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# Understanding the impact of organisational and operational stressors on the mental health of police officers in Ireland

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## ABSTRACT

The mental health of police officers is a critical yet under-researched area. They face unique operational and organisational stressors, including exposure to violence and trauma, as well as bullying, managerial conflict, and a lack of support in the workplace. This paper explores the multi-faceted challenges impacting police mental health through thematic analysis of an online questionnaire completed by 98 members of An Garda Síochána (Irish police force) in Ireland. We found, *inter alia*, the existence of a culture of bullying and a lack of managerial support within the institution. Furthermore, exposure to traumatic events as part of the policing role was found to have a negative impact on the mental health of most respondents.

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## Introduction

Policing is a unique occupation. It requires officers to provide public protection and engage in crime detection, whilst also working as emergency responders, social workers, victim advocates, witnesses in court, and administrators. Police officers are exposed to social traumas such as poverty, violence, and addiction, and they also deal with potentially life-threatening situations on a near-daily basis (Rooney & McNicholas, 2020). This is by no means an exhaustive list of the type of work police officers do, but it provides a small flavour of the varied nature of police work. Policing is generally regarded as a stressful occupation (Kirschman et al., 2014) which can have adverse mental health consequences (Moreno Fortes et al., 2020).

In the context of policing, occupational stressors are classifiable as operational and organisational (Duran et al., 2018; Oliver et al., 2022; Purba & Demou, 2019; Soomro & Yanos, 2018). Operational stressors are associated with witnessing, or being subjected to traumatic events, witnessing, or experiencing acts of violence, and dealing with sexual offences (Brewin et al., 2022; Miller et al., 2022). Police officers can also be exposed to vicarious trauma, for instance, in cases where they are notifying families of a death, witnessing graphic images, or dealing with distressing emergency calls (Kirschman et al., 2014). Exposure to such trauma is viewed by some as an occupational hazard (Foley et al., 2023), but such exposure can often be accompanied by feelings of intense fear, horror, and helplessness (Sherin & Nemeroff, 2011). Mental health problems are higher when there has been recent exposure to trauma (Biggs et al., 2021; Fallon, 2018; Foley et al., 2023; Stevelink et al., 2020) and police officers with mental health problems, such as PTSD, display

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lower cognitive performance levels across several domains, including executive function, verbal learning, and memory (Bisson Desrochers et al., 2021), which can impact their job performance.

From an organisational perspective, stressors include shift work, long hours, a lack of support from senior managers, excessive workloads, and increased administration (Kirschman et al., 2014; Purba & Demou, 2019). Police officers recognise organisational stressors as being oppressive, unnecessary, unavoidable, and uncontrollable (Purba & Demou, 2019) and research suggests that organisational stress may be more prevalent and may pose a greater threat to the mental health of police officers than operational stressors (Brough, 2004; Galanis et al., 2019). One explanation for increased exposure to organisational stressors is governmental austerity which has resulted in an increase of workload and a reduction of staff numbers (Cartwright & Roach, 2021; Duran et al., 2018; Solar & Smith, 2022). This has had a negative impact on police officer wellbeing (Bullock & Garland, 2018), analysis of which has become increasingly topical for the police, as they seek to respond to the economic pressures of austerity (Hesketh & Cooper, 2014; Solar & Smith, 2022).

Exposure to operational and organisational stressors can lead to the development of mental health problems including Post-Traumatic Stress Disorder (PTSD) and Complex-PTSD (CPTSD) (Brewin et al., 2022; Stevelink et al., 2020), anxiety (Jetelina et al., 2020; Stevelink et al., 2020), burnout, drug, and alcohol addiction (Irizar et al., 2021), self-harming, and even suicide (Hem et al., 2001; McCafferty et al., 1992). Risk factors for depression and suicidal ideation in police officers include exposure to operational and organisational stressors (Syed et al., 2020). The prevalence of PTSD and depression amongst police officers is over twice that of the general population (Kessler et al., 2005; Syed et al., 2020). Such exposure can also result in the development of Emergency Responder Exhaustion Syndrome (D. Edwards & Wilkerson, 2020; Kirschman et al., 2014). This can result in depression, isolation, and exhaustion (Kirschman et al., 2014). Exposure to operational and organisational stressors are a major concern for police officers and the policing organisations as a whole (Richardson & Rothstein, 2008). Both are closely linked with a reduction in organisational commitment, absenteeism, presenteeism (Avey et al., 2009; Cartwright & Roache, 2021; Charman & Bennett, 2022; Darr & Johns, 2008; Stevelink et al., 2020). It can also impact staff retention (Avey et al., 2009; Charman & Bennett, 2022), can contribute to organisational inefficiency (Arnetz, 2006), and reduced job satisfaction (Flanagan & Flanagan, 2002). These factors may impact on police officer ability to protect the public.

