

## CHAPTER ONE

### ORIENTATION OF THE STUDY

#### 1. INTRODUCTION

The purpose of the study was to investigate the perception of police officers on police suicide and how it affects their well-being. According to Lester and Yang (1997:109), "several studies have suggested that police officers have a high rate of suicide.

The study is guided by an overview of the phenomenon of the suicide problem among the South African Police Service (SAPS) officers, to present a bird's eye view in the context of the police department and policing milieu.

There is a common perception that police suicide rate is higher among the middle-aged police officers. More than four times as many male as female police officers die by suicide (Maltsberger, 1996:55-58). Female police officers attempt suicide more often during their lives than do male police officers. The majority of police officers who have depression do not die by suicide, having major depression does increase suicide risk compared to police officers who are without depression. The risk of death by suicide may, in part, be related to the severity of the depression

Currently SAPS has no definitive measure to detect police suicide or police suicidal thoughts. SAPS has identified factors that place police officers at higher risk for suicide, but very few police officers with those risk factors actually commit suicide. Risk factors for police suicide include severe depression, substance abuse, previous suicide attempts, family history of suicide, and impulsive or aggressive tendencies.

## 2. STATEMENT OF THE PROBLEM

The National Committee for the Prevention of Police Suicide was established to coordinate and manage the prevention of police suicides. However, the rate of suicide is ever increasing in the lower ranks of police officers. The suicide rate among police ranks in South Africa stands at 200 for every 100,000 members, compared with only 22 in the United States (Violanti & Paton, 1999: 100).

This is because many traumatised and stressed policemen are unwilling to make use of the SAPS Crisis Line that offers 24-hour counseling. This unwillingness is attributed to both the stigma attached to social workers, psychologists and counselors, and the shame of seeking help.

There are a number of reasons that expose the SAPS officers to be at a high risk of suicide. These include strenuous work-shifts, the limelight of public scrutiny and the physical nature and frequency of being on-the-job. A great attention is needed on police officers whose case is of self-destruction. Therefore this study examines SAPS policy framework, proactive programmes and counselling sessions, to determine whether they are fully utilised and how police suicide affects colleagues.

The problem that the study addresses is the effects of police suicide and the well-being of SAPS members. The study examines the details aspects of police suicide. Thus suicide is not restricted to any one group of people or type of problem. Once it appears on the scene as an option in a particular circumstance, it calls other colleagues with similar experiences to follow the example of the first police officer who committed suicide.

### **3. MOTIVATION FOR THE STUDY**

The objective of the study was drawn from the fact that a large number of police officers commit suicide and as such this creates a bad image for the SAPS. Suicide cases among SAPS officials' affects the morale of the other officers in their working relations. They cannot function effectively and efficiently in many instances.

A number of workshops have been conducted within SAPS in order to address and reduce the root causes of police suicides. However, apart from the efficiency of intervention strategies that are in place to address police suicide. This area still requires further research as a social problem affecting society and the profession.

The characteristics of suicide that are prevalent in Polokwane stem out of current stressors, depressed and angry feelings, and interpersonal problems of various sorts. Failure and consequent self-devaluation, inner conflict, loss of a sense of meaning and hope all produce, independently or in combination, a mental state that looks to suicide as a possible way out.

This study is therefore important because it will assist in investigating the effects of police suicide towards South African Police Services (SAPS) and further examine the image that suicide has on SAPS. The impact of police suicide on surviving colleagues, families and society at large is intrinsic in this study.

#### **4. AIMS OF THE STUDY**

The aims of the study were to:

- Identify some of the challenges, such as the informal police culture, police organizational stress and etc., as these are contributing additional pressures on officers' to conform to a distinct police role, but for a different purpose.
- Investigate the rate of suicides amongst SAPS officials and the stress associated with high crime levels and case loads.
- Determine the SAPS social setting in relation to whether it is conducive for the nature of their work.

#### **5. OBJECTIVES**

The objectives of the study were:

1. To explore the effects of police suicide towards SAPS and its members.
2. To find out what image does police suicide has on SAPS.
3. To study what impact does suicide have on surviving colleagues, family, and society.
4. To find out how police suicide affects police personnel well-being.

## **6. HYPOTHESES FORMULATION**

- The incline rate of suicides in SAPS affects the well-being of police officers;
- The potential of committing suicide is greater if the police officer has no systems and/or resources (e.g. family/ friends/colleagues or if they are unavailable to provide support).

## **7. RESEARCH DESIGN**

A research design is the plan, which specifies how research participants are going to be obtained and how they will be used in view of reaching conclusions about the research problem (Huysamen, 1997:20). This study is descriptive because it involves an investigation of the effects of police suicide.

Descriptive study involves examination of a phenomenon to more fully define it or to differentiate it from other phenomena. According to Dane (1990:6), descriptive research examines a phenomenon in order to define it fully. The purpose of descriptive research is to describe situations and events. A study involving descriptive analysis applies both qualitative and quantitative methods. The descriptive approach is imperative in this study because it offers richly descriptive reports of individual perceptions, attitudes and beliefs, views and feelings, the meaning and interpretations given to events and things.

## **8. POPULATION AND SAMPLING**

The sample must have properties that make it representative of the whole population. Probability or random sampling occurs when the probability of including each element of the target population can be determined. In this research, nonprobability sampling in the form of

quota sampling was used. Thus, the probability of including each element of the population in a sample is unknown (Bless & Higson-Smith, 1995:88).

The researcher used quota-sampling method because the participants were drawn from the same proportions of characteristics as the whole population.

A sample size of 100 participants (voluntary participation), consisting of serving police officers were selected using judgmental sampling. The sample selection was drawn from the SAPS members in Polokwane provincial units or components. Fifteen components out of 30 components formed part of the 100 participants.

The sample comprised of all different cultures, race, sex, creed, and religion. The sample included the provincial units and ten components within the Polokwane Provincial office, including the police station in Polokwane. The sample drawn from the above components/ units was relevant to the study because of the exposure of the individuals to suicide.

## **9. DATA COLLECTION TECHNIQUES**

The researcher used semi-structured interviews as the principal data collection instruments to elicit information from the respondents in order to achieve understanding of the participants' point of view and/or situation. The respondents were free to expand on the topic as they saw fit and focus on suicide to relate their own experiences. The researcher only intervened to ask for clarification or further explanation. The researcher used probing questions in addition to the structured questions. The interview was conducted in a face-to-face situation.

According to Leedy (1993: 26), this method of data collection elicits information directly from the people.

## **10. AREA OF THE STUDY**

The study was conducted in Polokwane, the capital of the Limpopo Province. Polokwane has a sporting hub and venue for major conferences and events in the Province. Polokwane is in Limpopo thus, one of the nine (9) Provinces in South Africa. It is situated  $\pm$  300 k/m North of Gauteng.

The South African Police Services provincial components/ units are situated in Polokwane. Polokwane has a population of 3000 employees (Capricorn District Municipality Annual Review, 2002 - 2003). It is a multicultural society, which is still developing. The Polokwane Police Station and other 33 SAPS units and components are located in the city of Polokwane.

## **11. DATA ANALYSIS**

Data was analysed by means of percentages. Thus, response to every research question in the interview schedule was dissected and statements were classified. Respondents' statements were classified, and for every class, subclasses were determined and each expressed as a percentage. Totals for each dimension were calculated to quantify the respondents' rating in data processing.

## **12. LIMITATIONS OF THE STUDY**

1. The respondents were hesitant to disclose their educational qualifications, as most police officers are under qualified. However

the researcher reassured the respondents (as indicated in the instructions of the interview schedule) that all information will be strictly confidential;

2. The findings in this study could not be generalised to the whole population of police officers in the country because non- probability study cannot be generalized;
3. Accurate information about police suicide was difficult to obtain because some of the respondents were reluctant to talk about such an issue, which has negative impact towards SAPS.

### **13. DEFINITION OF CONCEPTS**

#### **Counselling**

The act or process of giving counsel, to resolve personal, social or psychological problems and difficulties

#### **Crime**

A violation or deviation from generally approved norms, such deviation being formally punishable

#### **Police**

An institution of police officers either nationally or internationally

#### **Police officer**

Is defined as an employee of the South African Police Services employed in terms of the Police Act, being either a Civilian or functional member (e.g. constable, sergeant, or inspector)

**SAPS**

An institution that ensures that the Bill of Rights and the New Constitution are upheld in South Africa. It moves towards ensuring peace and safety for all citizens of South Africa

**Stress**

It is an expression of the way in which one get on with his environment and the demands made upon him or her, as well as the way in which he or she copes with the demands internally made on him or her by himself or herself

**Suicide**

The criminal act of self-destruction with the purpose of taking one's own life, because of reasons related to personal and work related stress

**Survivor of suicide (survivor)**

In this study is considered to be those that have been affected by a completed police suicide. Thus, for the purpose of this study the researcher will include colleagues' immediate family members (partners, siblings, offspring, parents) and society

## CHAPTER TWO

### LITERATURE REVIEW

#### 1. INTRODUCTION

Increasingly, suicide is viewed as a serious and preventable public health problem. Suicide and its prevention are complex and multi-dimensional and need to be approached openly and comprehensively. Suicide prevention requires concerted and collaborative efforts from all sectors of society. Stakes (1999:88) states that suicide occurs in all social groups. It occurs among young, middle-aged, and older people; men and women; rich, middle class, and poor people; all ethnic and religious groups; married and single people; the employed and unemployed, and the healthy and the sick.

Suicide is more prevalent among some groups than others, for example suicide rates among some professions, such as police, farmers, dentists, and doctors, have been found higher than the national average. However there are four male suicides for every one female, women attempt suicide twice as often as do men (Stakes, 1999:88).

Violanti (1995:40) concurs with Paul (1998:28) that suicide leaves survivors shaken and in search of answers that may never be found. Police suicide can devastate the morale of entire SAPS and leave individual police officers with intense feelings of guilt, remorse, and disillusionment. By its very nature, suicide is an act of desperation, carded out when less drastic avenues of relief seem unavailable or inadequate. Police counseling services should ensure that these other avenues are available.

Suicide among members of South African Police Services (SAPS) is a serious problem. However the problem is often ignored, misunderstood,

misrepresented and under researched. Police suicide is not a subject that is easily discussed in most police departments or by the families of police officers who have taken their own lives. In addition factors that are linked to post traumatic stress disorder are often cited as causes of police suicide and as such these problems are often linked to stress emanating from police work (Mishara, 1995:89).

Stakes (1999:100) indicates that there is a high rate of suicide among SAPS officials. The major objective of this study is to investigate the negative impact that suicide has amongst police officials and how it can be reduced. This can be done by identifying challenges such as the informal police culture, police organisational stress etc, as this may also be contributing as an additional pressure on officers to conform to a distinct police role.

This study will be guided by an overview of the phenomenon of the suicide problem among the South African Police Service (SAPS) officers, to present a bird's eye view in the context of the police department and policing milieu.

The study will highlight the existing suicide theories from the suicide expert's perspectives, and in particular, the police suicide expert's perspectives. The study will look at police suicide survivors. The study however will be guided by problems and crises experienced by police officials, suicidal signs and behaviours and coping skills for police officials as well as suicide intervention strategies from suicide expert's perspectives'.

## 2. POLICE SUICIDE

Battin and Mayo (2000:117) define suicide as the doing of something which ultimately results in one's own death, either with the intention of ending one's life or to bring about some other state of affairs (such as relief from pain) that one thinks it is certain or highly probable and can be achieved only by means of death or will produce death. Lester (1997:1) concurs fully with this definition.

Conroy (1989:31) referred to a study by Helmkamp regarding police suicides in South Africa. According to that study, Helmkamp (1995:98) indicated, "...many police officers are placed under enormous stress and are confronted with violence on a daily basis". Many police officials become victims themselves in their quest to prevent our citizens from becoming victims of crime. They do not only become victims of crime but also of depression and despair, which in some instances lead to either suicide or attempted suicide.

