of the force are justified and reasonable;
- Participation in the force is aligned with long-term career goals and personal interest; and
- Congruence of personal values and the expectations of the force on police behaviour.

Other police reported that their personal needs and goals did not align with the force. Some officers even reported that they felt trapped within the NSWPF.

> *"It becomes a Stockholm Syndrome thing, because you go, I want to leave. I want to leave because they're hurting me, and they're doing damage to me as a human being but if I leave, I'm probably going to end up with my wage cut in half. I might not even be able to get another job and I could potentially end up homeless."*

- Restricted duties officer

Senior Leadership Perspectives:

One commander reported that many officers also experienced a misalignment between their lifestyle preferences and the demands of the job.

> *"The other one that's exceptionally relevant the further away from the Sydney metropolitan area you go is the incompatibility of life choices and occupational outcomes. So, what I mean by that - and it's back to that piece before - is, officers go, I want to work at Gosford for the rest of my life, because I live at Gosford. But I don't want to do domestics. I don't want to do child mistreatment. I don't want to do fatal motor vehicle accidents. And I certainly don't want to wrestle mental health patients. They're incompatible."*

- Commander

Other examples of contexts where commanders' needs were either not supported or thwarted included:

- Participation in the force due to extrinsic motivation or a lack of other viable options (e.g., only staying because of financial pressure);
- Boredom and lack of interest in work; and
- Organisational needs do not align with personal values, interests, and goals.

Commanders who reported that they had successfully encouraged alignment between personal and organisational goals discussed the following strategies:

- Explicitly discussing goals and purpose of policing;
- Initiating conversations about why people chose to become a police officer; and
- Showing police the results on their hard work (e.g., reductions in crime in local area)

"You're trying to build a castle for the people to keep them safe. Get back to the fundamentals of why you chose to be a cop and what that means and you're out there to make a difference….You've got to keep feeding it though, because you can take your foot of the pedal and people get a bit blasé or, you know, the grind of policing."

\-   Commander

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1. Implications for Autonomy Support

These findings suggest strategies that could be more widely implemented to support autonomy include:

1.1 Enabling officers to act with agency by supporting discretion in decision-making in enacting the job and involvement in organisational decision-making processes;

1.2 Providing fair and flexible working arrangements in relation to rosters, recovery time, and transitions back to work; and

1.3 Fostering conversations exploring alignment of organisational values and goals with personal goals.

2.2 RESULTS: CONTEXTS THAT SUPPORT COMPETENCE

This section draws upon participants' experiences in relation to supporting competence.

2.2.1 An Efficient Police Force

Officers reported that an efficient, organised, and well-run police force was important.

> *"I mean you could see the results because we were shutting drug houses down nearly on a daily scale. It was, yes, it was good. And we got good at how we were doing things and worked with the same core group most of the time. So everyone knew what was expected of them and it was just a busy couple of years. But probably the most fun I've had."*

- 20-year veteran

Examples of this need being met included:

- The experience of being a member of high-performing teams; and
- Adequate provision of resources and training.

There were also instances where officers felt that the NSWPF was not as efficient as it could be. These instances caused officers frustration and resulted in many officers feeling that there were unnecessary barriers that prevented them from policing effectively.

> *"I think we came down to the red tape, you know, and the bureaucracy. We need this many people to get this many statistics to keep the government happy in relation to domestic violence or whatever you'd like, instead of this bloke's out there doing sexual assaults on someone. We need to focus on this bloke and get him off the street, because he's committing crimes."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Excessive paperwork and bureaucracy resulting in unnecessary administrative tasks;
- Lack of resource provision and appropriate training; and
- Drawn-out complaint systems.

Senior Leadership Perspectives:

Unlike other officers, each participating commander reported concerns around the issue of malingering and its impact on team efficiency.

> *"There are the ones that you're suspicious of but are not so legitimate….When I got to Newcastle, we had 45 people on long term sick leave and 25 on restricted duties, so that's 60 people that couldn't put a gun on and go outside."*

- Commander

Many commanders commented that there were people with "legitimate" injuries, and those without. Some commanders felt as though they had the ability to confidently decipher legitimate cases from malingering.

> *"I can tell who's riding it but I can't, I'm not allowed to say anything. And we know because I have information of everything, their performance, what happens here, what happens at home, where they might be tending to get in trouble with something, you know."*

- Commander

Commanders who were successful in encouraging efficiency reported the following strategies as effective:

- Encouraging proactive policing as opposed to reactive policing;
- Ensuring a strong framework guiding policy and practices; and
- Investing in building strong foundations of communication and teamwork to enhance motivation of officers.

2.2.2 Fair and Reasonable Assessment

A recurring theme amongst the responses of participants was a desire for fair and reasonable assessment. Most participants recalled experiences where this need was not met. Participants often expressed dissatisfaction or anxiety about assessments within the police force. Experiences of assessment varied throughout police officer's careers. New recruits were more likely to report stressful examination and promotion processes, while older officers emphasised dissatisfaction with the promotion system, career progression, and excessive accountability.

> *"It's also a promotional process that benefits the people who sit around all day and study all day, not the ones that are actually out there working and can do the job."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Excessive accountability and disciplinary action against police officers;
- Unfair promotional system that rewards people who are ill-prepared for leadership;
- Unnecessarily stressful examination and promotion processes; and
- Lack of options for career progression.

Senior Leadership Perspectives:

In contrast, commanders primarily reported concerns that there was a lack of accountability amongst some officers. For example, some commanders noted that they felt that officers feigned illness or injury to avoid repercussions of internal investigations or complaints.

> *"We've got a huge correlation between people hitting a hurdle in terms of complaint matter, where they've done something either criminal or serious misconduct and go off sick….Now, I suppose there are some that may truly be mentally ill, but it's starting to become a little bit of a common practice for cops that have done the wrong thing to then claim mental health stuff."*

- Commander

Some commanders noted that there were positive aspects of assessment and accountability within the police force. Having a system of checks and balances ensured that officers acted efficiently, and that leadership were fulfilling their obligations.

> "*I think we've got a pretty good governance model set up in that regard. So, along the way, there's all the check mechanisms that the leadership team have to say, what's our approach? Did we do it? Did we do what we say we do? And what's the result? And then, the outcome is the staff getting all those things that we're talking about."*

- Commander

2.2.3 Positive Reinforcement and Acknowledgement of Strengths

Police officers reported that they experienced their job positively when they received positive reinforcement during their duties. Positive reinforcement occurred both externally (e.g., from colleagues) and internally (e.g., feeling a personal sense of accomplishment).

> *"You know I could talk to someone and think… And say to them, you know I stuffed up. I did this, I didn't do this. And nine times out of ten they'll say, you did a great job, you know. I wouldn't have done that. Or I couldn't have done that as well as that, or whatever."*

- 20-year veteran

Examples of contexts where this need is supported included:

- Officers experiencing success in their day-to-day jobs and/or training;
- Receiving praise from colleagues and management;
- Receiving positive evaluations (e.g., exam marks);
- Continued exposure to challenging scenarios reduces anxiety and increases mastery;
- Opportunities to draw on previous work experience and skill-sets;
- Feedback from supervisors that builds on existing strengths and skills; and
- Reflection on past achievements and personal growth/improvement.

Some officers, however, remarked that there was an absence of positive reinforcement within the force. Some officers also reported that there was a culture of excessive criticism within the police force.

> *"In this job, people are very quick to criticise you, so you shouldn't probably criticise yourself as much because someone's going to do it for you."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Lack of praise and acknowledgement of hard-work and officer achievements;
- Lack of opportunities for formal acknowledgement and career growth (e.g., lack of promotion opportunities);
- Excessive and unnecessary criticism;
- Lack of opportunities to impact on community positively (e.g., constantly attending homicides and deaths that have already taken place); and
- Difficulties mastering basic work tasks (e.g., submitting paperwork).

Senior Leadership Perspectives:
All commanders emphasised the importance of positive reinforcement of accomplishments and strengths.

> *"For a person who is just battling, that turns up for work and is just doing their best, and you know what I'm talking about. They need to be supported. They need to know, mate I'm really impressed that you're just having a go and you are doing your best."*

- Commander

Examples of successful positive reinforcement from commanders included:

- Highlighting the positive contributions that officers make towards their community;
- Celebrating 'wins' (e.g., reduction in crime statistics within the command);
- Providing praise to many officers, not just 'star performers';
- Sending personalised emails to officers to acknowledge accomplishments or bravery;

- Acknowledging strengths of restricted duties officers rather than limitations;
- Reframing definitions of success in areas of high recidivism (e.g., domestic violence).

2.2.4 Competent Management

A key theme reported by participants was that competent management and leaders were critical to the wellbeing of NSWPF officers.

> *"People that have been promoted to sergeant and above have generally very much earned it and are very good at what they do, so if you ever need a hand, and they're always, and one of their attributes, they're always willing to help out."*

- New-recruit

Examples of positive experiences where competence needs are supported include:

- Management and leadership that are approachable and open to helping staff;
- Good relationships with management increase officers' desires to perform to the best of their ability;
- Management that are appropriately skilled to successfully manage teams; and
- Competent management modelling best practice to junior officers.

Some officers reported that they perceived their managers and/or supervisors as incompetent. Often this was discussed within the context of feeling frustrated.

> *"All I seemed to be doing was working harder and we weren't getting the result that we were after because we felt we didn't, basically felt we didn't have the support from management to help us do what they wanted us to actually do for them."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Lack of support from managers to achieve results and complete targets;
- Incompetent managers who had been promoted above their ability;
- Inconsistent instructions from academy instructors; and
- Lack of organisation amongst academy instructors.

Senior Leadership Perspectives:

Commanders were less likely to acknowledge issues of poor management within the police force, but one commander did provide comment about the powerful role that managers had on people's mental health:

> *"You see people that have gone for decades and then there is the one job or the straw that breaks the camel's back. That can sometimes be just something that's not an operational matter, it can be managerial issues. They just don't feel supported in the workplace, in terms of a management decision or some performance thing or something that they see is the challenge against years of I think ethical service and suddenly they're being challenged on a managerial level or something.*
>
> *That can sometimes have a greater impact on people than say being confronted by a major incident or something that is quite graphic in an operational context. That can occur years and years into a career that's otherwise been okay."*

- Commander

2.2.5 Manageable Workloads

Police officers expressed a desire for manageable workloads. Again, officers overwhelmingly reported heavy or unmanageable workloads. Only two officers discussed positive experiences of having a manageable workload.

> *"I'm fortunate in where I work at the moment is that there's not a lot of time pressure on you."*

- 20-year veteran

Officers were more likely to report that their current workload was unmanageable and excessive.

> *"You look at how much extra workload the GDs are taking on and just how much... how little recognition they get for what they do and the workload….and you go, my god, you know. It really is getting to the point where its saturation is, and you go... you physically can't do what you've got to do in a shift."*

- 20-year veteran

Examples of contexts where this need was not supported or thwarted included:

- Excessive workload, particularly for General Duties officers;
- Unrealistic expectations and performance targets from management;
- Leadership belief that overtime work is positive; and
- Excessive study load for new-recruit officers.

Senior Leadership Perspectives:

Commander accounts substantiated the reports of officers. Commanders discussed issues around excessive workloads for staff, under-staffing, and the links between continuous shift work, family breakdown, poor health and subsequent work difficulties. Some commanders voiced concerns relating to the sustainability of frontline police work over the duration of a police officer's career.

> *"That whole notion of this is a job for life is probably…worthy of a challenge. And I think it is being challenged as to whether a human being is fit for purpose for whether it's five years, seven years, ten years."*

- Commander

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2. Implications for Competence Support

These findings suggest strategies that could support competence needs include:

2.1 Implementing efficient policing strategies that streamline bureaucracy and administrative tasks, providing adequate resources and training, and enabling officers to serve as a member of a high-performing team;

2.2 Providing training at all levels of the NSWPF to acknowledge staff strengths, provide positive reinforcement, and internalise a personal sense of accomplishment;

2.3 Implementing best management practice whereby managers are skilled at managing and leading teams, establish good relationships with colleagues, and model best practice; and

2.4 Providing a manageable workload with realistic expectations and targets.

2.3 RESULTS: CONTEXTS THAT SUPPORT RELATEDNESS

This next section highlights the experiences of the participants in relation to supporting relatedness.

2.3.1 Supportive and Respectful Working Relationships

A key theme reported by participants was that supportive and respectful working relationships between colleagues and teams was essential for wellbeing:

> *"There are times on the job where my heart's been in my mouth. But that wasn't one of them. Because I think I knew I had enough support there, that if everything really went pear-shaped, I had the people around me to back me."*

- New-recruit

Examples of positive experiences where supportive and respectful working relationships have enhanced relatedness needs included:

- Opportunities for team building and camaraderie (e.g., time to connect and discuss issues with other colleagues);
- Team culture that supports helping colleagues and other prosocial acts; and
- Opportunities for officers to discuss personal difficulties with other team members.

There were also many instances where officers reported that they felt unsupported. These instances involved interpersonal conflict, unequal treatment, and bullying.

> *"He said, because the boss, who's the commander of the academy right now, she has put out a direction to all her staff, and I bet you there's nothing written, that we're not, we're not taking restricted people any more, particularly those with PTSD and head issues. Because they're too hard. And we have too many problems with them. If I had had a broken leg, he would have just said, yes, get your leg better and we'll look, you know, apply for a job. They don't write it down, but the discrimination is ridiculous."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Stigmatisation and discrimination of individuals with mental health difficulties;
- Favouritism (e.g., unfair promotional system, harsher penalties for some people);
- Bullying and interpersonal conflict;
- Accusations of malingering;
- Racism/racial prejudice;
- Ostracism within teams; and
- Hazing of new-recruit officers.