Support networks are crucial for mitigating these risk factors and are also linked to lower levels of PTSD and burnout (Foley et al., 2023). These networks include having friends, including friends both inside and outside the police, extended family, and even spiritual communities, that police officers can talk to about their mental health (Kirschman et al., 2014; Papazoglou et al., 2020). Families are sometimes not equipped to provide the necessary support as they may not always be familiar with the unique nature of police work, police culture, and the complexity of police stress and trauma. The stresses associated with policing can harm family dynamics (Papazoglou et al., 2020), and families of police officers, therefore, may also need support.

For those police officers who feel unable to rely on friends or family for support, organisational support from colleagues or superiors may be more beneficial. Police culture may, however, act as a barrier to this (Newell et al., 2022; Papazoglou et al., 2020; Porter & Lee, 2023). Police culture refers to the culture and social norms within police organisations. This can relate to the attitudes, beliefs, and behaviours prevalent among police officers, and how these aspects of their culture can impact their own mental health, as well as their interactions with individuals experiencing mental health issues. Officers may feel pressure to appear strong and resilient, which can deter them from addressing their own mental health concerns for fear of being perceived as weak (Newell et al., 2022). Seeking help may conflict with a police culture focussed on machismo and masculinity, resilience, hardiness, and psychological capital (Bell & Eski, 2016; Crowe et al., 2022; A. M. Edwards & Kotera, 2021; Janssens et al., 2021) and may thus encourage a 'tough it out' mentality, making it challenging for officers to cope with these experiences (A. M. Edwards & Kotera, 2021; Porter & Lee, 2023). Police officers may be wary of being stigmatised and discriminated against within the

organization, especially if there is a lack of support from line management (A. M. Edwards & Kotera, 2021; Newell et al., 2022). They may also have concerns over how it may impact on their career (Porter & Lee, 2023). Not seeking help may exacerbate an existing condition, and police officers who avoid seeking help often later report higher levels of declining mental health (Soomro & Yanos, 2018).

To manage mental health problems, some police officers have been found to engage in maladaptive coping behaviours, such as hazardous or harmful drinking or drug taking (Brough et al., 2016; Lindsay & Shelley, 2009; Ménard & Arter, 2014; Syed et al., 2020). This is reflected in policing across Australia (Davey et al., 2000, 2001), the United States (Ballenger et al., 2011), and the United Kingdom (Irizar et al., 2021) where police officer levels of hazardous drinking is reported at levels similar to or exceeding that of the general population. Police officers with depression, anxiety, or PTSD, are twice as likely to be harmful drinkers (Irizar et al., 2021).

Concerns over the psychological wellbeing of members of An Garda Síochána were raised in 2016, when the organizations Modernisation and Renewal Programme 2016–2021 acknowledged that emphasis was needed on the psychological wellbeing of its staff. Fallon (2018) found that members of An Garda Síochána had concerns over exposure to trauma, increased administration, a lack of support, poor communication from management, unsocial hours, nepotism in the promotion process, and a lack of resources and training. This research will explore the mental health of members of An Garda Síochána. Many police officers struggle to discuss their mental health and organisational pressures while currently in employment. Based upon a review of the literature, the researchers felt that an anonymous online survey would be more likely to elicit discussions regarding operational and organisational stressors.