Suicide among members of the South African Police Services is a serious problem. In 1995, SAPS officials were eleven times more likely to take their own lives than members of the general population. There has, however, been a decrease in the rate of police suicides since 1994. However, the situation between provinces varies substantially, as does the number of counseling sessions recorded by the Police's Suicide Prevention Project (Conroy, 2005:31).

The high stressful nature of police work generally is cited as a primary contributing factor. Thus, factors linked to post traumatic stress disorder such as depression, hopelessness, substance abuse, moodiness and aggression, are often cited as causes of police suicide. All these problems can be linked to the stress emanating from police work.

Other factors associated with police suicides are their easy access to firearms, crime and corruption among police officials; and the culture which often denies the problem and views it as disgraceful to both the victim and the profession (Peltzer, 2001: 52). Thus, police suicide can be viewed from a psychological point of view whereby emphasis is put on the unique and multidetermined aspects of suicide patterns, while at the same time being cognisant of the role of societal influences at the individual social interface.

Suicide can be differentiated in three ways, namely, egoistic, altruistic, and anomic suicides. Lester & Yang (1997:124) describes causes of egoistic suicide as a low degree of social interaction; altruistic suicide as a high degree of social interaction; and anomic suicide as a low degree of social regulation.

Suicide among the police has a negative impact on colleagues. Police officers suffer set-backs and as such it affects both their work productivity and morale. Those who are left behind need a life-line to sustain them at work. Thus, if they cannot receive such, they may find themselves vulnerable to copy-cat suicide when help or solution is not forthcoming. This is because a suicidal person wishes to communicate something to someone who can listen.

### **3. THEORIES ON SUICIDE**

Lester and Yang (1997:31) highlight different theories from the suicide expert's. Ginsberg (1966:14) noted that suicide arises from the dissatisfaction of individuals. Dissatisfaction itself was related directly to the discrepancy between the actual reward that an individual receives and his level of aspiration. While Durkheim claims that suicide rates tend to climb during times of economic expansion and contraction,

Ginberg argues that suicide rates should rise only in times of economic expansion while dropping during times of economic recession. In contrast, Henry and Short argue that suicide rates rise only during economic contraction but not in times of economic expansion. Despite these differences, these three theories share several features in common. The economic theory of suicide, developed by Hamermesh and Soss (1984), is based on a utility function that is determined by the permanent income and the current age of an individual.

The general theory of police suicide is, according to Violanti (1996:51) and VandenBos and Bulatao (1996:230) its association with the "availability and expertise of firearms, continuous duty exposure to death and injury, shift work, social strain, criminal justice inconsistencies, and a negative police image".

Stack (et al. 1995:74) do agree with this theory, and confirm, "most theoretical work has formulated explanations of a presumed high police suicide problem. Two major types of explanations have been formulated: sociological and psychodynamic/psychological theories. The former mentions seven explanations such as: shift-work in policing; anti-police sentiments; working criminal justice system; danger of death; male domination and alcohol abuse. The psychological explanation highlight police suicide as the ' end result of officer's in ability to effectively cope with stress due to individual factors such as dysfunctional personality traits, distorted cognitive functioning, conditioning from the past'.

In his theory of etiology of suicide, Everstine (1995:5) maintains: "no psyche, no suicide implying that "psyche" is a necessary condition for suicide to occur. He defines the term "psyche" as "pain in the psyche".

Violanti (1996:54) wrote, "To Freud, suicide was expression of individual aggression and self-destruction. Henry and Short viewed suicide as aggression for which outward expression toward others is denied. Friedman (1968:58) in his analysis of 93 NYC police suicide: The law officer, even the most serene and conscientious, carries with him a complicated psychological structure: while defending the integrity of society and its citizens, he, like the soldier, must do it through extreme mobilisation of inner powers of aggression which he always keeps available to work. In time, he get disciplined and must submit instead of punishing others into submission; aggression becomes damned up and turns upon the individual's self".

#### **4. THE CAUSES OF POLICE SUICIDE**

Brent (2002) argues that there are a number of reasons that expose SAPS officers to the high risk of suicide. Such include strenuous work-shifts, the limelight of public scrutiny, and the physical of the job. A great attention is needed on police officers whose case is of self-destruction (Brent et. al, 2002:89).

Suicide happens as a result of complex factors, each different for each individual officer. But researchers tell us that certain factors contribute greatly to the risk of suicide among others, they include:

- Clinical depression and other mental illness. While most people who are depressed will not necessarily attempt to commit suicide, the majority of suicide cases (over 60%) are depressed (Brent et. al, 2002:92).
- Alcoholisms is attributed as a contributing factor in 30 percent of all suicides.
- Shockingly negative life events such as: loss of a job, bankruptcy, family crisis (death or divorce), acute or terminal illness, natural

disasters, and posttraumatic stress disorder resulting from events like the 9/11 disaster, rape, assault or witnessing such events.

- Other contributing factors include history of suicide, substance abuse, physical/sexual abuse or mental illness.
- Prior suicide attempts or exposure to suicidal behaviour by fellow officers.

In every case, the above risk factors are combined with a sense of social isolation and hopelessness. The suicidal person doesn't think he or she has anyone who can help or go to, for assistance. This may not be true in reality, but the suicidal person thinks it is true.

Misunderstanding of depression could be reduced by open communication. Although many police officers still see depression as a character flaw, the truth is that clinical depression involves a change in brain chemistry. Depressed officers usually cannot treat themselves, but depression itself is a very treatable ailment. To assume that a depressed police officer should be able to "snap out of it" is as absurd as that a diabetic should be able to "snap out of it" without medical help (Constant, 1999:105).

Many police officers labour under the impression that suicide is not preventable. The set of beliefs that says that if it is going to happen, nothing can be done has actually been refuted by extensive research and experience. Many officers whose suicidal intent or attempt was intercepted or interrupted have lived and gone on to successful, healthy lives. Most suicidal officers actually maintain ambivalent feelings about wanting to die, and just want to escape intolerable pain and emotional stress. Intervention in this suicidal behaviour is often a turning point in their lives (Loh, 2003:55).

## **5. ASPECTS THAT INFLUENCES SUICIDE**

The risk factors of suicide are complex and the mechanisms too of their interaction are not well understood. As such it is important to take an ecological perspective when considering the layers of influence on the individual. These layers include the self, family colleagues, job, community, society and the environment. However a useful framework for categorizing the factors associated with suicide includes four categories: predisposing factors, precipitating factors, contributing factors and protective factors (Clark, 2003:104).

### **5.1 PREDISPOSING FACTORS**

Predisposing factors are enduring factors that make an individual vulnerable to suicide. Most often than not police officers that kill themselves have a history of depression, bipolar disorder, schizophrenia or borderline personality disorder; of these, depression is the most common, this does not mean, however, that all people living with depression are suicidal. Previous attempts at suicide serve as one of the strongest predictors of completed suicide.

### **5.2 PRECIPITATING FACTORS**

Precipitating factors are acute factors that create a crisis, such as interpersonal conflict or loss, pressure to succeed, conflict with the law, loss of stature in society, financial difficulties or rejection by society for some characteristics (such as ethnic origin or sexual orientation). The common stimulus in suicide is unendurable psychological pain. The police officer may feel boxed in, rejected, deprived, forlorn, distressed, and especially hopeless and helpless. It is the emotion of impotence, the feeling of being -hopeless-helpless, that is so painful for many

suicidal officers. The situation is unbearable and the officer desperately wants a way out of it (Clark, 2003:104).

### **5.3 PROTECTIVE FACTORS**

Protective factors are those that decrease the risk of suicide, such as personal resilience, tolerance for frustration, self mastery, adaptive coping skills, positive expectations for the future, sense of humour and at least one positive healthy family relationship.

Therefore, suicide can be prevented by promoting mental resilience among police officers through optimism and connectedness. These can include education about suicide including risk factors, warning signs and the availability of help. This would mark the end of a long road of hopelessness, helplessness and despair. All officers who consider suicide feel life to be unbearable. Attempted suicide does not result in death, it is a sign of serious distress and can be a turning point for the individual if he/she is given sufficient assistance to make the necessary life changes. However some individuals, particularly those with borderline personality disorder (i.e. a disorder characterised by extreme 'black and white' thinking that includes mood swings, emotional reasoning, disrupted relationships and difficulty in functioning in a way society accepts as normal), suicide attempt or suicidal behaviour may be one of the results of mental illness.

In many societies suicide vary widely over time. For instance, Christianity has generally condemned suicide as a failure to uphold the sanctity of human life. Despite the understanding of many about mental health issues, some societies still treat suicide as shameful and a direct result of lack of intervention by society and family members. This

is particularly prevalent in cultures with very strong religious affiliations (Kelly, 1996:7).

The SAPS has a general shortage of human resources. At Polokwane police station the shortage is addressed by the recruitment of entry-level constables for visible policing duties. The 35 police areas that are covered in Polokwane are too understaffed to respond adequately to their duties (Servamus, 2003:11). According to the Provincial Commissioner, all provinces are understaffed. The Western Cape is 78% understaffed, Mpumalanga 70% understaffed and Limpopo 47 % understaffed. Therefore, SAPS need to fast track the shortage of staff to avoid unnecessary complaints from society (Walters, 2003:2).

Society is also more concerned about the police vehicles. The high mileage and the poor condition of vehicles are a problem. This means that police officers' reliability will come into question (Walters, 2003:2). Vehicle shortages and conditions in Limpopo do not appear to be much worse off than they are generally in other provinces like Mpumalanga and Northern Cape. SAPS has different units and each unit needs to be allocated a car that is suitable for their job. For example child protection unit needs its own cars because the investigating officer cannot transport witnesses, victims and the accused. The lack of cooperation between the police and the community, a shortage of staff, and lack of vehicles in the units or components are some of the causal factors that leads to stress to the officers and eventually suicide (Gilwald, 2002:8).

Servamus (2003:55) reports that, the ability of police officers to help victims depends largely upon the sheer volume of cases that they have at any one time. An officer has limited time and many duties to perform for instance, in Polokwane helping victims at the Child

Protection Unit (CPU) means that an officer must take the victim for medical examination, investigate and gather evidence, prepare testimony for prosecution, transport victims to court and testify and other duties. However, what is clear is that there is a limit to the number of different cases that one police officer can possibly cope with no matter how talented or how dedicated.

The Minister for Safety and Security states that the ideal number of dockets that any one detective in SAPS should be working on is 18.5 It is generally accepted that this is an ideal figure and that the detective workload is really much higher in SAPS. In Limpopo officers have an average of 149 cases each; in Mpumalanga 104; and in Gauteng 55 thus the average caseload per investigator in provinces. The reality of such caseloads is ironically the opposite of the high numbers. Effectively what happens when caseloads are so high is that fewer cases are fully investigated, lead to prosecution and to convictions; and as such build stress for the officers. At the end of the day the police officer is unable to cope (Waters, 2003:2).

However society still feels that the low level of training and education of the police complicates the quality of work and the preparation of dockets. The society pleads that steps needs to be taken to improve on the number of SAPS training programmes because highly specialized skills are needed not just general investigative training. The problems of low training levels exacerbate the cause of suicide, since without training cases may not likely to be strong enough to guarantee any success in prosecution and this may also lead to feelings of hopelessness and depression (Davis, 2004:19).

According to Waters, (2003:2) debriefing and psychological support is important in SAPS members. Officers are neither trained to cope with

the stresses of a job that is by its very nature highly disturbing and traumatic, and that is made even more difficult by the resource shortages and working conditions already ascribed. Regular debriefing sessions with professional counselors or psychologists should be held for all members at least every six months or at the request of individual officers, including the unit commanders and that additional sessions be provided as requested.

## **6. SUICIDE PREVENTION PROGRAMME**

Shneidman (1995:78) cautions that suicide prevention should optimally be practiced in consultation with a number of colleagues representing various disciplines. Suicide can best be understood in terms of concepts from several points of view (Shneidman, 1995:226).