Senior Leadership Perspectives:

Most commanders did not recall any instances of unequal treatment or aggressive behaviours within teams, although it is worth noting that commanders were not specifically asked about the presence of these behaviours. Nonetheless, one commander did report the following:

> *"We treat one another worse than the criminals that we're supposed to be protecting the community from. You know, the cops can be pretty hard on one another, in terms of, particularly at senior levels."*

- Commander

Many commanders reported that staff could sometimes be unnecessarily combative towards people in leadership.

> *"As soon as the troops see a chink in the armour, if there is a bit of niggle in the senior management team, they'll exploit it."*

- Commander

Some commanders felt as though they had been able to cultivate respectful relationships within their local area command.

> *"People will just, no matter if it's the cops or anywhere else, they'll be yap, yap, yap about their own people. But my job is to put in place as best I can, a process where that isn't happening, and if it is happening that people are aware what my expectations are, and they cut it as soon as they can."*

- Commander

One observation from this data though, was that support and respect from within the team could be conditional. That is, some restricted duties officers were viewed with respect due to their strong ethics, while others who were regarded as 'lazy' did not receive the same support.

> *"As a restricted duties officer, if they're restricted and bending over backwards to support and help and do as much as they can do in their job then they will be respected. If they're seen as a bludger then they're not going to be respected…. I think if they're willing to help and support and do their job well, people understand that some people have fallen into that restricted capacity for a reason and there's no dramas."*

- Commander

2.3.2 Management that Cares

Officers also discussed the importance of having managers and supervisors who genuinely care about their staff:

> *"For instance, we've got a female commander…straightaway she thanks you for every job you've done. She watches everything, she's very supportive, she calls you. Any critical incidents, the guys are involved in, she's on top of it."*

- 20-year veteran

Examples of officers reporting caring and compassionate management behaviour included:

- Management who are proactive in encouraging help-seeking behaviours (e.g., checking in with staff after critical incidents, suggesting appropriate professional follow-up);
- Management who are familiar with individual team members;
- Management who thank and acknowledge staff after completion of tasks;
- Provision of a safe environment to discuss challenges (e.g., being encouraged to talk openly about mistakes with management);
- Management that are approachable and available to provide feedback, support, and advice for officers; and
- Management who display empathy and compassion towards officers in distress.

Officers also discussed instances where this need was not met; many noting that management were integral to the wellbeing and mental health of staff.

> *"Like, our boss has been there for 25 years, but we had a second-in-charge come in who just... The morale in the place... Like, he just wiped the place out, and we had people off sick left, right, and centre. People left, right and centre, because this guy was just a cancer in the place."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Management that fail to follow-up on staff after critical incidents;
- Management who are perceived as narcissistic and self-focused;
- Management that perpetuate mental health stigma; and
- Management that disbelieve and/or are not supportive injury claims.

Senior Leadership Perspectives:

All commanders reported that they genuinely cared about the wellbeing and mental health of their staff, but some did acknowledge that there was a perception amongst some officers that management were merely "ticking boxes".

> *"I can tell you what they would say, they would say that they think that they weren't supported and that people were talking about them and they feel devalued and that they're worried about people's perceptions of them and they think that management just tick the boxes to keep them happy."*

— Commander

2.3.3 Organisation Level Support

A key theme reported by participants was that in addition to support from colleagues and managers, participants required the support of the NSWPF as a whole.

> *"It's a general rule that when police officers do turn up to assist horrific accidents or fatal collision that EAP counsellor support should be made available to all officers involved."*

— New-recruit

Examples of organisational support included:

- Availability of quality organisational support services (e.g., EAP counselling);
- Psychoeducation and mental health resources (e.g., psychologist talks);
- Awareness of organisation's support services; and
- Padre, buddy system and student liaison support at the academy.

Officers, particularly those who were older, also reported instances where the NSWPF had failed to provide appropriate support.

> *"They rang me on a Sunday, the crash happened on a Saturday and I said yes, I'd like to speak to someone. They said cool, we'll be in touch. And…Never heard back from them. And that's twice, that's happened to me. But in the meantime, I wasn't going to just sit there for a month going, I'm waiting for a phone call, you know?"*

— 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Complaint system that perpetuates isolation and lack of transparency;
- Lack of awareness about appropriate mental health support in the workplace;
- Difficulty in implementing wellbeing policies effectively;

- Lack of organisational follow-up (e.g., WellCheck, EAP not calling back) for individuals who have been identified as high-risk for mental health difficulties;
- General Duties officers not receiving adequate support despite ongoing exposure to trauma;
- Organisational support services that have been ineffective and/or unhelpful;
- Perception that officers are 'numbers' rather than people;
- HR personnel communicating disbelief regarding officer's medical claims;
- Lack of early intervention initiatives regarding wellbeing; and
- Non-religious new recruits feeling unable to reach out to support with chaplaincy.

Senior Leadership Perspectives:

Commanders overwhelmingly reported that they felt organisational support was effective. Senior leadership reflected on how attitudes and supports for injured officers had improved over time:

> "I think people are getting more comfortable and more confident that they'll be supported and then get back on track. We've got a large number of examples in this command of people who've been psychologically injured, got better and they are now working fully operational again."

- Commander

Only one commander reported a situation where they believed the organisation had not provided adequate support, but even in this instance, the commander reported that they believed this to be an anomaly.

2.3.4 Support Outside the Force

Officers also reported the importance of having a strong and supportive network of family and friends outside of their day-to-day roles in the NSWPF.

> "I have a good support network around me; my partner, my dad, my family, my friends. It probably helps in a way that a lot of my friends are cops and have been cops for a long time, so they understand."

- New-recruit

Examples of support outside the force included:

- Friends and family who check-in on the officer's wellbeing during times of stress;
- Feeling that friends and family are open to talking about issues and problems;
- Having friends and family who understand the difficulties associated with policing;
- Opportunities to socialise with co-workers outside of work hours;
- Friendships with co-workers that provide opportunities to bond over things outside of the job (e.g., hobbies and shared interests); and
- Home environments that provide the opportunity to de-stress.

Many officers, particularly those who were older, also reported times where this need was not met. In these circumstances officers often reported feelings of loneliness, disconnection, or grief resulting from relationship loss or conflict.

> *"There was no sex or anything like that with my wife for the last year and a half of our marriage. There was not even anything. Neither of us minded. It was like there was a barbed wired fence down between the, down the middle of the bed. And we ended up in just this cold war between us."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Loss, grief, and conflict associated with separation or divorce (e.g., separation from children, loss of mutual friends, financial strain);
- Disconnect from spouse (e.g., engagement in extra-marital affairs, lack of physical and emotional intimacy);
- Significant others who are unable to provide support and validate emotions;
- Abusive spouses;
- Personal loss (e.g., death of family member);
- Being unable to fulfil family roles and responsibilities (e.g., being available to support family member during pregnancy, scheduling of roles); and
- General population holding negative attitudes about police; abusive behaviour towards officers.

Senior Leadership Perspectives:
No commanders reported positive experiences of outside support. Commander responses reflected a concern that policing had negative impacts on family life and connection, which then in turn impacted wellbeing and job performance:

> *"In that chaotic 24/7 home life that comes as an outcome of being a shift worker, where they don't talk to their wife or their partner. Their children's relationships are not very good. They're always sleeping. They're not eating properly. They're always fatigued. And then, they'll bring it to work."*

- Commander

This perspective reflects concerns the reports of lower ranked officers, whereby there seemed to be a disproportionately high number of officers experiencing family and marital difficulties.

2.3.5 Clear and Open Communication

Clear and open communication was also described as important by many police officers.

> *"If they are able to talk about it, it definitely opens up more channels and maybe commanders who may not have been so supportive… If, sometimes it's like if we understand as well, if you tell us and talk to us and we understand as well, we can help you. I think the lack of understanding and that person might be going through stuff that I'm… You don't know. And that is hard, but I think if there's understanding on both ways, I think we're generally pretty good at managing and supporting."*

- 20-year veteran

Examples of clear and open communication included:

- Officers being able to communicate their needs and concerns to supervisors – this results in supervisors being able to better fulfil the needs of officers; and
- Officers being respectful and transparent in their communication with other staff members.

There were many instances whereby officers felt that this need was not met. In these circumstances officers reported that a lack of communication often resulted in negative outcomes (e.g., officers feeling frustrated at management, poor decision-making, unnecessary stress and anxiety).

> *"Powers that be make these decisions but I can now, sort of, understand why it comes about. And there are reasons. But that just doesn't get fed down and I think commanders, region commanders, even just inspectors sometimes, they just don't have time, because they are not people persons."*

- 20-year veteran

Examples of contexts where this need was either not supported or thwarted included:

- Lack of communication from management regarding new decisions;
- Disconnect between frontline workers and management regarding what is happening in the field;
- Officers not being made aware that they have a complaint against them or miscommunication about complaints process;
- Escalation of conflict with public due to lack of verbal communication; and
- Letting personal stress build up until mental health is in crisis – lack of help-seeking behaviours.

Senior Leadership Perspectives:

Many commanders reported that they believed clear and open communication was necessary for staff to function well. Commanders believed that better communication led to better morale and a perception amongst officers that they were being treated fairly and respectfully:

> *"Setting the tone in the command that everything is open, honest, transparent and in good faith, I think they know that it's a fair workplace."*

- Commander

Some commanders felt that communication with injured officers was often difficult. For example, one commander described feeling frustrated with failed attempts to communicate with unwell officers, who later would report they felt shunted by the police force:

> *"They don't want to talk to you. I think they've made their mind up. I'm not coming back, so they make it very difficult for the contact. That can sometimes later be used against you too. They say, no-one ever talked to me and no-one would ever contact me, and I was left alone. But they won't answer the bloody phone, or you leave messages, or they directly tell you, do not contact me, I do not want to be contacted by anybody in the cops. You say, listen you've got an obligation for us to try and assist you."*

- Commander

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3. Implications for Relatedness Support

These findings suggest the following strategies could be implemented to enhance relatedness satisfaction:

3.1 Prioritising supporting and respectful working relationships that are free from bullying, discrimination, and intimidation;

3.2 Cultivating managers who genuinely care about colleagues and follow-up after critical incidents and are approachable and compassionate,

3.3 Providing institutional support for wellbeing including organisational support and due diligence, counselling, access to mental health training and resources, and buddy support systems;

3.4 Reinforcing the importance of taking time out from the job and seeking support externally from friends, family, and establishing friendships with co-workers; and

3.5 Enacting clear and open communication between officers and managers.

2.4 RESULTS: SALIENCE OF PSYCHOLOGICAL NEEDS ACROSS THE CAREER

In addition to understanding the degree to which needs were being supported in the NSWPF, we hoped to understand whether experiences of needs satisfaction and frustration were different for officers at different career stages. To do this we compared the responses of officers in the earliest stages of their careers (e.g., new-recruits at the academy and in the field), officers who were experienced veterans (20-year veterans), officers in senior leadership roles (e.g., commanders), and officers who had been placed on restricted duties.

2.4.1 Needs Support and Thwarting Across Career Stage

Our goal was to examine the extent to which autonomy, competence, and relatedness needs were supported or thwarted amongst each participant group. To explore this, we used two methods. Firstly, we examined the proportion of officers in each participant group who reported experiences of needs support and thwarting. This was done by noting the proportion of participants in each group who reported at least one experience of needs support and thwarting in each category. Secondly, we wanted to understand the extent to which officers discussed experience of needs support and thwarting. To do this we counted the number of words coded for each sub-theme (e.g., autonomy support) to calculate a proportion of words coded as a sub-theme within each interview.

2.4.2 Autonomy and Career Stage

Our findings for autonomy across career stages are demonstrated in Figure 7 and are summarised by the following:

- Senior leadership and new-recruits in the field (T2) had the highest rates of participants (100% and 86% respectively) who reported autonomy supporting contexts;

- Senior leadership, as well as new-recruits at the academy (T1), and in the field (T2), were more likely to report experiences of autonomy support than autonomy thwarting. This difference was largest after officers had completed their academy training;

- Restricted duty officers were least likely (50%) to report experiencing autonomy support;

- Restricted duty officers and twenty-year veterans were more likely to report autonomy thwarting compared to autonomy supporting experiences. This difference was most substantial for restricted duty officers;

- Restricted duties officers were most likely to report experiences of autonomy thwarting (100%). In contrast, new-recruits on the field were least likely to report experiences of autonomy thwarting (29%); and

- Data regarding the proportion of words in each interview showed a similar pattern. New-recruit interviews discussed autonomy support more frequently than all other groups (4% of total interview word count), and discussed autonomy thwarting less than any other group (< 1% of entire interview word count).

Overall, *early career officers and trainees exhibited higher levels of autonomy satisfaction*, while older officers were more likely to report frustration of autonomy needs.

Figure 7. Autonomy support and thwarting across police career stages as measured by percentage of interviews with examples of autonomy support and thwarting coded in text.