## Method

Ethical approval was obtained from the ethics committee at the University of the West of England (Bristol). All procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional and national) and with the Helsinki Declaration of 1975, as revised in 2000. Informed consent was obtained from all participants who were included in the study. The data in this paper is part of a larger research project examining the mental health of police officers across the United Kingdom and the Republic of Ireland. This paper focuses on responses from the Republic of Ireland.

This research involved a series of qualitative and quantitative questions examining the mental health of police officers throughout the Republic of Ireland. The study was based on the premise that the mental health police officers was a problematic issue, and that serving members would welcome to opportunity to discuss this.

On 12 September 2023, a call for participants was placed on the social media accounts (i.e., Twitter/X and LinkedIn) of both authors and was subsequently advertised through snowball sampling. The survey remained open until 12 December 2023. Those who were interested in learning more about the research were invited to click on the survey link taking them to an online information sheet which outlined the core objectives of the study. Those who wished to participate provided fully informed consent and were invited to answer a series of questions relating to mental health and policing.

Participants were asked demographic questions regarding age, gender, and length of service in the police. The questions used to inform this qualitative analysis were ‘*can you briefly describe your career in the police?*’ and ‘*how has your job impacted your mental health?*’ To further assess this, participants were asked to rate their mental health prior to joining the police and to rate their current mental health on a 7-point Likert scale (ranging from 1 - *extremely poor* to 7 - *extremely good*).

The authors adopted an inductive approach to this research. This allowed them to identify operational and organisational stressors, and their impact on police officers, at the outset. Inductive

reasoning is open-ended and exploratory, especially at the beginning of the research process, and its use involves the researcher inferring the implication of their findings for the theory that prompted its use (Bryman, 2016; Given, 2008). Qualitative data were analysed through thematic analysis (Braun & Clarke, 2006). This was carried out by both researchers, as coding with another researcher and comparing analytic observations can lead to enriched coding (Braun & Clarke, 2021). The process involved reading through the data for familiarisation. In this phase we independently took notes of our observations and reflections, bearing in mind that each re-reading of the data could reveal new interpretative ideas. Developing themes were identified starting from the notes taken at the outset. Together we formulated sub-themes and agreed upon terminology and meaning.

## Results

98 members of An Garda Síochána (67 male; 31 female) completed the survey. The gender split in our dataset (male: 68%; female: 32%) is representative of that of An Garda Síochána (male: 72%; female: 28%) (An Garda Síochána HR Directorate webpage, 2024). The age of participants ranged from 26–63 ( $M = 43.00$ ,  $SD = 8.41$ ) and the length of service ranged from 2–40 years ( $M = 18.77$ ,  $SD = 8.83$ ). Participants ranged in rank from Garda to Chief Superintendent. Participants were asked to rate their mental health prior to joining An Garda Síochána, as well as rating their current mental health. Participants rated their mental health more positively before joining the police ( $M = 6.07$ ,  $SD = 0.93$ ), compared to how they felt currently ( $M = 4.29$ ,  $SD = 1.85$ ),  $t(93) = 9.01$ ,  $p < .001$ ,  $d_{RM, pooled} = -0.72$ , 95% CI [-1.05–0.40]. This data highlights an overall decline in policing mental health which could be a direct consequence of their work. Specifically, the large effect size implies practical significance.

The inductive approach adopted allowed for the identification of operational and organisational stressors. Thematic analysis of the qualitative data allowed the authors to formulate sub-themes. These are: exposure to trauma and public interactions (operational) and poor management, bullying, a lack of support, and shift work (organisational). We have also included data from some participants were more positive about their mental health in the context of their policing role.

### Operational stressors

Participants, regardless of gender, rank, or length of service, listed various experiences associated with traumatic exposure. These included witnessing murders, being physically assaulted, being assaulted at gunpoint, being shot, attending scenes of suicide, and the murder of colleagues. Vicarious traumatic exposure was also referred to with participants discussing the impact of investigating cases of rape and sexual assault to informing friends that a family member had died. Participants spoke of these events taking a toll on their mental health, with some noting that it was difficult to get certain images out of their heads. Participants described the impact that exposure to such trauma had on their mental health, stating that it had ‘a significant impact’ [Detective Sergeant, Male, 21 years of service], ‘a huge impact’ [Garda, Male, 18 years of service] and that exposure to such incidents ‘took their toll’ [Detective Garda, Male, 15 years of service]. This was also reflected by a female participant who stated ‘There is no doubt that it has taken its toll on me and years of my life that I will never get back’ [Detective Sergeant, Female, 34 years of service].