Violanti (1996:50) and Vaden Bos et.al (1996:7) agree that police psychologists and others who work with police officers are cautioned about the primary purpose of suicide prevention program: to assist the individual officer. Thus programs such as proactive and reactive programmes, spiritual and debriefing sessions once implemented by attending individual or group counseling sessions and trainings, tend to become entangled in organisational bureaucracy and may lose sight of this important goal'.

However according to Everstine (1998:3) the reduction of suicide rate will be by the efforts of mental health professionals in devising methods of primary prevention that will affect the general public, as noted by Shneidman in his definition of suicide: perhaps the main task of South African Police lies in the dissemination of information especially about the clues to suicide: in the schools, in the workplace, general public and by means of public media.

Sinclair et al. (1994: 40), defines prevention as 'the act of preventing'. Prevention is better than cure, more particularly in the context of a suicide and its aftermath! Hackett and Violanti (2003:10), argue that the prevention of suicide requires a strong support system. The individual agency should have a plan in place to deal with an emergency employee-involved suicide intervention. Law enforcement administrators have a responsibility to create an environment where training of all personnel in suicide prevention and intervention is the norm.

Violanti (1996: 52) states that researchers are faced with challenges to prevention, the greatest being the lack of empirical and reliable evidence on a topic. Another challenge is the consuming denial of officers and departments that suicide is a problem. Suicide prevention is often forsaken for operational training programs, and no one wants to admit that suicide may exist in epidemic proportions within their own professions. The SAPS department too cannot be detached from this reality (Violanti, 1996:3).

Everstine (1998: 8) highlights that the resolve to kill oneself begins with a look, a word that can mean more than one thing, crossed signals, failed expectations, insensitivity, criticism, meanness, anger, a grudge, retaliation, the hellish hatred that one person can feel for another. People kill themselves out of spite. They wish to hurt, maim, cripple, or destroy another person. To do this, they must sacrifice their own lives, and they see it as a fair exchange.

Shneidman et al, (1994:79) are convinced that, the availability of active suicide prevention services may offer such a person a grasp on life. They offer the possibility of showing that life is not so fatally narrow

and that death need not be the only answer. Thus if suicide attempts involve other methods and the victim is discovered in time, his/her life could be saved.

## **7. SURVIVORS REACTIONS TO POLICE SUICIDE**

Mishara (1991: 20) highlights that the person who commits suicide puts his psychological skeletons in the survivor's emotional closet - he sentences the survivors to deal with many negative feelings, and, more, to become obsessed with thoughts regarding their own actual or possible role in having precipitated the suicidal act or having failed to abort it. It can be a heavy load.

Pfeiffer indicates that survivors of suicide describe feelings of bewilderment, shock, disbelief, sadness, guilt, and anger over the death. They report episodes of crying, depression, apathy, persistent anxiety, and at times, suicidal ideation. Regardless of whether the suicide was actually observed or is imagined, some suicide survivors experience frightening and disturbing images of death (Pfeiffer, 1996:56).

Suicide survivors frequently experience a protracted period when they struggle to overcome the feeling that they themselves are responsible for the suicide. They feel intense anguish that the person committed suicide instead of seeking other approaches for managing distress. They feel helpless for not recognizing the seriousness of the deceased person's emotional state, and for not preventing the suicide (Pfeiffer, 1996:60).

## 7.1 THE EFFECT OF SUICIDE ON FRIENDS, SOCIETY AND FAMILY

The term 'survivors' has been applied to those friends and family who have been affected by suicide. While survivors of suicide have certain things in common with other bereaved people, some aspects of their bereavement are unique. Like all those bereaved, they are faced with a major loss, and with having to face the fact that the loss is permanent. Anger and guilt are common bereavement reactions, but are often more intense and long lasting among survivors of suicide.

Wertheimer (1998:25) states that survivors who either witness the person committing suicide or, more commonly, find the body, are left to come to terms with a shattering experience. Memories of the scene are likely to remain with the survivor for many years to come, and may never disappear completely. Even when a person has not actually discovered the body, being told about the circumstances of the suicide can leave the survivor with horrific images of the scene of the death, making it hard for them to think about anything else at first. Where the victim died in a violent manner, this reaction is likely to be intensified. Trying to understand why someone has committed suicide can preoccupy survivors for months and even years after the event.

Suicide has a devastating emotional impact on surviving family members and friends. The intentional, sudden, and violent nature of the person's death often makes others feel abandoned, helpless, and rejected. A family member or friend may have the added burden of discovering the body of the suicide victim.

Parents often suffer from social stigma, or shame, surrounding suicide, survivors may avoid talking to others about the person who died, and others may avoid the survivors. Despite these extra problems, research has shown that suicide survivors go through the same grieving process

as other bereaved people and eventually recover from grief. Support groups may be particularly helpful for grieving suicide survivors.

The relationship of the deceased police officer to the society has specific and profound effects on bereavement. Varied reactions have been seen in the community where a police officer has committed suicide: some feel relief from the burden of caring for their neighbour's chronic emotional problems, while others become emotionally distant from the police officers family and become secretive about the case of death. Reactions like these have special effects on the deceased family members whose bereavement would be influenced by the feelings and behavior of the society (Clark, 2003:70).

The death of a police officer does not only create a shared sense of mourning among members of the society, it also has a much stronger impact on some people's physical and mental health. Sometimes there is a dramatic increase in demand for support group and counseling services in the community. Counseling is a request for help-not necessarily because those suffering from grief are concerned for the deceased or family, but it is because the deceased death has made them relieve their own experiences of losing loved ones. However, high-profile deaths of police officers have a major impact on society because the community suffers their own grief experiences and as a result they feel very drained (Clark, 2003:77).

## **7.2 SOCIAL SUPPORT FOR FRIENDS AND FAMILY OF SUICIDE SURVIVORS**

The number of significant survivors could be much higher because not only family and friends are directly affected but virtually all of the officers in department especially small departments where strong bonds create a family feeling. Clearly there is a need to provide support for these many survivors (Knieper, 1999:29). Organizations need

to identify survivors and communicate to them the availability of support services. The point is that some survivors might be less likely to seek assistance or discuss the event with others because it was suicide.

Police departments should consider a policy requiring that officers attend CISDs and other activities intended for their assistance to ensure that all affected survivors receive at least some assistance. Therefore it is imperative to provide support for the family and fellow officers. The point is that some survivors might be less likely to seek assistance or discuss the event with others because it was suicide. (Saunders, 1991:77).

The signs and symptoms of distress and bereavement resulting from the suicide of an officer might be a mix of any of the following commonly-reported reactions among survivors (DSM-IV, 1994), Loo, (2001-2:45): shock over the suicide, feelings of grief, helplessness, abandonment, isolation and loneliness, Feelings of depression and weepiness, disruptive sleep and eating patterns e.t.c

All societies will have different standards with which they will measure appropriate behaviour during the bereavement period. Whether or not members of a family are observed to understand death or are grieving in a healthy manner, is based on the interpretation of the individuals in any given society. Culture too exerts a significant influence on the way a loss is perceived and experienced by the family (Saunders, 1991:77).

## **8. SOUTH AFRICAN POLICE COUNSELLING SERVICES**

SAPS suicide prevention project was established in late 1998. The rate of counseling sessions was measured according to the number of sessions per 1000 police officials in 1999. In nine Provinces SAPS

counseling service was most utilized by police officers in the Western Cape, followed by Mpumalanga, Free State and North West. In the Northern Cape, KwaZulu- Natal, Gauteng, Eastern Cape and Limpopo Province the services were under-utilised (Masuku, 200:5). The number of police officers in each province, and the number of counselors available in SAPS however, affect the varying utilisation of counseling services in each province. One would however, assume that counselors are distributed in accordance with the distribution of police officials (Masuku, 200:5).

The major challenge for the SAPS suicide prevention project is to promote the counseling services among SAPS officials and to establish the important use of these services. One way to encourage police to use these services could be the development of peer counseling like in HIV/AIDS. Equally important is reducing work related stress for officers as part of efficient management. Police top and middle managers need to pay attention to the morale and signs of distress among members in their ranks (Swanepoel, 2000:45).

Since 1990 Employee Assistance Programme has been helping police officers to face personal problems that affect them, and their job performance. Employee Assistance Programme (EAP) allows police officers and their family members to resolve their problems in an environment of understanding and complete privacy. SAPS has experienced counselors who are available 24 hours a day. They have a wide range of specialization and are conveniently located.

EAP incorporated also on-line resources that provide an interactive website for employees, supervisors and family members. They have password-protected sections that allow access to helpful information on hundreds of topics exclusively for their clients. Some of the available

resources on-line are book reviews, medical condition information, mental health issues, newsletters; psychological self-help books symptoms list (Masuku, 200:6).

Employee Assistance Programme (EAP) incorporated is a live confidential counseling service dedicated solely to administering professional employees assistance programmes for covered employees and their families. EAP is designed to improve the outcome of each case. There is no cookie cutter in providing services. This provides the counselors with as much face-to-face orientation service as necessary to reach all police officers. Counselors often meet with the key officers to gain their trust and confidence in their programmes. They also devote a high level of involvement and commitment in order to maintain programme awareness throughout the year.

One element that makes counselors to be successful is the training of supervisors. Supervisors are properly trained to understand the concepts and operations of the EAP programme. They are expected to greatly enhance the effectiveness of new programmes.

SAPS has services like the Federal Department of Transportation that requires all police officers in safety sensitive positions who test positive for drugs and/or alcohol to be evaluated by a Substance Abuse Professional (SAP). The rule further states that a SAP shall perform an initial evaluation and write a report to the employer with treatment recommendations. SAPS goal is to return the police officer to work as a productive individual as soon as possible (Swanepoel, 200:78).

SAP understands the value of counselors and EAP's as a way of improving police wellness. Counselors have optional employee wellness seminars, which is an ideal way of maintaining awareness.

Popular topics may include alcohol and drug awareness, anger management, balancing work and family, communication style, financial counseling letting go and driving, stress management, trauma, and e.t.c

In addition SAPS works from the premises that their own members are their most valuable assets. Thus, for these reason counselors enjoys a high priority focusing on both proactive and reactive measures. Proactive programmes enhance officers' well being while the reactive programmes serve officers who need emotional support. They have programmes that provide a telephone counseling service, one-on-one counseling and a referral base to the Employee Assistance Services (EAS) namely psychologists, social workers, and spiritual workers. The EAS offers standby service for SAPS members, which includes a 24-hour toll free number. SAPS specific training videos are a valuable tool in alerting peers and commanders to the warning signs of potential suicide victims so that timeous emotional support can be secured (de Beer, 2003:88).

## **9. WHAT IS ORGANISATIONAL CULTURE?**

Culture as defined in the Webster's New Collegiate Dictionary, is "the integrated pattern of human behaviour that includes thought, speech. Action, and artifacts and depends on man's capacity for learning and transmitting knowledge to succeeding generation" (Webster's New Collegiate Dictionary as quoted in Emerson, 1989:3). However, if defining organization's culture is achieved by understanding its key values, beliefs and actions, then this becomes useful when attempting to assess the police subculture. Understanding how new officers are assimilated into culture and how the culture manifests itself outside the organization become major imperatives for the police leader. At the

institutional level of policing, values and culture are most often associated with the “corporate strategy” being pursued by the organization as a whole (Kelling et.al, 1998:78, and Moore et.al, 1998:54).

## **9.1 POLICE ORGANISATIONAL CULTURE**

This study further investigates whether the police officer should be judged based on their individual traits or through their socialization and experience. Police personality is heavily informed by police culture and therefore leads people to view and perceive police officers’ traits according to their socialization experience and the police culture.

However for one to understand the influential effect of police culture to police personality, a proper definition of culture is needed. Harrison (1998:77) defines culture as “the integrated pattern behavior that includes thought, speech, action, and artifacts and depends on man’s capacity for learning and the knowledge to succeeding generations”.