2.4.3 Competence and Career Stage

Our findings for competence are demonstrated in Figure 8 and summarised by the following:

- Senior leadership and new-recruits in the field (T2) had the highest rates of participants (100% and 86% respectively) who reported competence supporting contexts. New-recruits at the academy were least likely (38%) to report experiencing competence support;

- New-recruits in the field (T2) were the only group that had more participants reporting competence supporting experiences compared to competence thwarting experiences;

- New-recruits at the academy (T1), restricted duty officers and twenty-year veterans were more likely to report competence thwarting compared to competence supporting experiences. This difference was most substantial for restricted duty officers;

- Senior Leadership and restricted duties officers were most likely to report experiences of competence thwarting (100%). In contrast, new-recruits at the academy were least likely to report experiences of competence thwarting (62%); and

- Data regarding the proportion of words in each interview showed a similar pattern. New-recruit interviews discussed competence support more frequently than all other groups (3% of total interview word count). In contrast, 20-year veterans discussed competence thwarting more frequently than any other group (7% of word count).

Overall, *new recruits in the field exhibited higher levels of competence satisfaction, while officers that had served longer in the NSWPF were more likely to report frustration of competence needs.*

Competence Support vs Thwarting Across Career Stage

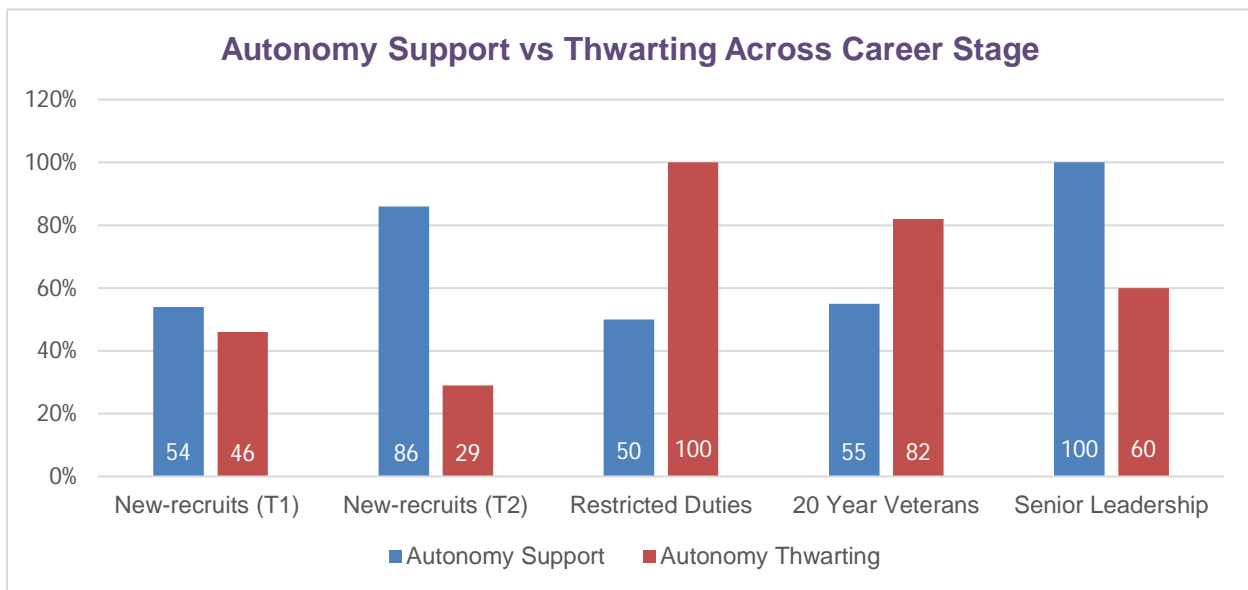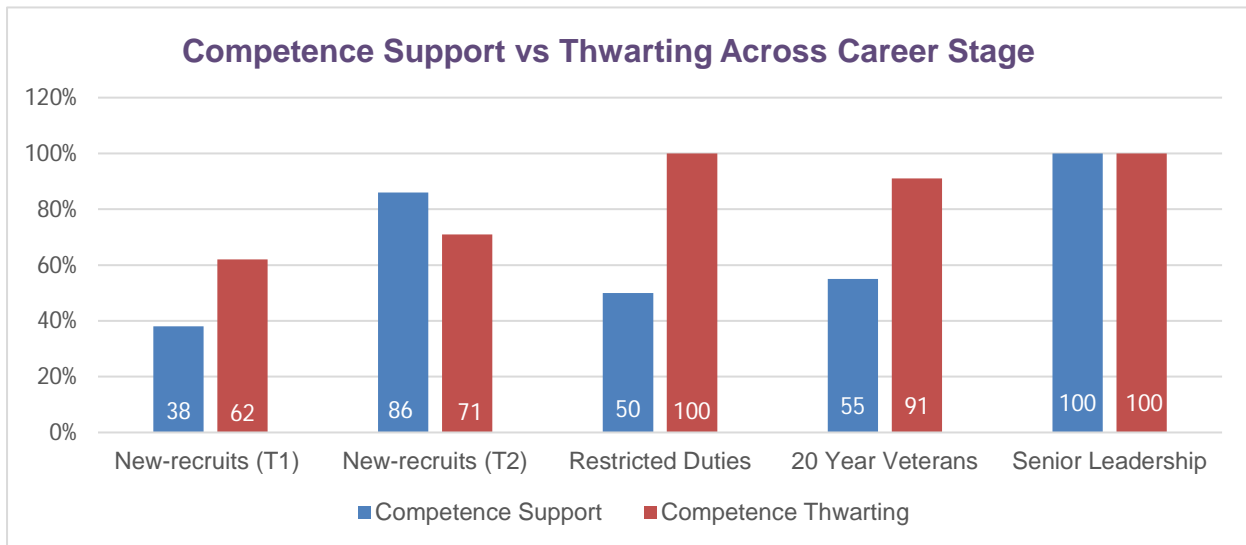| Career Stage	Competence Support	Competence Thwarting
New-recruits (T1)	38	62
New-recruits (T2)	86	71
Restricted Duties	50	100
20 Year Veterans	55	91
Senior Leadership	100	100

Figure 8. Competence support and thwarting across police career stages as measured by percentage of interviews with examples of competence support and thwarting coded in text.

2.4.4   Relatedness and Career Stage

Our findings for relatedness are demonstrated in Figure 9 and are summarised by the following:

- Senior leadership and new-recruits in the field (T2) had the highest rates of participants (100%) who reported relatedness supporting contexts. Restricted duties officers were least likely (75%) to report experiencing relatedness support;

- Both new-recruits at the academy (T1) and in the field (T2) had more participants reporting relatedness supporting experiences compared to relatedness thwarting experiences;

- Restricted duties officers and 20-year veterans were more likely to report relatedness thwarting compared to relatedness supporting experiences. This difference was most substantial for restricted duties officers;

- Twenty-year veterans, senior leadership, and restricted duties officers were most likely to report experiences of relatedness thwarting (100%). In contrast, new-recruits at the academy were least likely to report experiences of relatedness thwarting (69%);

- Data regarding the proportion of spoken word in each interview showed a similar pattern. New-recruit interviews discussed relatedness support more frequently than all other groups (9% of total interview word count). In contrast, twenty-year veterans reported competence thwarting more frequently than any other group (16% of word count). Restricted duties officers also reported very high amounts of relatedness thwarting (11% of word count); and

- Relatedness support and thwarting were more often referred to than any other psychological need.

Overall, *new-recruits in the field exhibited higher levels of relatedness satisfaction*, while *officers that had served longer in the NSWPF were more likely to report frustration of relatedness needs.*
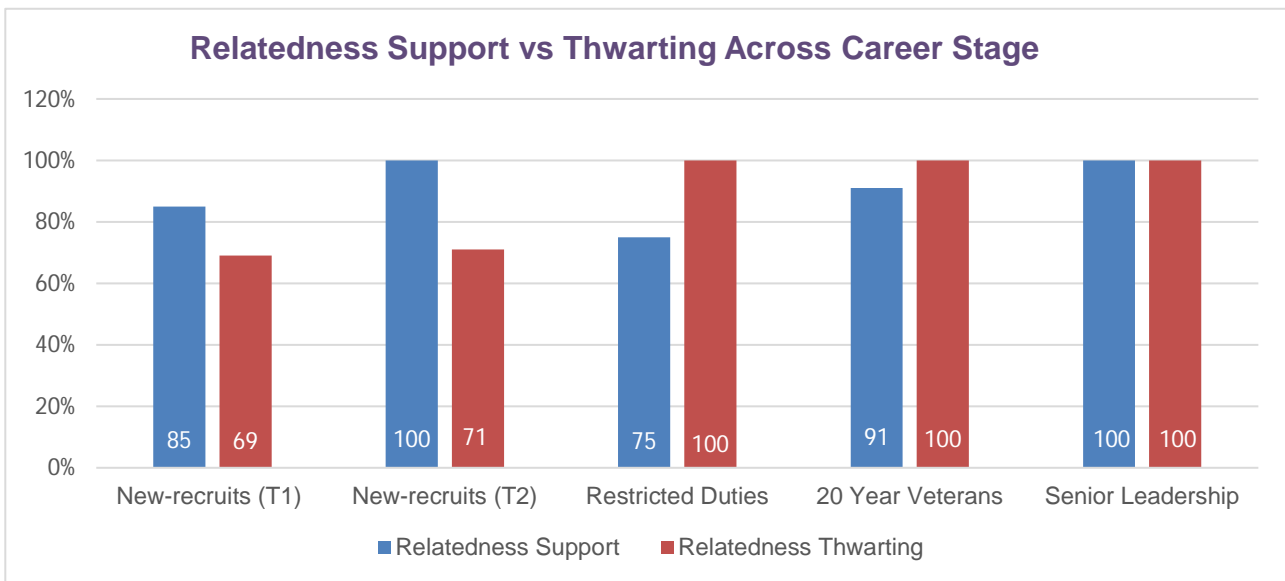
Figure 9. Relatedness support and thwarting across police career stages as measured by percentage of interviews with examples of relatedness support and thwarting coded in text.

4. Implications of the Salience of Psychological Needs Across the Career Span

These findings suggest that psychological needs are salient across the career span. Recommendations are as follows:

4.1 Successful strategies could include the support of autonomy, competence, and relatedness needs for new recruits and early career officers; and

4.2 Targeting autonomy, competence, and relatedness needs could be beneficial for veterans and restricted officers.

2.5 RESULTS: PSYCHOLOGICAL NEEDS AND WELLBEING

A third aim of this project was to explore the relationship between needs fulfillment and mental health. Mental health was coded as a dichotomous variable. Participants were classified as having "lower wellbeing" if they reported experiences of mental health difficulties (e.g., depression, anxiety, panic attacks, suicidal ideation, substance abuse disorder). Participants who did not report mental ill-health were classified into a "higher wellbeing" comparison group. We did not include senior leadership in this analysis as they did not explicitly discuss their own mental health (their reflections were predominately focused on their perceptions of the organisation and their leadership roles).

Overall, 9 interviews were classified as reflecting "lower wellbeing", and 23 interviews were classified as "higher wellbeing." All 9 interviews classified as lower wellbeing involved stories of exposure to trauma, compared to 43% of interviews classified as higher wellbeing. To explore the relationship between wellbeing and psychological needs we compared the proportion of needs supporting and thwarting contexts reported by officers who disclosed mental health difficulties with those who did not.
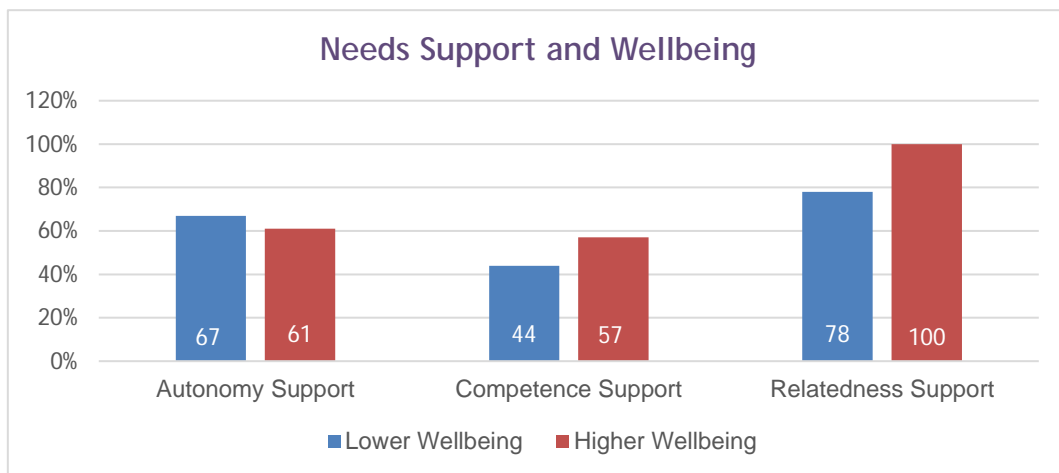
Figure 10. Needs support and wellbeing as measured by percentage of interviews classified as 'low' or 'high' wellbeing.
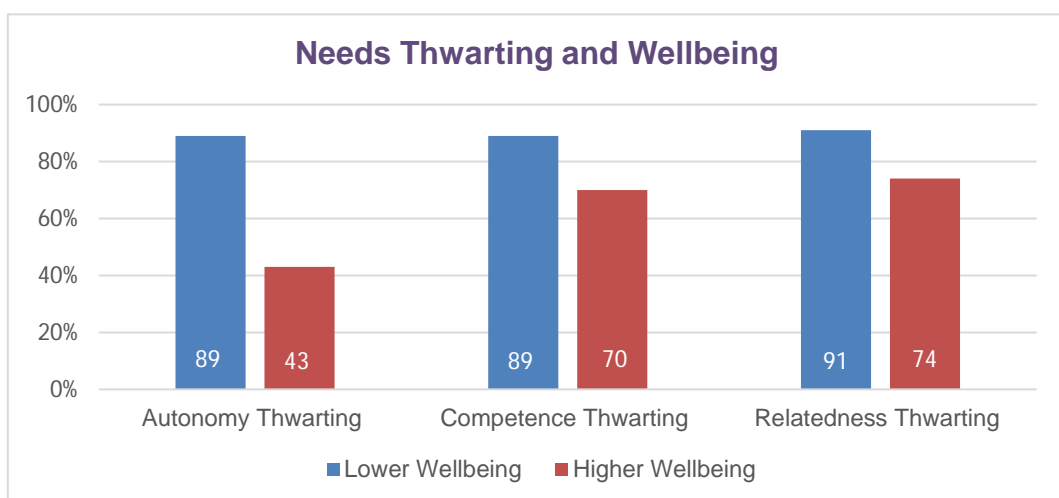
Figure 11. Needs thwarting and wellbeing as measured by percentage of interviews classified as 'low' or 'high' wellbeing.