One participant described in detail the experience of losing a friend and colleague in the line of duty:

I lost a friend and colleague who was murdered on duty. It has impacted my mental health more than anything else in my career, previous to, or post, that awful night. I spoke with him in our office at 4pm and at 12am I am looking at his corpse lying on the road where he was shot multiple times. Very hard to get those images out of my head’. [Detective Garda, Male, 21 years of service]

Several participants cited unrealistic and unreasonable public expectations, as well as excessive public scrutiny, especially through public recording of police actions on camera phones, as impacting on their mental health. It was felt that this added to the stress associated with the job with one participant stating that *‘The burden of the public recording you can be very stressful also. It makes it very stressful’* [Garda, Male, 7 years of service].

Participants felt that the public expectations of the police were unrealistic and unreasonable due to a lack of understanding about police resourcing. One participant felt that dealing with the public and managing their expectations was exhausting, stating that *‘There is little if any consideration by people outside of the policing environment on the stresses normal policing brings . . . People seem less tolerant in general and more demanding . . . Our resources have never been as stretched but our public have such unreasonable expectations. It’s exhausting battling with people who constantly criticise our efforts’* [Sergeant, Male, 17 years of service]. Another participant highlighted the frustration that police felt due to not being able to match public expectations due to a lack of resources. They stated *‘Knowing that the public expect a first world service from an organisation that has for a long time been unable to properly invest in such systems and developmental training is very frustrating’* [Sergeant, Male, 33 years of service].

### Organisational stressors

Participants, again regardless of their gender, rank, or length of service, were very critical of police management. Several participants alleged that they had been bullied by their superiors. This had negatively impacted on their mental health with one participant stating such behaviour to be toxic within the organization.

Management was described as incompetent and lacking any understanding of the intricacies of policing. Interestingly, this was linked by one participant to the promotions process in the organisation, whereby a culture of nepotism and ‘who you know, not what you know’, saw people get *‘promoted beyond their capabilities. They cover up for their incompetence by bullying and mistreating members in their unit’* [Detective Garda, Male, 16 years of service]. Other participants felt that this often resulted in management *‘walking on people to better themselves at all costs’* [Garda, Male, 15 years of service] and saw rank-and-file police officers having to deal with a lot of *‘unnecessary stress from management due to their incompetence and lack of knowledge of front-line policing’* [Garda, Male, 5 years of service].

Participants were also very critical of the perceived lack of support they received from management for issues related to bullying, traumatic exposure, and mental health. When one participant reported their manager for bullying, she received *‘no support from other management despite bringing it to their attention’* [Detective Garda, Female, 17 years of service]. Several participants spoke of the lack of support for dealing with the impact of traumatic exposure, with one participant stating that they received *‘little to no internal or external mental health support, although management will say there is as much as is needed’* [Detective Sergeant, Male, 21 years of service]. One participant stated that *‘management are not supporting Gardai and there is a belief among rank and file that you are on your own in dealing with any incident’* [Detective, Female, 24 years of service].

One participant recalled several incidents which they felt were deliberately ignored by management:

Sexually assaulted by a station prisoner and job ignored it, broken finger in an assault and job ignored it, assaulted in 2020 on the street in a public order incident and my superintendent told me I fell over my own feet . . . Have suffered nerve damage and muscle damage in my throat from this assault and job are saying nothing wrong with me, have had to go on anti-anxiety tablets since and I have not returned to work as no support given to me to do so. [Sergeant, Female, 22 years of service]