When looking at the concept of organisational culture among police one finds many paradoxes. For example, solidarity among the “rank and file’ is often cited as the reason for police deviant conduct. While at the same time, solidarity provides the basis for extraordinary organizational cooperation and teamwork. Likewise, many police officers ascribe great pride to the mission of police work, extolling its uniqueness and potential to make a difference. At the same time in terms of the organization, police tend to isolate themselves from their communities, often becoming arrogant and consumed with maintaining the organization for organization sake.

Many police leaders have been thwarted in their attempts to engender change in the organisation due to existing cultural barriers inside their own departments. Much of the research regarding police culture appears in the literature relating to police deviant behaviour, ethics, and misuse of force and discretion (Brown, 1981; Cohen & Feldberg, 1991; Goldsmith, 1990; Reusslianni, 1983). While these are important issues facing the police and their leadership, the discussion of culture tends to be cast in the light of its potential negative effects.

## **9.2 ISOLATION**

Over the past thirty years SAPS has chronicled the tendency for police officers to become isolated from friends, from the community, from the legal system, and even from their spouses and families (Drummond, 1997:99 and Skolnick, 1996:34). Police also become isolated due to their authority as they are required to enforce many laws representing puritanical morality, such as those prohibiting drunkenness. However, police officers have been drunk themselves and become sensitive to the charge of such hypocrisy. In order to protect themselves they tend to socialize with other police or spend time alone, again leading to social isolation.

## **9.3 POLICE SOLIDARITY**

Police officers have show an unusually high degree of occupational solidarity. It is true that the police have a common employer and wear a uniform to work, but so do doctors, mail carriers, and bus drivers. It is doubtful that these workers have such close-knit occupation or so similar outlook on the world as do the police (Skolnick, 1996:96). Strong feelings of empathy and cooperation among officers are always observed in the daily behaviour of police. Analytically, these feelings

can be traced to elements of danger and shared experiences of hostility in the police officer's role (Skolnick, 1996:102). When combined with the tendency for police to become isolated the solidarity among officers begins to breed the "we-they" attitude. The positive effect of police solidarity would be the envy of many organizations who spend a great deal of time and energy in the attempt to build teamwork.

#### **9.4 ORGANISATIONAL STRESS**

SAPS is probably the only organization within the government, which still has in a large measure, a traditional view of itself, a view which instills amongst its members a perception of themselves as belonging to a common exclusive entity distinctly set apart from the other organs of the government, in terms of form, roles, image, power responsibilities, e.t.c in short almost a clannish sub identity. Police everywhere, have for various reasons, to view themselves as being a separate entity; which at the best of times feels tolerated and at worst, being let down (Padsmanabhan, 2000:78).

The well being of officers under command is a concept unique to un-informed forces, especially the police, within the government. This is because, the relationship between the officer and its employer i.e. the government, is not solely that of any employee-employer relationship. It transcends that equation with the ultimate accountability being to the society at large. However in fulfilling this complex responsibility the police have many contradictory pulls and pressures, leading to an expectations amongst its members, especially the men, for a kind of protection or a benevolence, not only for themselves, but also for their families (O'Toole et.al 1999:90).

The morale of the police suffer serious erosion due to different laws, an uncooperative public, an alert and over zealous and at times irresponsible media, constantly interfering politicians, multiplicity of command and other factors. Most police officers are unable to cope with the demands of SAPS, which expects maximum results (e.g., better conviction rates), while placing the police system under every possible constraint. Therefore, when SAPS does not provide institutional mechanisms for resolving such dilemmas, aberrations such as criminalisation of police, stress related rebellion, suicide declining work performance, politicization e.t.c, take place (Webb, 2003: 77).

#### **10. SAPS ETHICAL FRAMEWORK**

SAPS ethical framework was introduced to provide a code of ethics for all police members. The framework promotes police values of caring, courage, equity, integrity, openness, respect and transparency. However, SAPS framework of responsibilities and ethical values are based upon the ethical foundation of law, moral code, human dignity, and democratic principles. Albeit, lack of ethics can have a negative impact in the police service on how the public trust is eroded. Thus police officers cannot afford to be complacent rather, they be proactive (Masuku, 200:5). A police Act defines minimum police behaviour or codes not professional ethics. There can be little question that legitimate police powers are derived from the consent of the public. As a result, it is incumbent upon SAPS to safeguard the public trust by acting ethically. Therefore, the primary duty of all police officers is to work diligently in support of South African democratic values that are enshrined in the Constitution and the Charter of Rights and Freedoms (Mason, 2002:86).

The policing performance assessment framework is another framework, which is led by the home office, with the support of the association of chief police officers and the association of police authorities. Improved police performance is central to the government's vision of better public services. It was not until the establishment of the policing performance assessment framework that the police service had lagged behind many other public services in terms of the extent, robustness and transparency of the framework for assessing its performance (Mason, 2002:100).

Policing performance assessment framework focuses on operational effectiveness. It provides measures of satisfaction plus overall trust and confidence in the police, as well as measures that put performance into context in terms of efficiency and organisational capability. The framework is about "policing" as a whole and is thus designed to reflect the breadth of modern policing (Mason, 2002:110).

## **11. SUICIDE STATISTICS**

There is a growing emphasis on identifying police members who are at risk of suicidal behaviour. This emphasis is attributable to the increasing incidence of suicide among police members world-wide, and also in the SAPS. Suicide rates in 1994 were higher in the SAPS (60 out of 100 000) than in the general population of South Africa (five out of 100 000) (Nel, 1994). Incidences of suicide in the SAPS increased from sixty five (65) in 1991 to one hundred and fifty six (156) in 1997. However, there has been a small decline in suicide from 14 per 10 000 police officials in 1996 to 11 per 10 000 officials in 1998 (Van Rensburg, 2000:78).

However, from different sources the rate of police suicides is quite alarming. Technikon South Africa (The Citizen dated 1998-03-02) indicated that 269 police committed suicide during 1996 - 1997 in their study on police suicide in South Africa. This statistics clearly indicate the

suicide crisis among the police officials as well as the daily demands of their duties.

Statistics on the SAPS shows relatively high numbers of suicide rate among officials, hence the present study on the effects of police suicide on their well-being.

## **12. CONCLUSION**

Suicide is always complex. Most experts feel the majority of suicides are preventable. Increased knowledge, coupled with straightforward intervention can cut through the denial, ignorance, resignation, and apathy many officers feel about the ability to prevent suicide. Suicidal people may communicate their intentions to commit suicide to only one person. Therefore, support staff, dispatchers, administrative personnel, officers and family members must learn the basic and necessary steps to take or at least know whom to contact if they become suspicious or concerned that someone they know may be considering suicide.

## **CHAPTER 3**

### **DATA ANALYSIS, INTERPRETATION AND PRESENTATION**

#### **3.1 INTRODUCTION**

The aim of the present study is to investigate the effects of police suicide among the South African Police Service (SAPS) members in Polokwane. This chapter presents an analysis of the data collected among 100 respondents who have been either directly or indirectly affected by the suicide of a colleague. This chapter also offers an interpretation and discussion of the findings. The first part of the chapter outlines demographic factors of the respondents and the second part reports on the findings about the effects of suicide among the interviewed respondents.

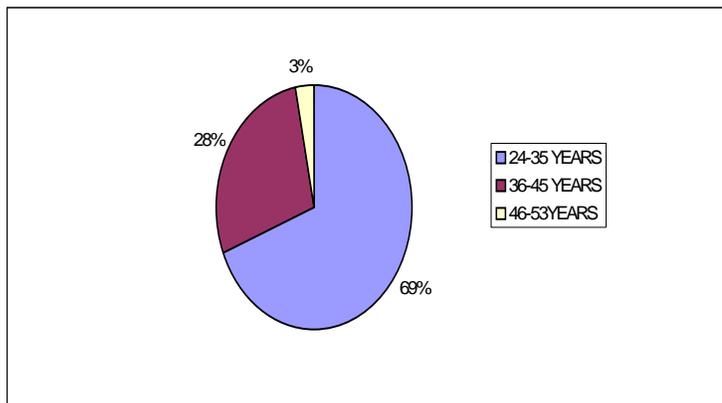
#### **3.2. BIOGRAPHIC DATA**

In order to provide an in-depth analysis of the effects of suicide, the respondents' biographic information was considered an important variable in the interpretation of the findings of the study. This section describes age, qualification, marital status, and official ranks as variables on the effects of suicide among the SAPS staff members.

##### **3.2.1 AGE**

The findings of this study show that there is a correlation between suicide and age. The younger SAPS staff members were vulnerable to suicide compared to their old counterparts. The relationship between age and suicide among the respondents is summarized in Graph 1 below:

**Graph: 1 Respondents' age category**



The graph above presents the age composition of respondents who participated in the study. Sixty-nine percent of the respondents were aged between 24-35 years. The second largest group was between the age group of 36-45 years, thus constituting 28% of the respondents. The two age groups between the ages of 24-35 and 36-45 years constituted 97% of South African Police Services (SAPS) members who are considered middle aged.

Three percent of the respondents were between the ages of 46-53 years. During the interviews, 97% of the respondents (SAPS officers) indicated that they were the most active officers and that they were able to provide additional ad hoc services at times of emergencies. They were also involved in the SAPS extra-mural activities, such as choirs, community leadership programmes, voluntary work, and sport activities within the SAPS.

As shown in the graph, age is an important variable within the SAPS in terms of gaining entry into the service. The respondents that fall in the middle age category, i.e., between 46-53 (3%) years are those that have long been in the service, (i.e., 10 years and longer). The respondents' ages of 24-35 years indicated that there is an upper age

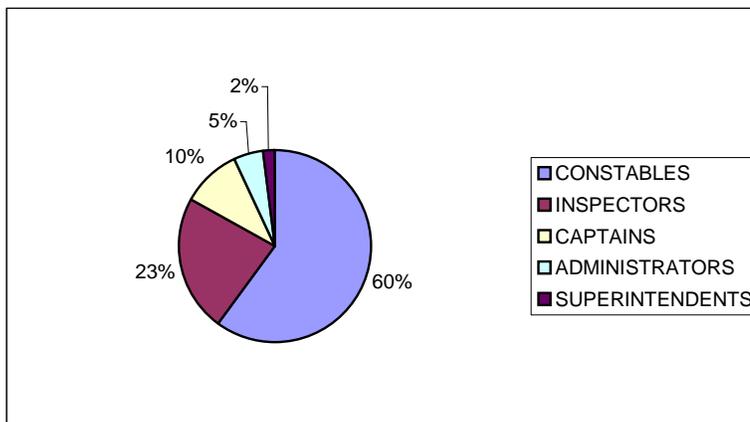
limit for appointment based on the retirement age for police constables and sergeants, which is at 55 years.

Those in the age category of 46-53 years indicated that police stress was higher among them as they did not have leisure-time and that their job did not involve a lot of physical activity or any hobbies. This age category further said that male police officers in the SAPS had the highest rates of committing suicides.

### 3.2.2 OFFICIAL RANK

Official rank is the second demographic variable that had a bearing on the findings of the study. The ranks of all the respondents in the study were analysed as illustrated in Graph 2 below:

***Graph: 2 Respondents according to official ranks***



The graph above indicates that within the SAPS in Polokwane, 60% of the respondents are constables, 23% occupied the inspector's position, 10% are captains and 5% are administrators. There was a small percentage (2%) of respondents who indicated that they are going to be promoted to superintendents. Sixty percent of the constables indicated that the SAPS is flooded with constables due to the absence

of career progression. They mentioned that for a police officer to move to the next rank, it is very difficult since such a move is based on a vacant post available or one has to wait until one officer is promoted or resigns.