Our findings demonstrated the following:

- There was a consistent pattern demonstrating that officers with lower wellbeing (i.e., more signs of clinically significant psychological distress) were more likely to report need thwarting experiences compared to their peers with higher wellbeing;

- Needs thwarting for officers with lower wellbeing ranged from (61-100%), while needs thwarting for officers with higher wellbeing ranged from (43-74%); and

- All officers with lower wellbeing reported experiences of relatedness thwarting.

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5. Implications of the Relation Between Psychological Needs and Mental Health

These findings suggest that mental health outcomes are likely to be worse when psychological needs are thwarted:

5.1 Once again, needs support is likely to lead to better mental health and wellbeing outcomes, and

5.2 Measurement of needs support and thwarting may lead to early indication of mental health concerns.

3 Study: Predictors of Wellbeing in the NSW Police Force

BACKGROUND

The goal of Study 3 was to investigate factors associated with the wellbeing of NSWPF staff, and to explore whether findings in Study 1 and 2 were supported by quantitative data. We also aimed to extend on our findings by exploring relationships between needs satisfaction and other demographic variables including gender, marital status, and employment role. Finally, we sought to explore relationships between wellbeing variables and key human resource outcomes such as uptake of long-term sick leave and restricted duties.

RESEARCH QUESTIONS

The key research questions were as follows:

1. **What are the current levels of wellbeing and psychological distress reported by NSWPF staff?**

    1.1. What percentage of officers report clinically significant levels of psychological distress and alcohol consumption?

    1.2 How do NSWPF staff reports of wellbeing and psychological distress compare to general population norms?

2. **How satisfied and engaged are NSWPF officers with current wellbeing programs?**

    2.1. What are the current levels of staff participation across available wellbeing programs?

    2.2. What programs do staff perceive as most helpful?

3. **What contexts support needs satisfaction and wellbeing of police officers?**

    3.1. Are career stage variables (e.g., rank, age, and years in force) or other demographic variables related to needs satisfaction and wellbeing amongst NSWPF staff?

    3.2. Are long-term sick leave and restricted duties placement associated with needs satisfaction and wellbeing amongst NSWPF staff?

    3.3. What psychological and behavioural factors are associated with needs satisfaction and wellbeing amongst NSWPF staff?

Based on our qualitative findings and previous literature we predicted that: needs satisfaction would be positively associated with wellbeing and negatively associated with mental-ill health outcomes.

METHOD

Participants completed an online survey with a series of questionnaire items that measured key demographic variables, wellbeing, psychological distress and mental-ill health, alcohol use, psychological needs satisfaction, uptake of sick leave or restricted duties, and physical activity.

SPSS was used to analyse data exported from Qualtrics. Multiple-imputation was employed to account for missing data from psychometric scales as survey design utilised a matrix-sampling technique to minimise participant time burden during survey completion. Demographic data was not imputed for any analyses. The below results provide a snapshot regarding participant demographics.

PARTICIPANTS: A SNAPSHOT OF POLICE OFFICERS AND STAFF

Study 3 had a high participation rate, with 5269 participants taking part in the online survey. Of the participants, 59.4% are male and 39.2% are female. Table 2 (see below) outlines participant demographics gender and relationship status breakdown.

TABLE 2: GENDER AND RELATIONSHIP STATUS OF PARTICIPANTS

	Single	In a de facto relationship	Married	Separated	Divorced	Widowed	Prefer not to say	Subtotal
Male	5.1%	7.9%	41.7%	1.7%	2.1%	0.2%	0.7%	**59.4%**
Female	6.6%	8.0%	19.7%	1.4%	2.5%	0.4%	0.6%	**39.2%**
Other	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	**0.0%**
Prefer not to say	0.1%	0.1%	0.5%	0.1%	0.0%	0.0%	0.6%	**1.4%**
Subtotal	**11.8%**	**16.0%**	**61.9%**	**3.2%**	**4.6%**	**0.6%**	**1.9%**	

% reported as 'valid percent' of participants who provided demographic information relating to gender and marital status.

Most participants were 'sworn staff' (79.1%), while only 20.9% of participants were 'unsworn'. 3.43% of participants identify as Aboriginal or Torres Strait Islander. The average tenure in the NSWPF force of survey participants was ≈16.3 years. Male average tenure was slightly longer (≈17.3 years), compared to female average tenure (≈14.7 years). Most participants were either a sergeant or senior constable (see Table 3). Less than 2% of participants were probationary constables and less than 2% held the rank of superintendent or above.

TABLE 3: RANK OF PARTICIPANTS

NSWPF – Rank of Respondents	n	%
NSWPF Survey Data		
Superintendent or above	78	1.9
Chief Inspector	148	3.7
Inspector	174	4.3
Senior Sergeant	122	3.0
Sergeant	1008	24.9
Leading Senior Constable	179	4.4
Incremental Senior Constable	553	13.6
Senior Constable	1368	33.8
Constable	344	8.5
Probationary Constable	78	1.9

% reported as 'valid percent' of participants who provided demographic information relating to rank.

The average age of male participants was ≈45.8 years old, while average age for female participants was ≈44.0 years old. Figure 12 (see next page) shows the percentage distribution of age per gender classification.

Age Distribution by Gender
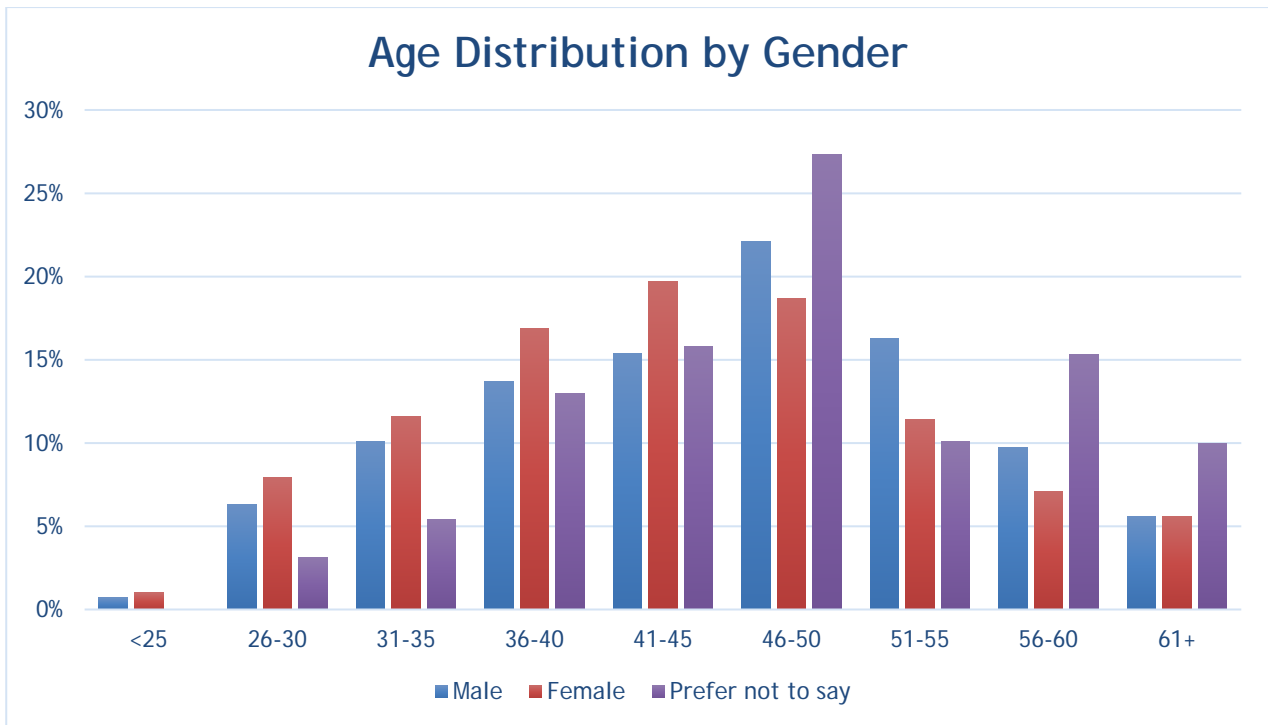
Figure 12. Percentage of age distribution by gender. % reported as 'valid percent' of participants who provided demographic information relating to gender and age.

RESULTS

3.1.1 What are the current levels of wellbeing and psychological distress reported by NSWPF staff?

To explore wellbeing and mental-ill health, our research used measures of psychological distress, wellbeing, general life satisfaction, and alcohol consumption.

Psychological Distress (K6 Mental Health Screener)

Psychological Distress was measured by the Kessler-6 (K6), a subset of six questions from the Kessler Psychological Distress Scale-10 (K10). Scores range between a minimum possible score of 6, and a maximum possible score of 30. Kessler et al. (2003; 2010; also see ABS website[2]) recommends that a dichotomous grouping can be used to identify those at risk of serious mental illness:

- 6-8: *No Probable Serious Mental Illness*
- 19-30: *Probable Serious Mental Illness*

Individuals who fall between scores of 8-19 are likely to be experiencing mild-moderate psychological distress. The results reported here are based on the non-imputed dataset so results can be accurately interpreted within provided clinical cut-offs, and as such reflect actual responses of participants who took the survey.

Our results showed that 35% of participants did not report levels of psychological distress that would be consistent with mental ill-health. In contrast, 8% of staff met criteria for 'probable serious

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[2] https://www.abs.gov.au/ausstats/abs@.nsf/lookup/4817.0.55.001Chapter92007-08

mental illness', while 57% of staff are likely to be experiencing psychological distress consistent with a mild-moderate mental disorder.

Wellbeing and General Life Satisfaction

Wellbeing was measured by the Short Warwick Edinburgh Mental Well-Being Scale. It is a 7-item scale that is used for monitoring mental wellbeing among the general population. The average wellbeing scores for police employees (22.36) was only slightly under population averages reported in the United Kingdom (23.61)[3].

General Life Satisfaction was measured via a single-item question that asked participants to rate their life satisfaction on a scale from 0-10. Police employees indicated that their life satisfaction was reasonably high, with a mean score of 7.22. This was slightly lower than the Australian average of 7.3[4].

Alcohol Use (AUDIT – Alcohol Use Disorders Identification Test)

Alcohol use was measured by the World Health Organization's Alcohol Use Disorders Identification Test (AUDIT)[5]. We used the three questions that measure alcohol consumption. World Health Organization guidelines state that scores of 6 or more may indicate a risk of alcohol-related harm. Again, the results reported here are based on the non-imputed dataset so results can be accurately interpreted within provided clinical cut-offs.

Our results showed the following:

- Most participants (75.4%) reported that they used alcohol below the cut-off for potential harm; and
- Almost one quarter (24.6%) of participants reported they consumed alcohol at risky levels.

Key Points: NSWPF Mental Health and Wellbeing

A. More than half of NSWPF staff who participated reported clinically significant levels of psychological distress.

B. Wellbeing and general life satisfaction average scores were only slightly below population norms.

C. Most NSWPF staff who participated reported safe alcohol consumption, however, one quarter of respondents reported usage regarded as 'risky'.

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[3] https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/using/howto/wemwbs_population_norms_in_health_survey_for_england_data_2011.pdf - UK Population Study Average for SWEMBS
[4] http://www.oecdbetterlifeindex.org/topics/life-satisfaction/
[5] http://nceta.flinders.edu.au/files/3314/2257/4957/Right_Mix_3.pdf

3.1.2 How satisfied and engaged are NSWPF staff with current wellbeing programs?

To explore whether officers were satisfied and engaged with current wellbeing initiatives we asked NSWPF staff whether they had participated in any of the available programs, and if so, how helpful they had found the service.

Participation rates are provided below (see Table 4). Your Health Check (Health Screening Service) and the Employee Assistance Program (Counselling) were the most commonly used service amongst participants.

We also explored the degree to which participants had engaged in existing NSWPF Wellbeing Programs, and the perceived helpfulness of each respective program. The programs that most NSWPF employees had accessed was the Employee Assistance Program (Counselling) and Your Health Check (Health Screening Service). Less than 3% of participants had utilised family support services, health and suicide prevention training, and pastoral care services.