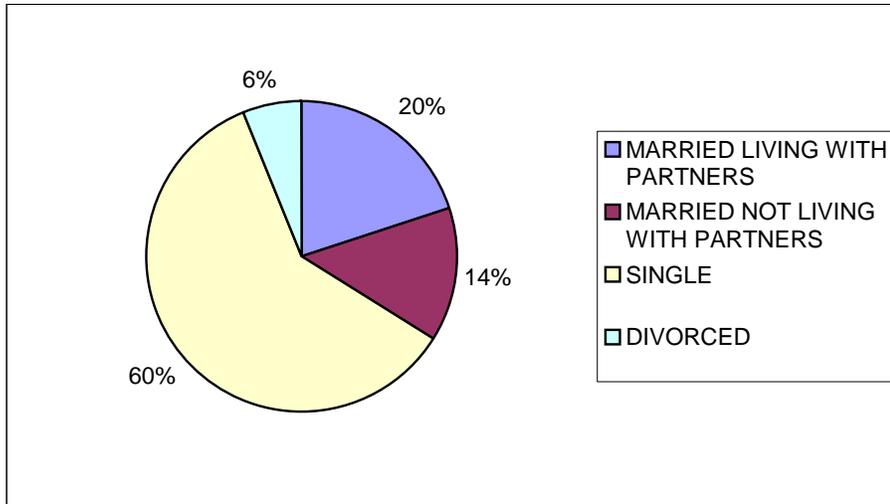
The graph shows that there is very little career mobility within the ranks of the SAPS. This has resulted in most police officers reaching the ceiling (i.e., no upward mobility unless one officer resigns, gets promoted to another unit or the death of an officer). This has proven to be a source of frustration as officers felt that they could not wait for such eventualities, since these are not humanly determined.

The respondents indicated that the rank of constable is more associated with the highest overall levels of exposure to stress. Inspectors reported to have operational, management, and organisational stress. Therefore, as the age variable showed, official rank is directly related to the risk of suicide.

### 3.2.3 MARITAL STATUS

Marital status was another variable taken into account in the study. The respondents disclosed their marital status as presented in the graph below.

**Graph: 3 Respondents according to marital status**



The above findings show that 20% of the respondents are married and living with their partners; 14% of the respondents are married although not living with their partners who work far from home; 60% of the respondents reported being single; and 6% of the respondents are divorced.

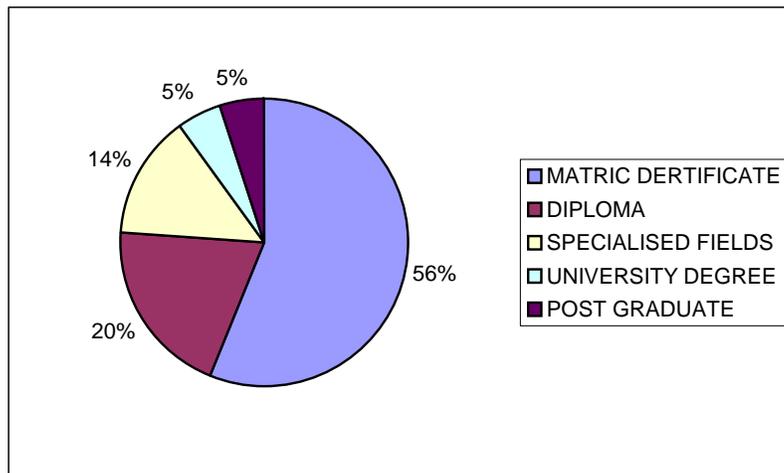
The findings indicate that officers who are single have less stress than married officers. Married couples living with partners during the interview indicated that they experience some violence related acts and injuries than those who do not live with their partners. Single people and married couples not living with partners further indicated that they did not mind if their tender moments were disturbed by a call for special duty. Married couples living with partners further explained that, in most cases, duty takes them away from their partners.

Those who are married indicated that being a married police officer had adverse effects on friendships. It limited ones' private life as work intrudes into home and family lives, and generates frustrations because of negative public image of police. A combination of 60% of those who are single and 6% of those who are divorced makes a little over 66% of the total number of police officers who did not have spouses. Compared to the married partners, this group did not mind time pressures, excessive paperwork and heavy work load, as these did not interfere with their personal and private lives.

### 3.2.4 QUALIFICATIONS

Educational qualifications of the respondents formed part of the investigation. The demographic composition of the police officers according to their qualifications is presented in Graph 4 below:

*Graph: 4 Respondents according to qualifications*



Fifty-six percent of the respondents have matric certificates, and 20% of the respondents' attained diplomas above the police graduate level. Fifty-six percent of the respondents said that their educational

qualifications include courses like Criminal Investigation Procedures, Self-defence, Weapons Handling, Drills, Inspections, Public Relations and Law.

Fourteen percent of the respondents indicated that they are currently pursuing studies in specialized courses like Crowd and Riot Control, Detective Skills, Horsemanship and Veterinary Training, including Advanced-level Management Skills. The remaining 5% of the respondents pointed that they have university degrees, and the other 5% of the respondents said they had just completed their postgraduate studies from universities.

During the interview, the respondents indicated that those with minimum requirements (i.e., matric certificate and Drivers licence) working in the SAPS is because they come from under-privileged families, hence they could not improve their educational qualifications then, before joining the SAPS. Despite this, a quarter of police officers are currently furthering their studies at higher institutions.

Upon further probing, the respondents pointed that SAPS offers its members bursaries to continue their studies and upgrade their qualification levels. The justification could be that the SAPS management needs quality people to do highly professional work in their various job environments. The SAPS takes its members for on-the-job training and out-of-the job training activities. These have a positive impact on police officers' morale given that they feel empowered and capacitated to become productive in the work place.

### 3.2.5 IMAGE OF POLICE SUICIDE TOWARDS SAPS

The respondents were asked about the effect of suicide on the SAPS image. Table 1 below summarizes the findings of the survey.

*Table: 1 Respondents view on the image of police suicide towards SAPS*

Variable	Sub-variables	Percentage (%)
<i>The image of police suicide towards SAPS</i>	Bad	95
	Good	5
<b>Total</b>		<b>100</b>

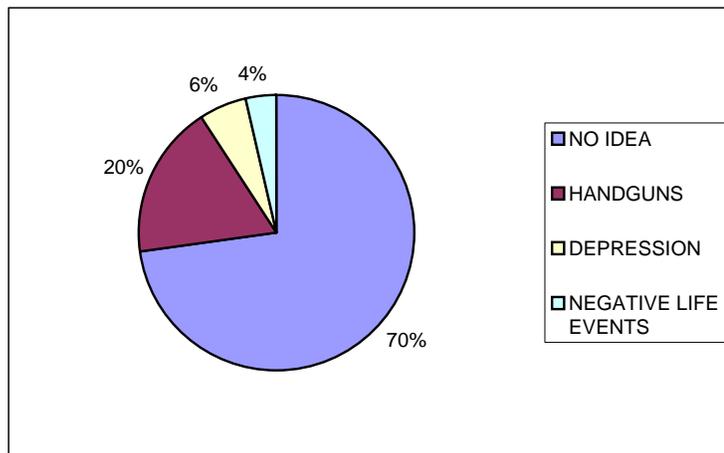
Ninety-five percent of the respondents indicated incidences of police suicide mars the image of SAPS. Moreover, police suicide portrays a bad image to the society. Upon further probing, 95% of the respondents further indicated that suicide puts them under pressure. The respondents further indicated that, to some extent, some police officers would undertake some form of introspection and thus feel ashamed to tell the community that they are members of the SAPS.

Five percent of the respondents said that they have no solid view on whether or not police suicide affects the image of the SAPS. For the fact that the majority of the respondents are concerned about the image of the SAPS, it seems probable to conclude that suicide has a negative impact on the image of the SAPS.

### 3.2.6 CAUSES OF SUICIDE

The respondents were interviewed about conditions that lead to suicide among the SAPS members. Their responses are summarized in Graph 5 below:

*Graph: 5 Respondents view of circumstances that trigger suicide*



There was a wide range of responses on the conditions that trigger suicide. The graph above indicates that the majority of the respondents (i.e., 70%) said that they did not have any idea of what could have led their colleagues to commit suicide. Twenty percent of the respondents did point that police officers carry handguns at work as a requirement, this increases chances of using handguns to kill themselves. Six percent of the respondents believe that police officers commit suicide due to depression. Four percent of the respondents pointed that the causes of suicide include, among others, going through financial difficulties, family crises, acute terminal illnesses and post-traumatic stress disorder - cases that often resulted in suicide or suicide attempts.

Brent et al., (2002:89) argue that suicide happens as a result of a complex number of factors featuring simultaneously, notwithstanding

different individualities. Therefore, in each case, the above-mentioned circumstances reveal that risk factors are combined with a sense of social isolation and hopelessness. Some of the respondents believed that suicidal police officers were not of the view that someone could help them at the time (i.e., professional intervention or a colleague). The findings reveal that the SAPS is still lagging behind in educating its members that depression is a treatable ailment, and also that officers can respond positively to medication, therapy, or a combination of the two.

The general feeling among the respondents is that suicide involves a culmination of several overwhelming challenges like financial problems, marital problems, career frustrations, loss of moral and hope. Further probing did point out that the police officers who committed suicide have been in constant pain. The respondents further indicated that what made it worse was when they themselves did not know what went through their suicidal colleague's mind. Twenty percent of the respondents argued that police officers killed themselves due to a specific reason and out of their own discretion.

Lester (1999:105) argues that police officers do not commit suicide out of a voluntary action, but it is because of an involuntary response. The present researcher observed, during the interview that, in most cases, the police officers lack suicide coping skills, because they failed to maintain contact with other colleagues during the sad, stressful and confusing months of suicide ideation.

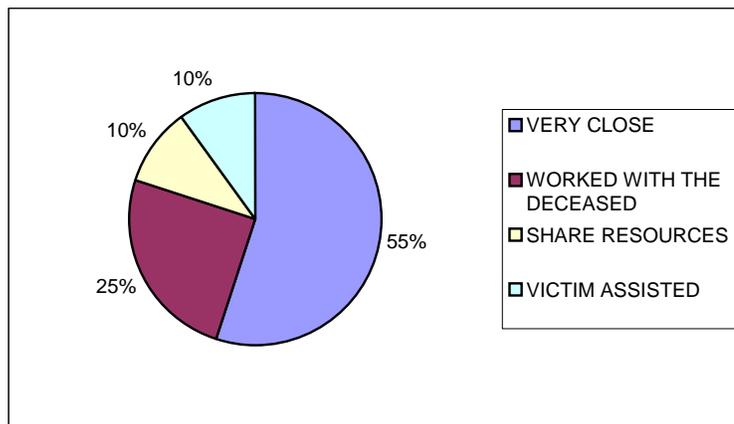
In a study conducted by Lester (1999:108), a view emerged that police suicides are not so much to end life as to end pain and suffering. It was a feeling of helplessness that leaves them with no choice. This confirms the finding that police officers who committed suicide went through

periods of emotional and personality disorder, and/or they had poor coping skills.

### 3.2.7 RELATIONSHIP TO THE VICTIM

The relationship between a suicide victim and the SAPS officers was considered important in the present study. The respondents were asked to explain the nature of their relationship with the suicide victims. Their responses are summarized below.

*Graph: 6 Respondents according to the relationship with the victim*



The above-given graph shows that the respondents who indicated that they were close to the victim are those who worked with the deceased in the same unit. Fifty-five percent of the respondents indicated that they were very close to the victim. The respondents also indicated that, often their former colleagues made them feel optimistic about life and would encourage colleagues to face work challenges.

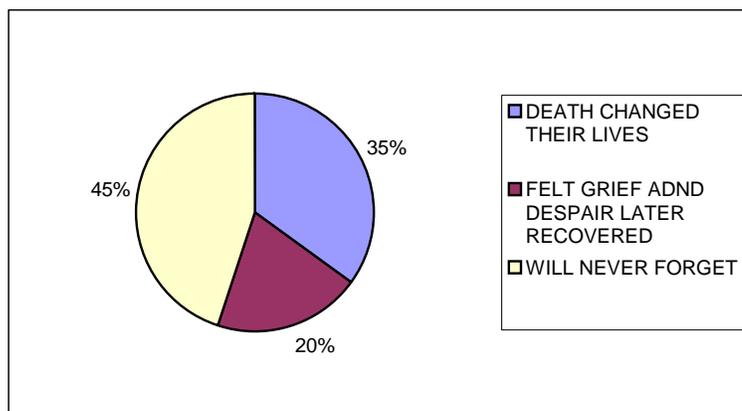
Twenty-five percent of the respondents said they were not working with the deceased in the same unit although they knew the deceased. Ten percent of the respondents said they used to share lunch and other resources with their late colleague. Ten percent of the respondents

said that the deceased colleague once or twice assisted them in many ways. In general, the findings point out that a suicidal police officer would have had closer ties with their colleagues to the extent that his/her suicide would affect them emotionally.

### 3.2.8 AFTER DEATH OF SUICIDAL COLLEAGUE

The respondents were asked to comment on their own personal feelings after the death of their suicidal colleague. Graph 7 summarizes their responses:

***Graph: 7 Respondents view after the death of a colleague by suicide***



The graph above indicates that 35 % of the respondents reported that they felt that their lives had changed. The respondents indicated that they believed that faith in God gave them a meaning and purpose to human life and faith carried them through their colleagues' suicide. Twenty percent of the respondents said that they felt grief and despair, but later they started recovering and everything seemed to return to normalcy. The majority of the respondents (i.e., 45%) believe that they would never forget the day their colleague died as it is always on their mind.

### 3.2.9 FEELINGS TOWARDS SUICIDAL COLLEAGUE(S)

The respondents were questioned about their feelings towards their suicidal colleagues in the SAPS. The following indicate their responses, as summarized in Table 2.

*Table: 2 Respondents feelings about colleague(s) who committed suicide*

<i>Feelings about colleague who committed suicide</i>	<b>Response</b>	<b>Percentage (%)</b>
	Depressed and disturbed	40
	Grief and guilt	40
	Challenging and hard to understand	20
<b>Total</b>		<b>100</b>

Forty percent of the respondents said that they felt depressed and disturbed. They reported that they were shocked and had problems trying to concentrate. However, they did point out that they found daily chores helpful for them. Forty percent of respondents said they were stressed and consumed with feelings of guilt. Twenty percent of the respondents believe that surviving the grief of a colleague who committed suicide is challenging, as it is hard to understand the reason behind their actions.

The findings indicate that it is difficult for survivors to cope with the suicide of a colleague, to the extent that it became also difficult for them to be in or maintain contact with other colleagues, especially during the stress-filled months.

### 3.2.10 SEEKING ASSISTANCE

The respondents were asked whether they sought assistance or discussed the issue with other colleagues about police suicide in the SAPS. Table 3 below summarizes their responses.

*Table: 3 Respondents view on seeking assistance or discussing the event with other colleagues*

<i>Seeking assistance from other colleagues</i>	<b>Response</b>	<b>Percentage (%)</b>
	Never sought assistance or discuss the event	65
	Survivors of suicide	10
	Colleagues death changed their lives	15
	Sought assistance	10
<b>Total</b>		<b>100</b>

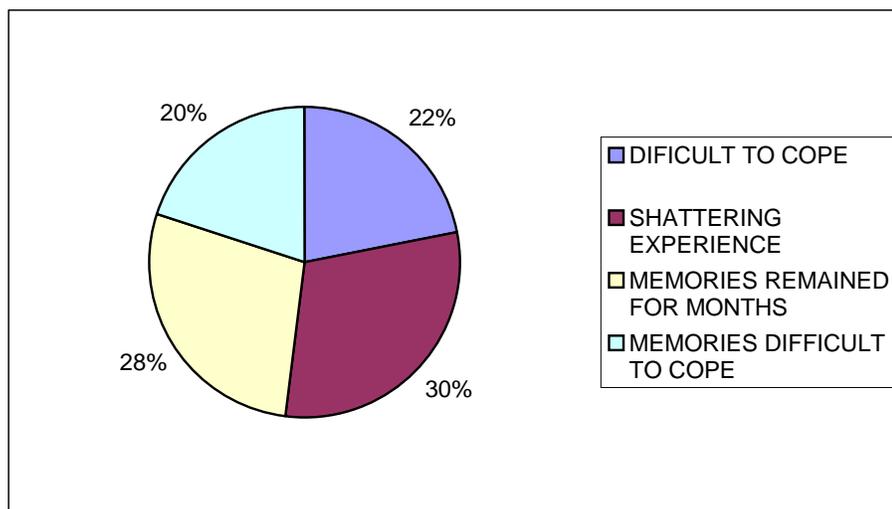
The majority of the respondents (i.e., 65 %) said that they never sought assistance or discussed the event with their other colleagues. Ten percent of the respondents believed that they are survivors of suicide as they suffered the heartache of losing a good colleague through suicide. Fifteen percent of the respondents indicated that they received emotional and informal assistance mostly from their informal social supports, viz., family, friends, neighbours and acquaintances. This shows that the way police officers cope with the death of a colleague by suicide is mostly determined by contact with formal and informal support programmes. Thus, a negative or positive response by any of these supports may influence the way the grief process will unfold.

Ten percent of the respondents indicated that they sought formal support, viz., professional counselling by psychologists, social workers and pastors in SAPS - whereby it played an important role in their grieving and healing process. Ten percent of the respondents felt that it is important that SAPS have counsellors that are specifically trained in the area of suicide bereavement so that their emotional needs are immediately attended to.

### 3.2.11 VIEWS ON THE AFTERMATH OF SUICIDE

The aftermath of suicide was regarded as an important factor in the study. The respondents were asked to comment on this. Their responses are presented below:

*Graph: 8 Respondents view on the aftermath of colleague suicide*



Twenty two percent of the respondents indicated that at first it was difficult for them to cope because of how the incident was reported to them. Respondents indicated that it was hard for them to think about anything else when they recall what they were told. Thirty percent of the respondents said that they once witnessed first hand an officer who committed suicide at home and it was a shattering experience for

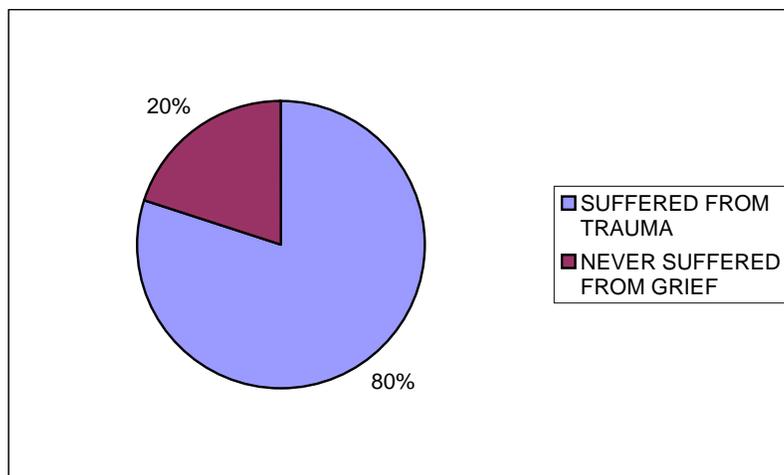
them. Twenty eight percent of the respondents said that memories of the scene have remained. Twenty percent of the respondents indicated that it was difficult for such memories to disappear completely.

Thirty percent and 20% of the respondents respectively explained that they were unable to cope with the aftermath of a colleague's suicide. Wallace (1999:98) is of the opinion that colleagues that struggle to cope with the aftermath need to get support from other people, including family, colleagues, friends and professionals. Wallace (1999:100) further states that it is important for survivors to release their emotions of grief as it is considered part of the healing process.

### 3.2.12 RECOVERY FROM LOSS OF A COLLEAGUE

This study sought to elicit data on recovery after the loss of a colleague to suicide. Graph 9 below presents the responses.

*Graph: 9 Respondents views on the recovery from loss of a colleague*



Eighty percent of the respondents believe that they suffered from trauma and shock emanating from the unexpected loss of colleague who committed suicide. Twenty percent of the respondents said that

colleagues' suicide left them with a sense of loss, a legacy of shame, fear, rejection, anger, and guilt.

The respondents pointed out that they did not know about the staff members' bereavement support services. They believe that, had they known at the time, they could have learnt about coping measures and led healthier lives.

The findings mentioned above indicate that any working environment is an inter-actional unit whereby colleagues influence each other, and need one another's support. Hence, the most immediate impact of suicide is upon colleagues. Mishara (1995:25) pointed out that the impact of suicide is most evident in the bereavement reaction after death by suicide.

### 3.2.13 RECOVERY FROM GRIEF OF COLLEAGUE

In order to establish recovery process from the grief of a colleague, the respondents were asked to express their views, which are summarized in Table 4 below:

**Table: 4 Respondents views on the recovery from grief of a colleague**

<i>Recovery from grief of a colleague</i>	<b>Response</b>	<b>Percentage (%)</b>
	Sensitive to colleague's death	60
	Mourning process was difficult	40
<b>Total</b>		<b>100</b>

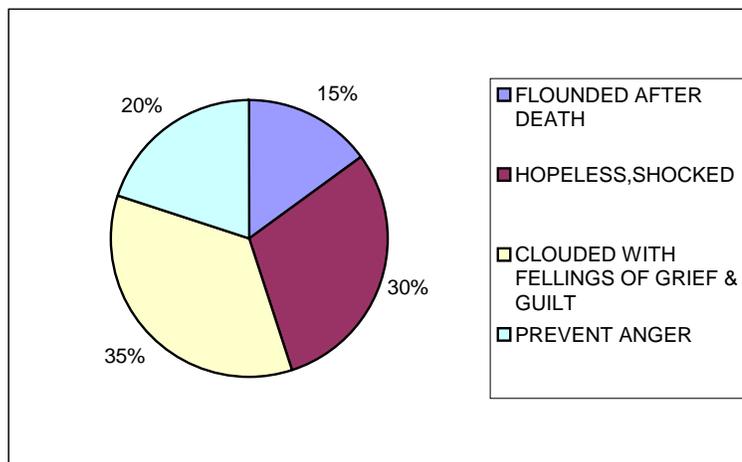
The finding above indicates that 60% of the respondents are very sensitive to their colleague's death by suicide. The respondents felt that

they could have done something to prevent the incident. Forty percent of the respondents explained that the mourning process was difficult. They further said that the difficulty was not being aware of the causative factors of suicide.

### 3.2.14 IMPACT ON SURVIVING COLLEAGUES

In order to elicit data on the impact of suicide on surviving colleagues, the respondents were asked to share their views. These are presented in Graph 10 below.

**Graph: 10 Respondents' according to the impact of suicide on surviving colleagues/family**



The respondents indicated that there are traumatic experiences that challenged surviving colleagues and family members. Fifteen percent of respondents said they are still shocked after an officer's death by suicide. Thirty percent of the respondents said they felt hopeless, shocked and they did not know what to do. Thirty five percent of respondents said that they were stressed about the fate that fell on their colleague. Twenty percent of the respondents believe that they

could have been able to prevent the whole thing by referring their colleague to relevant professionals had they paid more attention.

The present researcher observed that the respondents' frustration towards a colleague's suicide has an impact directly and indirectly on them. The lack of proper coping mechanisms to deal with emotions associated with colleagues' suicide is not addressed continuously, although this may assist in enhancing the respondents coping skills

### 3.2.15 LOSS OF COLLEAGUE BY SUICIDE

Loss of colleague by suicide considered an important factor in the study. The respondents were asked to express their views about losing a colleague by suicide. These views are presented in Table 5 below.

*Table: 5 Respondents views on loss of a colleague by suicide*

<i>Loss of colleague</i>	<b>Response</b>	<b>Percentage (%)</b>
	Experienced police suicide	48
	Colleagues death had an impact	20
	Had adverse effects	20
	Social norms negatively affected	5
	Emotional impact on society	7
<b>Total</b>		<b>100</b>

Forty-eight percent of the respondents reported that they have experienced at least one police officers death in their lives. The respondents mentioned that the officer's death had a noticeable

impact on both their personal and professional lives. The respondents reported a range of symptoms and emotions following an officer's suicide. Twenty percent of the respondents indicated that some of the symptoms that resulted from the impact of colleague's death were brief.