TABLE 4: WELLBEING PROGRAM PARTICIPATION

Wellbeing Program Participation Rates (T2 only)	n	%
Employee Assistance Program (Counselling)	316	11.8
Peer Support Program	104	3.9
Your Health Check (Health Screening Service)	391	14.7
Reconditioning Program (Rehabilitative and Preventative Health Centre)	110	4.1
Your Health First (Health and Suicide Prevention Training)	40	1.5
WellCheck Program (Assessment and Screening for High Risk Roles)	173	6.5
Incident Support (On site trauma psychologist post event)	95	3.6
Chaplaincy Program (Pastoral Care Services)	53	2.0
Family Support Coordinator (Family Support Services)	10	0.4

Perceived helpfulness of programs is provided in Table 5 (see next page). The Reconditioning (RECON) Program had the highest rates of participant perceived helpfulness, with 78.2% of participants rating the program as extremely helpful. Other programs with very high ratings of perceived helpfulness included the Peer Support Program, Your Health First, and the Chaplaincy Program. Less people regarded the Employee Assistance Program, and the WellCheck program, as helpful. Not enough people rated the Family Support Coordinator Program to reliably conclude the helpfulness of this program.

TABLE 5: WELLBEING PROGRAM PERCEIVED HELPFULNESS

Wellbeing Program Perceived Helpfulness	Not at all Helpful	Somewhat Helpful	Helpful	Very – Extremely Helpful
Employee Assistance Program	51 (16.1%)	91 (28.8%)	91 (28.8%)	83 (26.2%)
Peer Support Program	3 (2.9%)	13 (12.5%)	42 (40.4%)	46 (44.3%)
Your Health Check	6 (1.5%)	83 (21.3%)	180 (46.3%)	120 (30.9%)
Reconditioning (RECON) Program	1 (0.9%)	6 (5.5%)	17 (15.5%)	86 (78.2%)
Your Health First	0 (0.0%)	7 (17.5%)	14 (35.0%)	19 (47.5%)
WellCheck Program	28 (16.2%)	51 (29.5%)	59 (34.1%)	35 (20.2%)
Incident Support	7 (7.5%)	25 (26.9%)	37 (39.8%)	24 (25.8%)
Chaplaincy Program	2 (3.8%)	8 (15.1%)	14 (26.4%)	29 (54.8%)
Family Support Coordinator	2 (20%)	2 (20%)	2 (20%)	4 (40%)

Key Points: NSWPF Staff Engagement and Satisfaction with Current Services

A. The Employee Assistance Program (Counselling) and Your Health Check (Health Screening Service) are the most widely used services amongst participants;

B. The Peer Support Program, Your Health First, and the Chaplaincy Program appear to attract highest ratings of perceived helpfulness;

C. Despite high numbers of participants experiencing psychological distress (>60%), only small numbers of staff report engagement with support services.

3.1.3 What contexts support needs satisfaction and wellbeing?

Relationship Between Psychological Needs Satisfaction and Wellbeing Outcomes

Our qualitative results provided valuable insights regarding the role of psychological needs satisfaction and wellbeing, suggesting that satisfaction of autonomy, relatedness, and competence needs is a precursor to positive mental health. We aimed to explore this hypothesis by testing the relationship between psychological needs satisfaction and wellbeing outcomes. Results are as follows:

Autonomy Satisfaction:

- Autonomy satisfaction had a medium sized positive relationship with general life satisfaction ($r = .38$), and a large effect for wellbeing ($r = .54$).
- In contrast, autonomy satisfaction was negatively related to psychological distress ($r = -.46$) and PTSD symptoms ($r = -.45$).

Relatedness Satisfaction:

- Relatedness satisfaction had a medium sized relationship with general life satisfaction ($r =$ .39), and a large effect for wellbeing ($r = .51$).
- Relatedness satisfaction was negatively related to psychological distress ($r = -.44$) and PTSD symptoms ($r = -.41$).

Competence Satisfaction:

- Competence satisfaction had a medium sized relationship with general life satisfaction ($r =$ .34), and a medium effect for wellbeing ($r = .47$).
- Competence satisfaction was negatively related to psychological distress ($r = -.44$) and PTSD symptoms ($r = -.35$).

These findings suggest that needs satisfaction is related to positive mental health and wellbeing. Subsequently, it is crucial to examine correlates of both needs satisfaction and wellbeing.

Key Points: Relationship Between Needs Satisfaction and Wellbeing Outcomes

A. As predicted, autonomy, competence, and relatedness satisfaction are all positively and significantly related to general life satisfaction and wellbeing;

B. In contrast, autonomy, competence, and relatedness satisfaction are all negatively and significantly related to measures of mental ill-health (psychological distress and PTSD symptoms).

Relationships Between Gender, Needs Satisfaction and Wellbeing

Gender and Needs Satisfaction:

Compared to female participants, male participants reported higher scores for autonomy and competence satisfaction. The size of these differences were small. Interestingly, despite reporting higher levels of autonomy frustration, male participants also reported higher levels of autonomy frustration. Again, this effect was small. In contrast, female participants reported higher scores for competence frustration and relatedness satisfaction. Participants who preferred not to state their gender reported higher scores for competence frustration and relatedness frustration compared to other participants.

A Cohen's *d* effect size measures the level of difference between two groups. For the tables below, Cohen's *d* scores have been highlighted where the difference is medium or large between the group in question compared to the overall sample population. These highlighted scores include an up or down arrow to indicate whether the response is higher or lower the sample population's response (see Table 6).

TABLE 6: SELF DETERMINATION THEORY BY GENDER AND EFFECT SIZE COMPARED AGAINST THE POLICE POPULATION

	Gender			Police Population
	Male	Female	Prefer not to say	
Autonomy Satisfaction	3.21	3.18	⬇ 2.86	3.19
Autonomy Frustration	1.58	1.34	1.49	1.49
Competence Satisfaction	4.10	4.06	3.97	4.08
Competence Frustration	0.46	0.53	⬆ 0.75	0.49
Relatedness Satisfaction	3.33	3.42	⬇ 3.14	3.36
Relatedness Frustration	0.68	0.68	0.91	0.68

medium effect size difference, and ▮ large effect size difference compared to the police population

Arrows indicate the direction of the effect size compared against the police population

Gender distribution: 59.4% Male, 39.2% Female, and 1.4% Choose not to say

Gender and Wellbeing Outcomes:

We also explored whether gender was associated with wellbeing outcomes. We report here on correlations that are statistically significant (meaning that the association is greater than chance) and correlations with effect sizes larger than > .10.

Results indicated that there were no significant or sizeable correlations between gender and any mental health or psychological wellbeing variables, suggesting that male and female police officers report similar levels of distress. There was a small correlation (r = -.21) between gender and alcohol consumption, which indicated that male NSWPF staff may consume alcohol more frequently.

There was a small but significant relationship between gender and experience of social bullying (r = .10), indicating that being female is associated with experiences of bullying within social contexts at work. There was no statistically significant difference in reported discriminatory bullying between male and female officers.

Key Points: Relationship Between Needs Satisfaction, Wellbeing and Gender

A. Average scores showed that male NSWPF staff were more likely to report higher levels of autonomy and competence satisfaction; female NSWPF staff were more likely to report higher levels of relatedness satisfaction. Nonetheless, effect sizes were small for most differences, so should be interpreted with caution.

B. Participants who chose not to disclose their gender reported poorer needs satisfaction.

C. Correlation data showed that gender was not strongly related to most wellbeing outcomes, with the exception of alcohol use and social bullying.

Relationship Between Marital Status and Needs Satisfaction

Participants who preferred not to report their marital status had the lowest scores for all three satisfaction measures, and the highest scores for all three frustration measures compared to other NSWPF staff (see Table 7). Married participants reported higher autonomy satisfaction, autonomy frustration and competence satisfaction, and lower competence frustration and relatedness frustration than their single counterparts. These effect sizes were small in nature.

TABLE 7: SELF DETERMINATION THEORY BY MARTIAL STATUS AND EFFECT SIZE COMPARED AGAINST THE POLICE POPULATION

	Marital Status							
	Single	In a de facto relationship	Married	Separated	Divorced	Widowed	Prefer not to say	Police Population
Autonomy Satisfaction	3.14	3.17	3.23	3.09	3.03	3.36	⬇ 2.79	3.19
Autonomy Frustration	1.44	1.49	1.49	1.44	1.50	⬇ 1.14	1.64	1.49
Competence Satisfaction	4.02	4.03	4.12	3.96	4.01	4.01	3.95	4.08
Competence Frustration	0.57	0.56	0.44	0.62	0.52	0.57	0.68	0.49
Relatedness Satisfaction	3.39	3.37	3.37	3.33	3.37	3.44	⬇ 2.95	3.36
Relatedness Frustration	0.72	0.68	0.65	0.69	0.66	0.77	⬆ 1.22	0.68

▢ medium effect size difference, and ▮ large effect size difference compared to the police population

Arrows indicate the direction of the effect size compared against the police population

---

Key Points: Relationship Between Needs Satisfaction, Wellbeing and Marital Status

A. Although there were some differences between marital status groups, average scores showed that NSWPF staff reported similar levels of needs satisfaction and frustration regardless of their marital status.

B. The one exception to this trend was that widowed officers reported lower levels of autonomy frustration compared to other staff. Staff who chose not to disclose their marital status reported the lowest scores on all three satisfaction measures.

Relationship Between Staff Roles and Needs Satisfaction

Unsworn staff reported higher scores for the three satisfaction measures, and lower scores for the three frustration measures compared to sworn staff. Participants who worked with the public reported higher results for autonomy frustration and competence frustration than their counterparts who do not work with the public. Most effect sizes between these groups were small.

TABLE 8: SELF DETERMINATION THEORY BY SWORN STATUS AND EFFECT SIZE COMPARED AGAINST THE POLICE POPULATION

	Sworn or Unsworn		
	Sworn staff member	Unsworn staff member	Police Population
Autonomy Satisfaction	3.16	3.31	3.19
Autonomy Frustration	1.56	⬇ 1.21	1.48
Competence Satisfaction	4.04	4.23	4.08
Competence Frustration	0.52	0.36	0.49
Relatedness Satisfaction	3.32	3.53	3.36
Relatedness Frustration	0.69	0.62	0.68

    medium effect size difference, and   large effect size difference compared to the police population

Arrows indicate the direction of the effect size compared against the police population

Sworn distribution: 79.1% Sworn, 20.9% Unsworn

TABLE 9: SELF DETERMINATION THEORY BY WORKING WITH PUBLIC STATUS AND EFFECT SIZE COMPARED AGAINST THE POLICE POPULATION

	Working with the Public		
	No	Yes	Police Population
Autonomy Satisfaction	3.22	3.18	3.19
Autonomy Frustration	1.27	1.58	1.48
Competence Satisfaction	4.13	4.06	4.08
Competence Frustration	0.44	0.50	0.49
Relatedness Satisfaction	3.39	3.35	3.36
Relatedness Frustration	0.66	0.68	0.67

    medium effect size difference, and   large effect size difference compared to the police population

Arrows indicate the direction of the effect size compared against the police population

Key Points: Needs Satisfaction and Staff Role

A. Unsworn staff reported higher scores for the three satisfaction measures, and lower scores for the three frustration measures compared to sworn staff. This effect was most pronounced for autonomy frustration.

B. Participants who work with the public reported higher rates of autonomy and competence frustration compared to staff who do not work with the public. These effects, however, were small.

Relationship Between Command Type and Needs Satisfaction

Commissioners and Executive Support Offices reported the following compared to overall police population:

- Medium effect size higher for autonomy satisfaction;
- Large effect size lower for autonomy frustration;
- Medium effect size higher for competence frustration; and
- Large effect size higher for relatedness satisfaction.

Finance & Business Services reported the following compared to overall police population:

- Medium effect size higher for autonomy satisfaction;
- Medium effect size lower for autonomy frustration;
- Medium effect size higher for competence satisfaction; and
- Large effect size higher for relatedness satisfaction.

The Office of the General Counsel reported the following compared to overall police population:

- Medium effect size lower for autonomy satisfaction;
- Medium effect size lower for competence satisfaction; and
- Medium effect size lower for relatedness satisfaction.

Performance Improvement & Planning reported the following compared to overall police population:

- Medium effect size lower for autonomy satisfaction;
- Medium effect size lower for competence satisfaction; and
- Medium effect size higher for competence frustration.

Investigations and Counter Terrorism reported the following compared to overall police population:

- Medium effect size higher for competence satisfaction; and
- Medium effect size higher for relatedness satisfaction.

Tables 10 to 12 below provide detailed insight into each command and the reported scores for the six measures of Self Determination Theory.