Twenty percent of the respondents reported bad effects of stress and depression lasting longer than a month. The respondents further indicated that they have lost colleagues in their years of service since they joined the SAPS. This shows that there is a substantial number of suicide cases among the SAPS police staff whose death affect their colleagues adversely.

Five percent of the respondents indicated that some of these effects are serious. These have influenced them to avoid colleagues who abuse alcohol and drugs; those who show increased anxiety at work, or irritability. Seven percent of the respondents said that a colleague's suicide has a deep, disturbing impact them, especially when the deceased's name keeps on coming up when the work team celebrates achievements that the deceased was involved in.

### 3.2.16 POLICE CULTURE AND WELL-BEING OF COLLEAGUES

Another important aspect of the study was the police culture and well-being of colleagues. Responses from the interviews are presented in Table 6 below:

*Table: 6 Respondents view on how police culture affects the well-being of colleagues*

<i>Police culture</i>	<b>Response</b>	<b>Percentage (%)</b>
	Culture contributes a lot to the well-being of officers	40
	Police officers' well-being is more affected when their personal and social development are low	25
	Lack of a healthy, supportive and good stimulating working environment	35
<b>Total</b>		<b>100</b>

Forty percent of the respondents explained that the SAPS culture has a challenge towards the well-being of officers as they try to live up to an image of the SAPS. Therefore, this shows that police officer have 4-world syndrome. Police officers must adjust to life in all 4 worlds, viz., the inner (defensive) world of policing; the outer (cooperative) world of the public; the street (quick response) world; and the station (paperwork) world.

Twenty-five percent of the respondents believe that their well-being was more affected when their personal and social development is low because of suicide of a colleague. Thirty-five percent of the respondents indicated that lack of a healthy, supportive and good stimulating working environment had a major effect on them, as they needed to focus on the job.

The SAPS culture is composed of organisational practices, the physical and psychological environment, officer's well-being and their sense of achievement. The respondents explained that the SAPS has a vision and philosophy that translates the day-to-day life of police officers into a good working environment.

### 3.2.17 WELL-BEING OF COLLEAGUES

Well-being of colleagues in the SAPS was investigated in the study. The respondents were specifically asked to express their views about the well-being of their colleagues as summarized in Table 7 below.

***Table: 7 Respondents view on how suicide affects the well-being of colleagues***

<i>Police well-being</i>	<b>Response</b>	<b>Percentage (%)</b>
	Negative effect	95
	No idea whether police suicide has an effect	5
<b>Total</b>		<b>100</b>

On the question of how suicide affects the well-being of colleagues the respondents, who constituted 65% out of 95% of the respondents, indicated that police suicide has a negative effect on the SAPS. Five

percent of the respondents indicated that they had no idea as to whether police suicide has an effect towards the SAPS or not. Twenty percent of the respondents out of 95% of the respondents agree that suicide has a negative effect towards SAPS. They explained further that suicide puts them under pressure to the extent that some police officers most often would under-go a great scrutiny by the society that wants “to police the police”. Ten percent of the respondents believe that police suicide has a negative effect on the image of the SAPS because society looks at police officers as protectors and peacemakers, and not as people who take their lives.

### 3.2.18 EFFECTS TOWARDS THE SOCIETY

The respondents were asked to comment on the effects of police suicide towards the society. The responses are presented in Table 8 below.

***Table: 8 Respondents view on how society is affected by the death of a police officer by suicide***

<i>How society is affected</i>	<b>Response</b>	<b>Percentage (%)</b>
	Not sure	30
	It affects the SAPS members and colleagues	30
	Family members are the most affected and the society of all age groups	15
	Most affected persons are police spouses	25
<b>Total</b>		<b>100</b>

Thirty percent of the respondents' indicated that they are not sure who exactly does police suicide affect mostly. Thirty percent of the respondents indicated that it affects the SAPS members and colleagues. Fifteen percent of the respondents said that family members are the most affected and the society at large. Twenty-five percent of the respondents believe that the most affected persons are their spouses. From the foregoing, one can argue that everyone in the society feels the emotional, social and practical repercussion of police officers' suicide.

### 3.2.19 VIEW ON WHETHER A COLLEAGUE IS SUICIDAL OR NOT

Views on whether a colleague is suicidal or not was considered an important factor in the study. The following responses were elicited from the respondents.

**Table: 9 Respondents view on whether a colleague is suicidal or not**

<i>Determine whether a colleague is suicidal or not</i>	<b>Response</b>	<b>Percentage (%)</b>
	Cannot identify and detect suicide-warning signals	78
	Able to identifying signs	22
<b>Total</b>		<b>100</b>

Forty-eight percent of the respondents indicated that they cannot identify suicide-warning signals on a colleague who has a high risk of suicide risk. Twenty-two percent of the respondents said that they are able to detect a colleague who is contemplating suicide although they do not know what to do about their observation. Thirty percent of

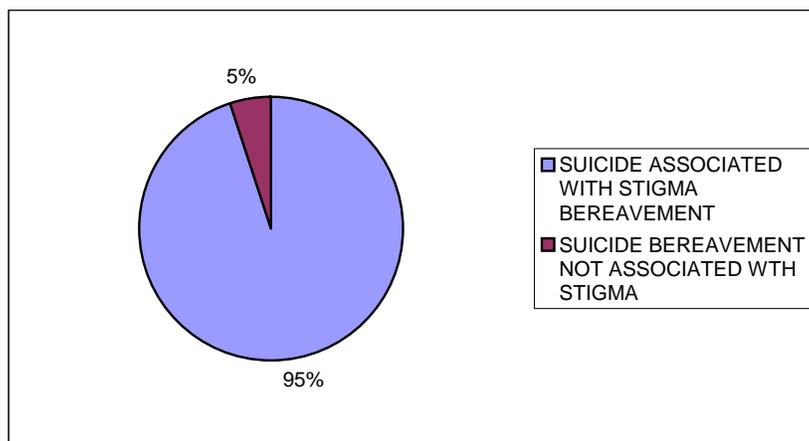
the respondents out of 78% of the respondents indicated that they are totally unable to detect suicide warnings in a colleague who is suicidal.

The above-mentioned findings show that police officers still lack the ability and skill to identify and recognise that a colleague is at risk and that he/she might have social, work related or personal problems. Van Rensburg (2000:54) argues that most police officers miss the clues of suicide as it is regarded as a taboo topic informed by many misconceptions.

### 3.2.20 BEREAVEMENT AND STIGMA TOWARDS SUICIDE

The respondents were asked to express their views about bereavement and stigma towards suicide.

***Graph: 11 Respondents according to bereavement and stigma towards suicide***



There seems to be some degree of variability of opinion in SAPS members in this graph. Ninety-five of police officers claim that there is a serious issue that suicide is associated with the bereavement stigma. Five percent of the respondents said that there is no suicide bereavement that is associated with stigma. The fact is suicide has a

profound effect on the family, friends, and associates of the victim. A variety of reactions and coping mechanisms are engaged in as each police officer sorts through their own individual reactions to the difficult loss.

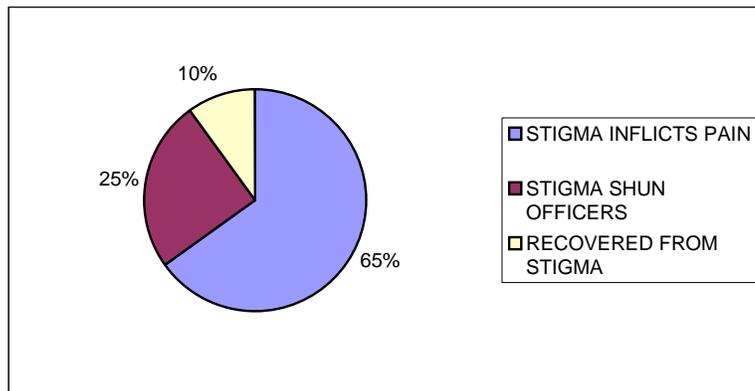
The above-mentioned finding indicates that stigma in suicide bereavement versus normal bereavement is experienced by survivors. Suicide bereavement of police officer who died as a result of suicide is different from police officer who died as a result natural loss.

Ninety five percent of the respondents further explained that stigma towards suicide is complicated by the societal perception that the act of suicide is a failure by the victim and the family to deal with some emotional issues. Therefore, one can say that individual or societal stigma introduces a unique stress on the bereavement process that in some cases requires clinical intervention.

### 3.2. 21 STIGMA AND RECOVERY

The respondents were asked to share their feelings on whether or not stigma prevents the police officers from recovering. Their responses are presented below.

**Graph: 12 Respondents view on whether stigma prevents police officers from recovering**



The above-mentioned diagram indicates that 65% of the respondents stated that stigmatisation deterred them from seeking help. Twenty-five percent of the respondents said that it caused those around the police officers to shun them, to be afraid to talk with them whereas 10% of the respondents indicated that they managed to recover from stigmatisation by engaging in good health care programmes (i.e., healthy environment, healthy behaviours, and healthy relationships).

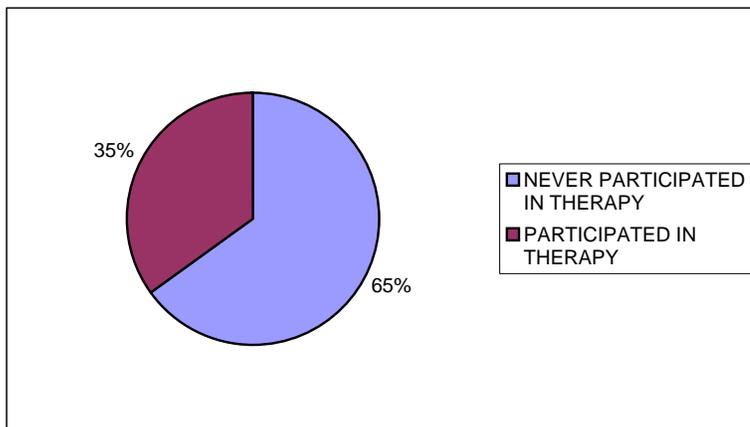
The above-mentioned findings indicate that stigma and prejudice exacerbates the officers' conditions. Conroy (2005:39) confirms that every human being has been taught from childhood that suicidal people are a source of shame, are sinful, weak, selfish, manipulative and that they are contagious and they can harm others. Conroy (2005:44) further states that none of these views are true because no scientific study has ever confirmed that a significant proportion of

suicidal people has these qualities. Therefore, the police officers that seek help have been conditioned to respond with fear, contempt, and aversion.

### 3.2.22 THERAPY SESSIONS FOR SUICIDE SURVIVORS

The respondents were asked whether they participated in therapy sessions. Their responses are represented in Graph 13 below.

*Graph: 13 Respondents view on therapy sessions for suicide survivors*



According to the above given data, 65% of suicide survivors indicated that they never participated in any form of therapy session. Sixteen percent of the respondents said that they participated in such sessions simply because they were close friends to the deceased. Nineteen percent of the respondent indicated that they did participate because they are related to the deceased and also worked with the suicidal officer. Thirty-five percent of the respondents said they participated in therapy session.

Knieper (1999:80) concurs that the number of significant survivors is much higher given that not only family and friends are affected by suicide, but also the SAPS officers whose strong bonds create a family

feeling. In this connection, it is imperative that support be provided for suicide survivors. The SAPS needs to do a better job of identifying survivors and communicating to them about the availability of SAPS support services, including support to immediate families and fellow police officers.

### 3.2.23 VIEW ON TREATMENT

The respondents were asked to share their views on treatment of suicide survivors. Their responses are summarized in Table 10 given below.