TABLE 10: SELF DETERMINATION THEORY BY COMMAND TYPE AND EFFECT SIZE COMPARED AGAINST THE POLICE POPULATION – PART 1

	Command	Commissioners and Executive Support Offices	Corporate Services	Business and Technology Services and Strategic Technology and Planning	Education and Training Command	Finance & Business Services
Autonomy Satisfaction	3.17	⬆ 3.49	3.22	3.26	3.17	⬆ 3.49
Autonomy Frustration	1.49	⬇ 0.83	1.38	⬇ 0.96	⬇ 1.16	⬇ 1.15
Competence Satisfaction	3.95	4.06	⬆ 4.29	4.11	4.07	⬆ 4.26
Competence Frustration	0.56	⬆ 0.86	0.42	0.39	⬇ 0.23	0.50
Relatedness Satisfaction	3.32	⬆ 3.86	3.45	3.41	3.40	⬆ 3.86
Relatedness Frustration	0.65	0.77	0.73	⬇ 0.33	0.63	0.60

medium effect size difference, and ⬛ large effect size difference compared to the police population

Arrows indicate the direction of the effect size compared against the police population

TABLE 11: SELF DETERMINATION THEORY BY COMMAND TYPE AND EFFECT SIZE COMPARED AGAINST THE POLICE POPULATION – PART 2

	Human Resources Command	Office of the General Counsel	Performance Improvement & Planning	Professional Standards Command	Shared Services	Field Operations - Metropolitan
Autonomy Satisfaction	3.26	⬆ 3.49	⬆ 3.49	3.13	3.28	3.23
Autonomy Frustration	⬇ 1.01	1.46	1.38	⬇ 1.09	⬇ 1.09	1.52
Competence Satisfaction	4.14	⬇ 3.91	⬇ 3.69	4.08	4.19	4.08
Competence Frustration	⬇ 0.19	0.60	⬆ 0.92	0.53	⬇ 0.23	0.48
Relatedness Satisfaction	⬆ 3.59	⬇ 2.92	3.29	3.33	3.30	3.42
Relatedness Frustration	⬇ 0.38	0.78	0.69	0.73	0.49	0.61

medium effect size difference, and ⬛ large effect size difference compared to the police population

Arrows indicate the direction of the effect size compared against the police population

TABLE 12: SELF DETERMINATION THEORY BY COMMAND TYPE AND EFFECT SIZE COMPARED AGAINST THE POLICE POPULATION – PART 3

	Investigations and Counter Terrorism	Field Operations - Country	Major Events and Incidents Group	State Crime Command	Specialist Operations	Police Population
Autonomy Satisfaction	3.33	3.13	3.36	3.15	3.16	3.19
Autonomy Frustration	1.45	1.71	⬇ 1.22	1.23	1.48	1.49
Competence Satisfaction	⬆ 4.25	4.09	4.04	3.97	4.12	4.08
Competence Frustration	0.47	0.56	0.44	0.53	0.45	0.49
Relatedness Satisfaction	⬆ 3.62	3.30	3.53	3.29	3.31	3.36
Relatedness Frustration	0.61	0.78	0.67	0.48	0.74	0.68

medium effect size difference, and ⬛ large effect size difference compared to the police population

Arrows indicate the direction of the effect size compared against the police population

Relationship Between Aboriginal and Torres Strait Islander Wellbeing in the Force

No significant correlation effects at or above >.10 were observed for Aboriginal and Torres Strait Islander participants and any wellbeing outcomes.

Relationship Between Career Stage Needs Satisfaction and Wellbeing

We explored whether career stage was associated with wellbeing outcomes. To do this, we used 3 metrics (year of birth, years in force, and rank). Year of birth was recorded as a continuous variable; whereby younger age was associated with higher numerical values for year of birth. Rank was coded with highest ranks as the smallest numerical value (e.g., 1) and lower ranks ordered afterwards (with ascending numbers). Results revealed the following patterns.

Needs Satisfaction, Years in the Police Force and Rank:

Compared to their more experienced counterparts, participants with less than 1 years' experience reported higher scores for autonomy satisfaction and relatedness satisfaction, and lower scores for autonomy frustration (Table 13). Participants with greater than 31 years' experience also reported higher scores for autonomy satisfaction.

Participants who have more than 21 years' experience reported higher scores for autonomy satisfaction and competence satisfaction, and lower scores for competence frustration than their counterparts who have between 1-20 years' experience. These participants also reporter higher scores for relatedness satisfaction and lower scores for relatedness frustration compared to their counterparts who have between 6-20 years' experience.

Small correlations existed between rank and psychological needs satisfaction, indicating that higher ranked officers were more likely to report higher levels of autonomy satisfaction ($r = -.10$) and competence satisfaction ($r = -.18$).

TABLE 13: SELF DETERMINATION THEORY BY YEARS IN THE POLICE FORCE

	<1 year	1-5 years	6-10 years	11-15 years	16-20 years	21-25 years	26-30 years	31+ years	Police Population
Autonomy Satisfaction	⬆ 3.46	3.17	3.14	3.12	3.08	3.26	3.26	⬆ 3.44	3.18
Autonomy Frustration	⬇ 1.00	1.36	1.45	1.54	1.62	1.49	1.59	1.42	1.50
Competence Satisfaction	4.05	3.99	4.00	4.07	4.10	4.19	4.16	4.18	4.08
Competence Frustration	0.42	0.58	0.56	0.53	0.53	0.35	0.38	0.36	0.49
Relatedness Satisfaction	⬆ 3.80	3.48	3.32	3.29	3.28	3.41	3.34	3.46	3.36
Relatedness Frustration	0.47	0.61	0.73	0.72	0.77	0.67	0.68	0.53	0.69

Years in the Force

medium effect size difference, and ⬛ large effect size difference compared to the police population

Arrows indicate the direction of the effect size compared against the police population

Relationship Between Career Stage and Wellbeing Indicators:

Mental Health and Psychological Wellbeing:

- There was a small correlation between years in the force, PTSD symptoms ($r = .14$), and psychological inflexibility ($r = .10$), suggesting a small but significant relationship between length of time served in the force, experience of PTSD symptoms and heightened levels of psychological inflexibility. This makes sense given that psychological inflexibility (e.g., avoidance of difficult thoughts and emotions) is a central feature of PTSD.
- Year of birth and rank were not strongly correlated with wellbeing outcomes.

Alcohol Consumption:

- A small to moderate correlation ($r = .29$) exists between age and alcohol consumption, indicating that younger NSPWF staff consume alcohol more frequently.
- In contrast, a small correlation ($r = .10$) between years in force and alcohol consumption indicates there is some relationship between length of time served in the force and frequency of drinking.
- Similarly, rank also exhibited a small correlation with alcohol consumption ($r = .11$), indicating that higher ranked officers were more likely to consume alcohol in greater quantities.

Bullying:

- A small correlation ($r = .18$) exists between year of birth and physical bullying, indicating that younger age of officers is associated with higher reports of physical bullying victimisation at work.
- Similarly, lower rank was also associated with higher rates of reported victimisation for verbal bullying ($r = .12$) and discriminatory bullying ($r = .12$) indicating that lower ranked officers were more likely to report higher rates of verbal and discriminatory victimisation.

Leave from Work:

- A small correlation ($r = -.15$) exists between year of birth and having taken long-term leave, suggesting that older police officers were more likely to have taken long-term leave from their duties.
- Similarly, length of time in the force was associated with having been on restricted duties ($r = .11$) and long-term leave ($r = .21$).

> ***Key Points: Career Stage, Needs Satisfaction, and Wellbeing Outcomes***
>
> *A. There was a small but significant correlation between PTSD symptoms, psychological inflexibility and years in the force.*
>
> *B. Younger officers may be more prone to physical bullying at work. An association also existed between lower ranks and higher rates of verbal and discriminatory bullying.*
>
> *C. Older officers and those who have served more time in the force are more likely to report being on long-term leave or on restricted duties.*
>
> *D. Staff with less than a year, and those with over 31 years' of experience reported the highest levels of autonomy satisfaction compared to all other groups.*

Other Psychological and Behavioural Factors as Correlates to Wellbeing

Our analyses also included key variables (burnout, psychological inflexibility, mindfulness, alcohol consumption, and physical activity) that have been shown in the literature to be linked to wellbeing.

Burnout (Emotional Exhaustion):

- Burnout was associated with a multitude of negative wellbeing outcomes including PTSD symptoms ($r = .61$), psychological distress ($r = .60$), alcohol consumption ($r = .12$), reduced wellbeing ($r = -.53$) and reduced life satisfaction ($r = .38$).
- Burnout was also negatively related to psychological need satisfaction ($r = -.35$ to $-.59$).

Psychological Inflexibility and Mindfulness:

- Psychological inflexibility was negatively associated with general life satisfaction ($r = -.54$), wellbeing ($r = -.56$), and needs satisfaction ($r = -.43$ to $-.39$), but was positively associated with psychological distress ($r = .69$) and PTSD symptoms ($r = .74$).
- Mindfulness was positively associated with general life satisfaction ($r = .38$), wellbeing ($r = -.47$), and needs satisfaction ($r = .35$ to $.44$), but negatively predicted psychological distress ($r = -.54$) and PTSD symptoms ($r = -.56$).

Alcohol Consumption:

- Alcohol consumption was primarily associated with PTSD symptoms ($r = .18$); but did not exhibit any other significant and strong effects with other wellbeing outcomes.

Physical Activity:

- Physical activity was associated with reduced PTSD symptoms ($r = -.10$), and higher general life satisfaction ($r = .13$) and wellbeing ($r = .12$)

> **Key Points: Psychological and Behavioural Factors as Correlates to Wellbeing**
>
> *A. Burnout and psychological inflexibility are positively associated with indicators of mental ill-health, and negatively associated with wellbeing and needs satisfaction.*
>
> *B. Mindfulness is positively associated with wellbeing outcomes and needs satisfaction, but negatively associated with indicators of mental ill-health.*
>
> *C. Alcohol consumption was surprisingly unrelated to many indicators of mental health; however, was positively associated with PTSD symptoms.*
>
> *D. Physical activity was negatively related to PTSD symptoms, and positively related to wellbeing outcomes.*

Correlates of Restricted Duties and Long-Term Sick Leave

A final goal of our analyses was to identify factors associated with placement on restricted duties and long-term sick leave. The following factors were negatively associated with long-term leave and restricted duties:

- Wellbeing was associated with lower rates of long-term sick leave ($r = -.14$), and restricted duties placement ($r = -.15$). Likewise, general life satisfaction was correlated negatively with restricted duties placement and long-term sick leave (both $r = -.15$).
- Mindfulness was associated with lower rates of long-term sick leave ($r = -.13$), and to a lesser degree restricted duties placement ($r = -.09$).
- Competence ($r = -.10$), relatedness ($r = -.14$), and autonomy satisfaction ($r = -.17$) were negatively associated with long-term sick leave. Relatedness ($r = -.12$) and autonomy satisfaction ($r = -.17$) were negatively associated with restricted duties placement.

The following factors were positively associated with long-term leave and restricted duties:

- PTSD symptoms were the strongest correlates of long-term sick leave ($r = .20$) and restricted duties ($r = .26$).
- Psychological distress was correlated with both long-term sick leave ($r = .17$) and restricted duties ($r = .18$).
- Psychological inflexibility was associated with higher rates of long-term sick leave ($r = .18$), and restricted duties ($r = .21$).
- Burnout was associated with higher rates of long-term sick leave ($r = .19$) and restricted duties ($r = .15$).
- Supervisory and social bullying (both $r = .11$) were associated with long-term sick leave.

> **Key Points: Correlates of Restricted Duties and Long-Term Sick Leave**
>
> *A. Indicators of mental ill-health, burnout, and psychological inflexibility are related to restricted duties and long-term sick leave. Supervisory and social bullying were associated with long-term sick leave.*
>
> *B. Indicators of wellbeing, mindfulness and psychological needs satisfaction were negatively associated with restricted duties and long-term sick leave*

4 Study: Predictors of Wellbeing Amongst NSWPF Trainees

BACKGROUND

The goal of Study 4 was to investigate whether factors associated with NSWPF wellbeing were similar amongst NSWPF trainees.

RESEARCH QUESTIONS

The key research questions were as follows:

1. **What are the current levels of wellbeing and psychological distress reported by NSWPF trainees?**

   1.1. What percentage of trainees report clinically significant levels of psychological distress or alcohol consumption?

   1.2 How do NSWPF trainee reports of wellbeing and psychological distress compare to general population norms and NSWPF staff averages?

2. **What contexts support needs satisfaction and wellbeing of police officers?**

   2.1. What psychological and behavioural factors are associated with needs satisfaction and wellbeing amongst NSWPF staff?

Based on our qualitative findings and previous literature we predicted that: needs satisfaction would be positively associated with wellbeing and negatively associated with mental-ill health outcomes. In line with previous literature, we hypothesised that trainees would be likely to report higher levels of wellbeing compared to established NSWPF staff. SPSS was used to analyse data exported from Qualtrics. The below results provide a snapshot regarding participant demographics.

METHOD

Data from 199 trainees was collected from participants studying at the NSWPF Goulburn Police Academy. Responses were collected via online survey. Participants responded to a short version of the NSWPF questionnaire. Survey items measured key demographic variables, wellbeing, psychological distress and mental-ill health, alcohol use, psychological needs satisfaction and physical activity.

PARTICIPANTS: A SNAPSHOT OF NSWPF TRAINEES

Demographic data revealed that most trainees identified as male. Most participants reported that they were single. A significant number of trainees reported they were in de facto relationships or were married (see Table 14). Only a very small number of trainees identified as Aboriginal or Torres Strait Islander. There was a much higher rate of male participants compared to our NSWPF survey in Study 3.

TABLE 14: GENDER AND RELATIONSHIP STATUS OF PARTICIPANTS

NSWPF Trainee Demographics	n	%
Male	121	69.1
Female	53	30.3
Choose not to say	1	0.6
Single	115	65.3
De Facto	29	16.5
Married	26	14.8
Separated	1	0.6
Divorced	2	1.1
Prefer not to say	3	1.7
Yes	6	3.4
No	168	95.5
Prefer not to say	2	1.1

% reported as 'valid percent' of participants who provided demographic information relating to reported variables.

RESULTS

4.1.1 What are the current levels of wellbeing and psychological distress reported by NSWPF trainees?

Our research used measures of psychological distress, wellbeing, general life satisfaction, and alcohol consumption to explore wellbeing and mental ill-health.

Psychological Distress (K6 Mental Health Screener)

Psychological Distress was measured by the Kessler-6 (K6), using a subset of six questions from the Kessler Psychological Distress Scale-10 (K10) (see 3.1.1 for further information about measure). Our results are shown in Figure 13 and are summarised by the following:

- Only 1% of trainees reported levels of psychological distress meeting criteria for 'probable serious mental illness';
- However, over half (52%) of trainees reported levels of psychological distress consistent with a mild-moderate mental health disorder; and
- Approximately 47% of trainees did not report levels of psychological distress consistent with mental ill-health.
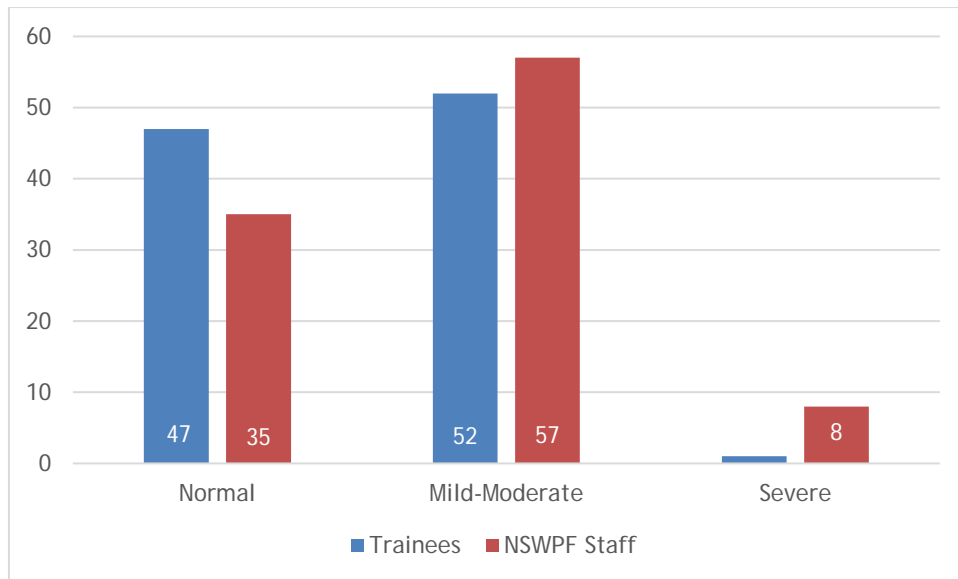
Figure 13. Percentages of trainees versus NSWPF staff reporting normal, mild-moderate, and severe levels of psychological distress.

Overall, trainees were less likely to report clinically significant levels of psychological distress. A surprisingly high number of trainees did report mild-moderate levels of distress, indicating that many trainees experience mental health difficulties prior to prolonged periods of service.

Correlational data from this survey showed moderate to large positive associations between psychological distress and the following factors:

- **Mental Ill-Health Outcomes**: e.g., Burnout (r = .54**) and PTSD symptoms (r = .61**).
- **Psychological Inflexibility** (r = .70**)

In contrast, moderate to large negative associations were shown between the following factors:

- **Wellbeing Outcomes**: e.g., General Life Satisfaction (r = -.33**) and Wellbeing (r = .46**)
- **Needs Satisfaction**: e.g., Autonomy (r = -.46**), Relatedness (r = -.37**), and Competence (r = -.55**).
- **Mindfulness** (r = -.57**).

Wellbeing and General Life Satisfaction

Wellbeing was measured by the Short Warwick Edinburgh Mental Well-Being Scale (see 3.1.1 for a description of the measure). The average wellbeing scores for trainees (25.41) was above both population averages reported in the United Kingdom (23.61) [6] and NSWPF staff (22.36). General Life Satisfaction was measured via a single-item question that asked participants to rate their life satisfaction on a scale from 0-10. Average levels of trainee life satisfaction (8.19) were higher than the average scores of both NSWPF staff (7.22) and the Australian average of 7.3[7].

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[6]https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/using/howto/wemwbs_population_norms_in_health_survey_for_england_data_2011.pdf - UK Population Study Average for SWEMBS
[7] http://www.oecdbetterlifeindex.org/topics/life-satisfaction/

Correlational data from this survey showed small to moderate positive associations between general life satisfaction and the following factors:

- **Wellbeing**: (r = .39**)
- **Needs Satisfaction:** e.g., Autonomy (r = .28**), Relatedness (r = .25**), and Competence (r = .41**)
- **Mindfulness:** (r = .38**)

Positive associations between wellbeing and survey variables were similar:

- **General Life Satisfaction**: (r = .39**)
- **Needs Satisfaction:** e.g., Autonomy (r = .46**), Relatedness (r = .47**), and Competence (r = .55**)
- **Mindfulness:** (r = .36**)

In contrast, small to moderate negative associations were shown between general life satisfaction and the following factors:

- **Indicators of Mental-Ill Health**: e.g., Burnout (r = -.25**), PTSD symptoms (r = -.18*), Psychological Distress (r = -.33**)
- **Alcohol Consumption**: (r = -.18**)
- **Psychological Inflexibility** (r = -.27**)

Negative associations between wellbeing and survey variables were similar:

- **Indicators of Mental-Ill Health**: e.g., Burnout (r = -.40**), PTSD symptoms (r = -.37*), Psychological Distress (r = -.46**)
- **Psychological Inflexibility**: (r = -.42**)

Alcohol Use (AUDIT – Alcohol Use Disorders Identification Test)

Alcohol use was measured by the World Health Organization's Alcohol Use Disorders Identification Test (AUDIT)[8] (see 3.1.1 for full measure description). Our results are demonstrated in Figure 14 and are summarised by the following:

- Just under one third (28%) of officers reported consuming alcohol within safe levels;
- A large majority (71%) of trainees reported consuming alcohol at risky levels.

Overall, trainees reported much higher levels of alcohol consumption compared to NSWPF staff. This may reflect the younger age and developmental stage of trainees (e.g., younger adults may be more likely to engage in impulsive or risky behaviours). Alcohol Consumption was significantly related to general life satisfaction (see above); however, surprisingly there were no other significant relationships between alcohol consumption and other survey variables.

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[8] http://nceta.flinders.edu.au/files/3314/2257/4957/Right_Mix_3.pdf
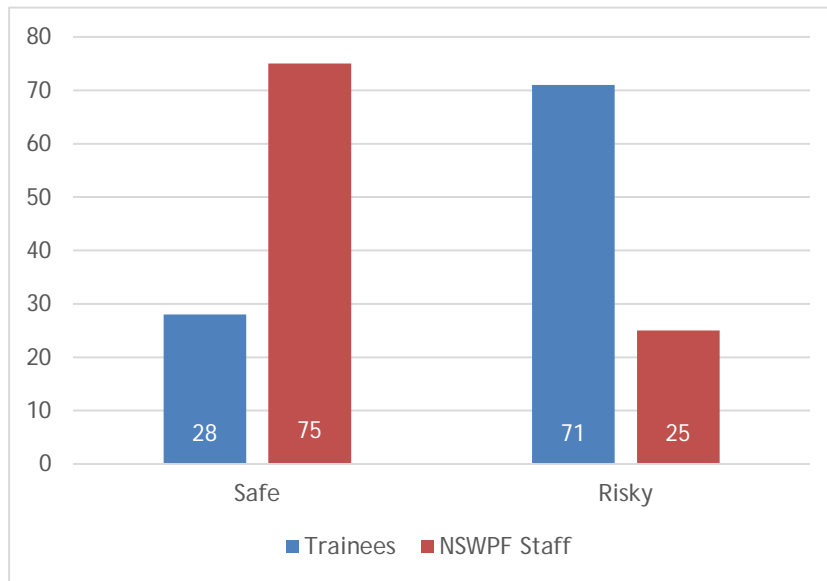
Figure 14. Percentage of trainees versus NSWPF staff reporting safe/risky alcohol consumption.

4.1.2 Needs Satisfaction of NSWPF trainees

We also explored levels of needs satisfaction amongst NSWPF trainees compared to NSWPF staff. Figure 15 reports scale score averages for each needs satisfaction measure for both trainees and NSWPF staff. NSWPF trainees reported higher levels of needs satisfaction compared to their more experienced counterparts across all satisfaction types. This difference was largest for autonomy satisfaction, indicating that younger trainees were much more likely to feel a sense of agency in their roles.
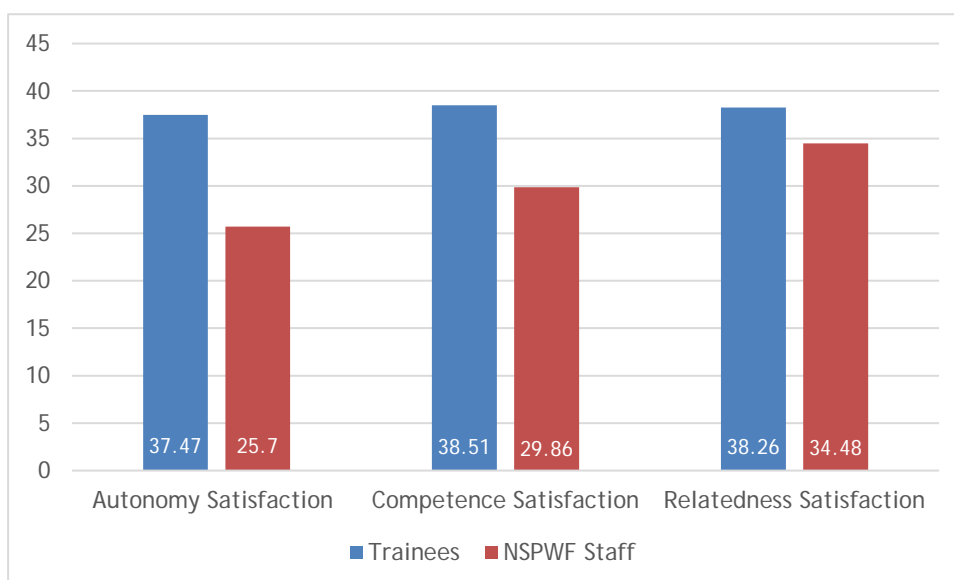
Figure 15. Percentage of trainees versus NSWPF staff reporting needs satisfaction.

Correlational data from this survey showed significant positive associations between needs satisfaction, psychological wellbeing, general life satisfaction and mindfulness. In contrast, poor needs satisfaction was related to higher levels of burnout, psychological inflexibility, psychological distress and PTSD symptoms.

Key Points: Trainee Mental Health, Wellbeing and Needs Satisfaction

A. Approximately half of NSWPF trainees who participated reported clinically significant levels of psychological distress within a mild-moderate range. Overall, trainees report less severe distress than NSWPF staff participants.

B. Wellbeing and general life satisfaction average scores were above population norms and the average of NSWPF staff survey participants.

C. A large proportion of trainees who participated reported risky levels of alcohol consumption; these rates were much higher than those reported by NSWPF staff survey participants.

D. NSWPF trainees were more likely to report higher levels of needs satisfaction compared to NSWPF staff survey participants.

E. Similar to NSWPF staff, needs satisfaction for NSWPF trainees appears to be significantly related to healthy psychological functioning (e.g., wellbeing, general life satisfaction, and mindfulness). In contrast, poor needs satisfaction is associated with burnout, psychological inflexibility, psychological distress, and PTSD symptoms.

5 **Summary and Conclusions**

The research described in this report explores both individual and organisational factors associated with improved wellbeing, functioning and retention within the NSWPF. Results from Study 1 (our pilot study) provided valuable insights into the wellbeing of NSWPF staff, allowing researchers to identify specific coping strategies and protective factors associated with improved wellbeing. It also served as a catalyst for the commissioning of two further studies with the aim of identifying a framework that could help to explain how the NSWPF can better support officer needs in the workplace. The results from our latest studies (Studies 2, 3, and 4) are summarised below:

What is the relationship between needs satisfaction and wellbeing?

Results from police officer interviews and quantitative survey data provided support for the notion that needs satisfaction is strongly linked to wellbeing and mental health amongst officers. Qualitative responses from Study 2 demonstrated that officers reported rich accounts of psychological needs satisfaction and frustration. Responses indicated that officers who experienced mental health difficulties were more likely to report instances of needs frustration compared to those who did not report experiences of mental ill-health.

Study 3 utilised quantitative data taken from NSWPF staff (n = 5,269) to corroborate Study 2 findings. We aimed to explore key questions derived from our qualitative responses. For instance, is needs satisfaction related to wellbeing outcomes? Results show that needs satisfaction is a crucial factor that is closely related to psychological distress, PTSD symptoms, wellbeing and general life satisfaction. Needs satisfaction, alongside individual factors (e.g., mindfulness, psychological flexibility) and other contextual factors (e.g., bullying) were also related to long-term sick leave and placement on restricted duties. Although large numbers of NSWPF staff appear to report levels of psychological distress consistent with mental ill-health, there appears to be a smaller proportion of individuals who engage in help-seeking via NSWPF wellbeing programs. This signals a need for the NSWPF to develop strategies to better understand the needs of staff, but also develop work policies and support services that staff believe to be useful and effective in promoting psychological health.

What contexts support needs satisfaction?

Qualitative responses from Study 2 provided rich accounts of police officers' experiences of needs satisfaction and frustration. Officer responses provided several examples of contexts that appear to support autonomy satisfaction. Our results suggest that autonomy satisfaction can be supported by helping to empower officers by allowing them opportunities to contribute to decision making; allowing greater flexibility of work; and assisting officers to internalise organisation values and goals.