**Table: 10 Respondents view on treatment**

<i>Improvements for post treatment</i>	<b>Response</b>	<b>Percentage (%)</b>
	There is a great chance of improvement for treatment	58
	Determine the causes for suicide and identifying preventative measures	12
	Do not believe that there will be high improvement for treatment	32
<b>Total</b>		<b>100</b>

This research has found that 58% of the respondents are of the opinion that there is a great chance of improvement of treatment in the SAPS.

They believe that the SAPS treatment programmes needed to be strongly evaluated periodically, and that it should be seen as a natural extension to other establishment of suicide prevention. Twelve percent of the respondents indicated that having the ability to determine the causes for suicide and identifying preventative measures would assist in the improvement for treatment in SAPS. Thirty-two percent of police officers did not believe that there would be high improvement for treatment in SAPS in the foreseeable future.

The findings reveal that there will always be some base levels of suicide in SAPS even if there are highly effective suicide prevention programmes. However, effective and initial support for survivors is essential as a manner of being proactive.

### 3.2.24 KNOWLEDGE ABOUT TREATMENTS WITHIN SAPS

Knowledge about treatment programmes at the SAPS was considered an important aspect in the study. The respondents were asked to express their awareness about the programmes available at the SAPS.

*Table: 11 Respondents view on treatment that SAPS have*

<i>SAPS treatment</i>	<b>Response</b>	<b>Percentage (%)</b>
	Aware of SAPS treatment programmes and are essential	38
	Newly appointed and know nothing	12
	Employee Assistance Programmes (EAP) service is available and offered free of charge	20
	is not easily accessible and strategically located	30
<b>Total</b>		<b>100</b>

Eighty-eight percent overall of the respondents interviewed indicated that they were aware of SAPS treatment programmes (both proactive and reactive programmes). Thirty-eight percent of the respondents indicated that the SAPS' proactive programmes are essential because they enhance the officers' well-being and provide them with training

that focuses on their personal issues; (e.g., financial, legal, colleague sensitivity, and healthy life style issues). Twelve percent of the respondents indicated that they were newly appointed at the rank of constable and thus knew virtually nothing about the SAPS proactive programmes.

Twenty percent of the respondents indicated that the Employee Assistance Programmes (EAP) service was available in SAPS and offered free of charge. Thirty percent of the respondent indicated that EAP service was not easily accessible because it is not strategically located however, they were aware of SAPS treatment programmes.

The respondents pointed out that support structures are in place, but there is a lack of personnel strength of professionals (e.g., police chaplains, social workers, and psychologists to facilitate the effective application of these structures). This means that personnel manpower needs to be increased to ensure enhanced quality service delivery. It was observed that other SAPS stations did not have EAP services. As a result, the suicide survivors learn to cope without the help of a grief therapist. However, it seems that the question of how effective this support system is, and how many suicidal police officers access it for help, need to be investigated to ensure the EAPs intended purpose.

### 3.2.25 SAPS CRISIS LINE

Awareness of the SAPS crisis line was investigated among the respondents. Their responses are presented below.

*Table: 12 Respondents view on SAPS Crisis Line*

<i>SAPS Crisis Line</i>	<b>Response</b>	<b>Percentage (%)</b>
	Not aware of a 24-hour Crisis Intervention Services	60
	Aware of the Crisis line and that it is free	40
<b>Total</b>		<b>100</b>

Sixty percent of the respondents said that they are not aware of a 24-hour Crisis Intervention Services that is rendered at the SAPS. Forty percent of the respondents indicated that they are aware of the free Crisis Line, confidential and non-judgemental, and it also offers emotional support for 24 hours a day, 7 days a week for officers experiencing feelings of distress or despair, including feelings that may lead to suicide.

Violanti and Paton (1999:79) point that many traumatised and stressed policemen have been unwilling to make use of the SAPS Crisis Line that offers 24-hour counselling. This has been attributed to the stigma attached to any association with social workers, psychologists and counselling, and the shame of seeking help. However, the present study shows that most police officers still need to be informed about the 24-hour Crisis Intervention Services.

**CHAPTER FOUR**  
**SUMMARY OF THE MAIN FINDINGS, CONCLUSION AND**  
**RECOMMENDATIONS**

**4.1 INTRODUCTION**

This chapter presents a summary of the main findings of the study, the implications of the study and the recommendations pertaining to the study, and it also provides an overview of the study by way of conclusion.

**4.2 SUMMARY OF THE MAIN FINDINGS**

The study found that suicide among members of the South African Police Services (SAPS) is a serious problem in Polokwane. This is confirmed by the SAPS reports that suicide continues to be an alarming problem in this Province (SAPU, 2004). This study has shown that suicide affects many police officers regardless of their age, rank, marital status, sex, or any other social variable.

The second major finding of the present study is that suicide has a devastating emotional impact on surviving colleagues, family members, friends and the society as a whole. As demonstrated by the responses gathered in the study, the sudden and violent nature of police officers' death by suicide often makes colleagues feel abandoned, helpless, and rejected.

It was also illustrated that family member or friends do have the added shock of discovering the body of the suicide victim. More often than not, the deceased's colleagues suffer feelings of shame and guilt, because of the social stigma, or shame, surrounding suicide.

Colleagues also often avoid talking to others about the officer who committed suicide, whilst other colleagues avoid the survivors.

The study showed that suicide survivors struggle to cope with major personal problems. Police suicide causes greater health-related consequences for survivors than expected deaths. After a colleague suicide, some police officers struggle with a sense of guilt, shame and anger.

The study noted that when police suicide occurs, the image of South African Police Services becomes poor, particularly within African black communities, particularly in Limpopo Province. The issue of blame, shame and guilt observed among the police officers showed that they are concerned about the tainted image of their career as a result of suicide of their colleagues.

The study has also shown that police suicide survivors go through the same grieving process as other bereaved people. They have to face the fact that the loss is permanent and eventually they have to recover from grief. Anger and guilt are common bereavement reactions to a suicidal death. Therefore, support groups are essentially helpful for grieving suicide survivors because they think they are still shocked and angry about the death of a colleague.

The causes of police suicide are worth noting. These include, among others, social problems such as depression, posttraumatic stress disorder, alcohol and substance abuse, alleged misconduct, and unfaithfulness. Beyond these factors, the present study further revealed that being a police officer increases the risk of suicide because officers perceive it as a high-risk job and that there is too much stress and

depression, especially among the older police officers falling within the age category of 46-53 years.

### **4.3 CONCLUSION**

Suicide among the SAPS members is not only a personal issue, but also involves family, colleagues and the organisation (i.e., SAPS), the society at large and the government. It impacts directly on the community by contributing towards poor service delivery due to shortage of personnel, and it also impacts directly on the government budget for recruitment. Death of a police officer by suicide is a traumatic and intense event for those left behind. One would conclude that police officers cope with trauma of a colleague suicide through a range of personal, social, and environmental factors in the work place.

Police officers who are severely depressed and hopeless find it difficult to fight with their anguish feelings and as such they “give in” and find suicide as being the best solution to escape from life’s challenges.

### **4.4 RECOMMENDATIONS**

In view of the research findings of this research study, the present researcher recommends the following:

- Support by senior SAPS officials and management is essential. Junior police officials value the support and guidance of their senior management. Therefore, it is in the interest of junior police officials that the issues of professional responsibility and good practice be highlighted and examined in a context that supports rather than threatens officials. For example, the senior SAPS officials and management need to establish a professional and friendly work relationship with junior police officials;

- Suicide audit and routine psychological autopsy are effective approaches that SAPS could develop in terms of risk assessment and intervention in cases of attempted suicide to reduce the risk of a follow-up. This will also assist in uprooting the actual causes of suicide and apply relevant preventative measures through Employee Assistance Services (EAS) personnel;
- SAPS need to raise the level of awareness amongst SAPS members and encourage police officers to use Employee Assistance Services. In addition, supervisors should refer police officers to relevant professionals and monitor the situation to ensure that the referred officer is evaluated and thus receives continued support and counselling; and
- It is imperative that SAPS apply SWOT analysis for units and police officials in order to identify possible strengths, weaknesses, opportunities, and threats regarding their respective units and police officials'. This would assist in contributing towards enabling police officials to deal with identified challenges and make use of their strengths to the optimum level to avoid having suicide ideations.

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## **INTERVIEW SCHEDULE**

### **AN EXPLORATORY STUDY OF THE EFFECTS OF POLICE SUICIDES ON THE WELL-BEING OF THE SOUTH AFRICAN POLICE SERVICES MEMBERS IN LIMPOPO PROVINCE**

#### **INSTRUCTIONS:**

1. Please try to answer the questions as honestly as possible
2. All information will be strictly confidential
3. Most of the questions are to be answered by putting a cross (x) in the relevant box

DATE: ...../...../2005

**A: PERSONAL PARTICULARS**

1. Age.... ..years

2. Rank

Constable	
Inspector	
Captain	
Other	

3. Marital Status

If other, please explain

.....

.....

4. Highest qualification obtained?

Matric	
Diploma	
Degree	
Other	

If other, please explain

.....

.....

5. Why do police officers commit suicide?

.....  
.....  
.....

6. Have you ever thought of how your colleagues would feel if you were to commit suicide?

Yes	No

7. What image does police suicide portray for the South African Police Services (SAPS)?

Good	Bad

Please motivate your answer.

.....  
.....  
.....

8. Have you ever lost a colleague because of suicide?

Yes	No

9. What circumstances could have led/ triggered him/her to commit suicide?

.....  
.....  
.....

10. Explain what kind of a relationship you currently have with your present colleagues since the suicide of your former colleague?

.....  
.....  
.....

11. How do you feel to be a survivor of a colleague who committed suicide?

.....  
.....  
.....

12. As a colleague of a suicidior, did you ever seek assistance or discuss the event with other colleagues?

Yes	No

Please explain:

.....  
.....  
.....

13. Did you struggle to cope with the aftermath of your colleague's suicide?

Yes	No

Please explain:

.....

.....

.....

14. Did you recover from the loss or grief of your colleague?

Yes	No

Please explain:

.....

.....

.....

15. What impact does suicide of a police officer have on surviving colleagues?

.....

.....

.....

16. In your own view/opinion what impact does the death of a suicide police officer have on a society?

.....  
.....  
.....

17. How is the society affected by the suicide death of a police officer?

.....  
.....  
.....

18. What impact does the death of a police officer have on his/her family?

.....  
.....  
.....

19. How does the death of a police officer that committed suicide affect the well-being/ morale of the South African Police Services (SAPS) members?

.....  
.....  
.....

20. Can a police officer determine whether a colleague is suicidal or not?

Yes	No

Motivate your answer:

.....  
.....  
.....

21. A problem particularly associated with suicide bereavement is shame/disgrace?

True	False

Explain why?

.....  
.....  
.....

22. Does shamefulness prevents you from recovering as a colleague of a police officer who committed suicide?

Yes	No

23. Please explain how:

.....  
.....  
.....

24. Have you ever participated in therapy sessions for suicide survivors?

Yes	No

Motivate your answer:

.....  
.....  
.....

25. Do you think there is any area of improvement for post interventions (treatment)?

Yes	No

Motivate your answer:

.....  
.....  
.....

26. What areas of post intervention (treatment) does SAPS have?

.....  
.....  
.....

27. Explain why is it necessary to have Employee Assistance Wellness in SAPS

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28. Traumatized and stressed survivors of police suicide (i.e., police officers) are unwilling to make use of the SAPS Crisis Line.

True	False

Explain:

.....

.....

.....

THANK YOU FOR THE EFFORT AND TIME YOU TOOK TO FILL IN THIS QUESTIONNAIRE. AGAIN, AS MENTIONED BEFORE, THE INFORMATION YOU FURNISHED ABOVE WILL BE TREATED AS CONFIDENTIAL AND ONLY USED FOR THE PURPOSE OF THIS RESEARCH.

Regards,

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Mokgobu, T

Cell: 082 719 1677

Map of the study area  
(Polokwane)