Officer responses indicated that competence can be supported via the following methods: enhancing competency of management; reinforcing officer successes and strengths through praise; fostering efficiency through adequate provision of resources and reduction of paperwork; fair distribution of workloads; and provision of fair and reasonable assessment (particularly with regards to current promotional and complaints systems).

Responses regarding relatedness indicated that officers desire supportive and respectful working relationships, while discrimination, stigma, and favouritism makes it hard for officers to feel connected. Officers also exhibited preferences for managers that display genuine care, effective organisational level support, and support from outside of the force. Clear and open communication was valued not only between colleagues but also between management and frontline troops.

Does wellbeing and needs satisfaction change across career stages?

Police officer interviews revealed that new-recruits disclosed more examples of needs satisfaction than officers with more experience. This pattern occurred for all psychological needs: autonomy, competence, and relatedness. Those on restricted duties reported the fewest examples of need support and the most examples of need thwarting relative to other participant groups. Similarly, comparison of trainee and NSWPF staff surveys shows that needs satisfaction and wellbeing levels are higher amongst trainees, and lower amongst general staff.

Despite having higher average levels of needs satisfaction, over half of new-recruits surveyed reported levels of psychological distress consistent with a mild-moderate mental health disorder. These findings suggest that police support services and interventions addressing mental health difficulties should begin early during police training, rather than focusing on reducing distress after crisis and exposure to trauma. Given the high prevalence of anxiety, mood, and personality difficulties within the general population and the NSWPF, it may be helpful to focus on normalising anxiety as a response to difficult or challenging situations. Normalising difficult feelings and emotions may help reduce stigma while increasing help-seeking behaviours. This strategy is consistent with acceptance approaches to mental health difficulties, where emphasis is placed on accepting difficult emotional states rather than trying to avoid or reject internal experiences.

Our results suggest that the wellbeing of our participants was often highest during early career stages, whereas more experienced officers tended to exhibit some decreases in needs satisfaction and wellbeing over the course of their career (although it is worth noting that slight increases in needs satisfaction were observed for officers with the highest ranks and longest tenures). Interview data showed that commander and senior leadership staff were more likely to have positive perceptions of the police environment. This perhaps reflects their role (which may allow for greater autonomy) and the impacts of successful career progression on officers' sense of self. It is possible that feelings of competence and accomplishment are internalised by those who climb the ranks of the NSWPF. The following page provides a summary of research findings and recommendations made by this report.

Key Points: NSWPF Wellbeing Findings and Recommendations

Our findings suggest the following:

A. **Needs Satisfaction and Wellbeing:** *Both qualitative and quantitative data suggest that needs satisfaction is associated with mental health and wellbeing of both NSWPF staff and trainees. Subsequently, the NSWPF should endeavour to develop working environments that support needs of autonomy, relatedness and competence. The qualitative study of this report provides specific recommendations based on officers' lived experience that may assist in meeting this goal.*

B. **Mindfulness and Psychological Flexibility:** *Quantitative data suggests that psychological factors such as mindfulness and psychological flexibility are associated with wellbeing. Psychological interventions can assist individuals in developing these skills. Acceptance based approaches may be particularly helpful for NSWPF staff experiencing psychological distress (e.g., Acceptance and Commitment Therapy, Mindfulness and Self-Compassion).*

C. **Wellbeing Differences Between Trainees and Staff:** *Qualitative and quantitative data suggests that police wellbeing and needs satisfaction are lower amongst longer-serving NSWPF staff compared to new trainees (with some exceptions to individuals with the longest tenures and highest ranks, who appear to show increases in needs satisfaction and wellbeing). Although new-recruits report better mental health compared to more experienced counterparts, over half of new-recruits still report psychological distress consistent with a mild-moderate mental health disorder.*

D. **Correlates of Restricted Duties and Long-Term Sick Leave:** *Quantitative data suggests that mental ill-health, burnout, and psychological inflexibility are associated with restricted duties and long-term sick leave. Supervisory and social bullying are associated with long-term sick leave. Improving early intervention initiatives regarding mental health support may be of benefit in reducing uptake of restricted duties and long-term sick leave.*

E. **Service Participation Rates:** *Current staff support services appear to have much lower rates of participation compared to rates of psychological distress. Increasing awareness of services and modifying supports in line with staff feedback may be helpful in reducing this gap between distress and uptake of services.*

References

Australian Bureau of Statistics (2012). *Information Paper: Use of the Kessler Psychological Distress Scale in the ABS Health Surveys, Australia, 2007-08.* Retrieved from https://www.abs.gov.au/ausstats/abs@.nsf/lookup/4817.0.55.001Chapter92007-08

Balmer, G. M., Pooley, J. A., & Cohen, L. (2014). Psychological resilience of Western Australian police officers: Relationship between resilience, coping style, psychological functioning and demographics. *Police Practice and Research, 15(*4), 270-282.

Bragg, D. J. (2003). *The seasons of a police officer's life: an analysis of the influence of career stage on the job satisfaction and work commitment of Queensland police officers* (Doctoral dissertation, Queensland University of Technology).

Burke, R. J. (1989). Career stages, satisfaction, and well-being among police officers. *Psychological Reports, 65*(1), 3-12.

Burke, R. J., & Mikkelsen, A. (2005). Career stage and police cynicism. *Psychological Reports, 96*(3_suppl), 989-992.

Cannizzo Jr, T. A., & Liu, P. (1995). The Relationship between Levels of Perceived Burnout and Career State among Sworn Police Officers. Police Stud.: *Int'l Rev. Police Dev., 18*, 53.

Creswel, J. W. (2009). *Research design: Qualitative, quantitative, and mixed methods approaches.* Los angeles: University of Nebraska–Lincoln.

Department of Veterans' Affairs, Australian Government (n.d.). *Alcohol screen (AUDIT).* Retrieved from http://nceta.flinders.edu.au/files/3314/2257/4957/Right_Mix_3.pdf

Fagan, M. M., & Ayers Jr, K. (1982). The life of a police officer: A developmental perspective. *Criminal Justice and Behavior, 9*(3), 273-285.

Harris, C. (2011). Problem behaviors in later portions of officers' careers. Policing: an International *Journal of Police Strategies & Management, 34(*1), 135-152.

Henry, V. E. (2004). *Death work: Police, trauma, and the psychology of survival.* Oxford University Press.

Johnson, R. R., & La France, C. (2016). The influence of career stage on police officer work behavior. *Criminal Justice and Behavior, 43*(11), 1580-1599.

McElroy, J. C., Morrow, P. C., & Wardlow, T. R. (1999). A career stage analysis of police officer work commitment. *Journal of Criminal Justice, 27*(6), 507-516.

NSPWF (New South Wales Police Force). (2014). Review of leadership development across Australian policing jurisdictions 2012 - 2013. Retrieved from http://www.police.nsw.gov.au/__data/assets/pdf_file/0011/297821/NSW_Police_Force_2012-13_Annual_Report.pdf

Police Association of New South Wales [PANSW] (2011). *Letter to the NSPWF review team.*

OECD (n.d.) *OECD Better life index: Life satisfaction.* Retrieved from http://www.oecdbetterlifeindex.org/topics/life-satisfaction/

Padhy, M., Chelli, K., & Padiri, R. A. (2015). Optimism and psychological well-being of police officers with different work experiences. *Sage Open, 5*(2), 2158244015580852.

Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist, 55*(1), 68.

Violanti, J. M., & Paton, D. (1999). *Police trauma: Psychological aftermath of civilian combat.* Charles C. Thomas Publisher.

Violanti, J. M. (2014). *Dying for the job: Police work exposure and health.* Charles C Thomas Publisher.

Warwick Medical School (n.d.). *Collect, score, analyse and interpret WEMBWS.* Retrieved from https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/using/howto

Correlations of Key Variables for NSWPF Staff

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
1. Year of Birth	–																							
2. Gender	.01	-																						
3. Marital Status	-.11**	.05**	–																					
4. ATSI	.01	.06**	.04**	–																				
5. Years in Force	-.18**	-.11**	.20**	-.01	–																			
6. Rank	.12**	.11**	-.17**	-.01	-.67**	–																		
7. General Life Satisfaction	.05	.03*	-.05**	-.04**	-.01	-.03*	–																	
8. Burnout (Emotional)	.03	-.01	.01	.06**	.05**	.01	-.38**	–																
9. Wellbeing	-.02	.01	-.02	-.05**	-.02	-.06**	.53**	-.53**	-															
10. Alcohol Consumption	.29**	-.21**	-.03	.04**	.10**	-.11**	-.06*	.12**	-.07**	-														
11. Psychological Distress	-.07*	-.01	.03*	.06**	.03	.02	-.55**	.60**	-.65**	.07**	-													
12. Physical Activity	.00	-.02	-.04**	-.03*	-.01	-.04**	.13**	-.09**	.12**	-.05**	-.11**	-												
13. Autonomy Satisfaction	-.05	.03**	-.02	-.05**	.01	-.10**	.38**	-.59**	.54**	-.07**	-.46**	. 06**	-											
14. Relatedness Satisfaction	.05*	.01	-.03**	-.05**	.00	-.05**	.39**	-.41**	.51**	.00	-.44**	.08**	.54**	-										
15. Competence Satisfaction	-.06	-.05**	.00	-.03*	.09**	-.18**	.34**	-.35**	.47**	-.01	-.45**	.09**	.48**	.42**	-									
16. Verbal Bullying	.15	-.08**	-.02	.03	-.08**	.12**	-.15**	.23**	-.20**	.11**	.24**	-.02	-.25**	-.28**	-.19**	-								
17. Discriminatory Bullying	.00	-.01	.00	.03	-.06**	.12**	-.13**	.21**	-.18**	.00	.24**	-.01	-.24**	-.27**	-.16**	.62**	-							
18. Social Bullying	-.05	.10**	.03	.01	-.01	.04*	-.20**	.26**	-.24**	-.03	.31**	-.06**	-.25**	-.45**	-.20**	.43**	.40**	-						
19. Physical Bullying	.18*	-.05	.00	.03	-.05**	.09**	-.06**	.08**	-.08**	.06*	.12**	-.01	-.09**	-.08*	-.12**	.42**	.37**	.28**	-					
20. Supervisory Bullying	.06	-.04**	.03*	.04*	.00	.06**	-.20**	.40**	-.32**	.05*	.33**	-.03	-.45**	-.36**	-.21**	.37**	.32**	.44**	.17**	-				
21. PTSD	-.01	-.07**	.08**	.07**	.14**	-.07**	-.46**	.61**	-.54**	.18**	.68**	-.10**	-.45**	-.41**	-.35**	.25**	.27**	.31**	.12**	.35**	-			

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
22. Psychological Inflexibility	-.07*	-.03	.05**	.04**	.10**	-.04*	-.54**	.54**	-.56**	.11**	.69**	-.11**	-.42**	-.39**	-.42**	.19**	.20**	.27**	.10**	.30**	.74**	-		
23. Mindfulness	-.09**	-.01	-.03	-.05**	-.03*	.02	.38**	-.49**	.47**	-.17**	-.54**	.06**	.44**	.35**	.38**	-.21**	-.15**	-.20**	-.10**	-.27**	-.56**	-.60**	-	
24. Restricted Duties	-.08*	.00	.03*	.02	.11**	.01	-.15**	.15**	-.15**	-.01	.18**	-.03*	-.12**	-.12**	-.10**	.03	.07**	.08**	.02	.08**	.20**	.18**	-.09**	-
25. Long-Term Leave	-.15**	-.05**	.07**	.06**	.21**	-.08**	-.15**	.19**	-.14**	.05**	.17**	-.05**	-.17**	-.14**	-.06**	.06**	.09**	.11**	.01	.11**	.26**	.21**	-.13**	.30**

Correlations of Key Variables for NSWPF Trainees

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1. Year of Birth	–														
2. Gender	.12	-													
3. Marital Status	-.39**	.14	–												
4, General Life Satisfaction	.13	-.05	-.02	-											
5. Burnout (Emotional)	.09	.27**	-.10	-.25**	-										
6. Wellbeing	.13	-.19*	-.02	.39**	-.40**	-									
7. Alcohol Consumption	-.02	-.15	.04	-.18*	.06	.02	-								
8. Psychological Distress	.13	.14	.18*	-.33**	.54**	-.46**	.06	-							
9. Physical Activity	.03	-.03	-.02	.11	-.11	.12	.11	-.01	-						
10. Autonomy Satisfaction	.08	-.07	-.07	.28**	-.44**	.46**	-.07	-.46**	.12	-					
11. Relatedness Satisfaction	.15	-.08	-.14	.25**	-.29**	.47**	-.02	-.37**	.06	.73**	-				
12. Competence Satisfaction	.15	-.20*	-.07	.41**	-.44**	.55**	-.02	-.55**	.09	.72**	.64**	-			
13. PTSD	.09	.03	-.04	-.18*	.37**	-.37**	-.04	.61**	.01	-.43**	-.41**	-.50**	-		
14. Psychological Inflexibility	.11	.09	-.19*	-.27**	.55**	-.42**	-.08	.70**	.03	-.47**	-.44**	-.61**	.59**	-	
15. Mindfulness	-.08	.10	.12	.38**	-.41**	.36**	-.15	-.57**	.05	.50**	.35**	.54**	-.47**	-.58**	-