This lack of support was also reflected in the administrative side of the policing role. Participants were critical of the volume of administration that they were expected to undertake. This, as well as



the difficulties with meeting deadlines due to time constraints, negatively impacted their mental health. This impact was reflected regardless of gender, rank, or length of service. Many participants reported feeling stressed over paperwork, court cases, dealing with victims and injured parties, and dealing with suspects. One participant claimed that *'Administrative duties (paperwork) are becoming an overwhelming aspect'* and that police officers are *'drowning in paperwork'* [Garda Sergeant, Male, 33 years of service]. Management was again highlighted as a problem, with one participant stating that there are *'Not enough hours in the day to complete tasks for management causing stress'* [Garda, Female, 15 years of service] while another stated that stress was exacerbated by *'bureaucracy and unnecessary paperwork from pencil-pushers'* [Detective Garda, Male, 31 years of service].

Feedback from management was also perceived negatively by participants. Several claimed that due to poor management skills, feedback was generally critical and was focussed on negative performance, rather than the positive actions that may have been undertaken. One participant stated that there is *'A lot of negative feedback common place from management "why did you do x, y/z" "you're not doing this right/that right"'* [Garda, Female 20 years of service]. Several participants discussed the existence of a blame culture within the organisation.

Participants found that shift work negatively impacted their mental health as they were unable to establish a regular routine or a regular sleeping pattern. This resulted in several participants feeling increasingly anxious in and outside of work. One participant stated that their sleep patterns *'are all over the place'* and this had resulted in their anxiety levels being *'through the roof'* [Garda, Female, 5 years of service]. Family life suffered and relationships broke down as a result, especially where there were two serving members of the force in a relationship. Feedback in this area was more forthcoming from female participants. One participant stated: *'Shiftwork and work/family balance is so hard to maintain. Also struggling financially. My husband and I share the child minding, so we work opposite shifts, this hasn't helped our marriage.'* [Detective Garda, Female, 17 years of service].

### **Positive reflections**

Not all participants spoke negatively about their mental health. Several felt that despite witnessing and experiencing traumatic events, their mental health was not impacted upon. One participant noted that despite *'coming across many nasty scenes . . . I don't feel that they have impacted greatly on my mental health.'* [Garda, Male, 25 years of service] One explanation for why some participants felt more positively about their mental health could be due to their developing the necessary skills to deal effectively with trauma. Another stated *'I have developed skills to deal with my job over the years. These include talking about traumatic calls, having an open-door policy which actively encourages conversation about traumatic events that your colleagues have dealt with'* [Detective Sergeant, Female, 21 years of service]. Whilst this comment seems to reject traditional notions of police culture relative to openness about mental health, the following comment seems to reinforce those traditional cultural values:

I believe my job has hardened my resilience to stressors and traumatic events. I also believe that I have learned to shut such things out as much as possible to enable to continue doing my job . . . I have adapted to concentrating on how to deal with the outcomes as best I can by retaining a professional approach to performing my duty. [Sergeant, Male, 33 years of service]

### **The impact of operational and organisational stressors**

Thematic analysis of the data revealed that exposure to operational and organisational stressors had an overwhelmingly negative impact on the mental health of participants. Participants suffered from PTSD, CPTSD, stress, anxiety, depression, and panic attacks. This resulted in many participants taking time off from work, while others engaged with counselling services to help try to cope with their experiences. The current state of mental health in An Garda Síochána was eloquently

described by one participant as being *'literally on the floor. People may not talk about it, but it's shocking. We are burned out, stressed, anxious and worried each and every day. There is no escaping from it even on the days off. It's truly relentless'* [Garda, Female, 9 years of service]. One participant revealed that the impact of their experiences had changed them as a person, as they began to suffer from low moods and became more irritable. This participant also questioned their sense of identity, stating *'I sometimes wonder who I would be if I hadn't joined the police'* [Detective Garda, Male, 16 years of service]. Another participant similarly stated *"Sometimes I asked myself why did I bother joining in the first place and why continue such a job"* [Garda, Female, 2 years of service]. This negative sense of professional identity was expressed by junior and experienced Gardai.

Several participants cited the emergence of a blame culture within the organisation *'which can be detrimental to members mental health & creates a culture of fear and anxiety'* [Garda, Male, 15 years of service]. Another elaborated on this stating that *'There is currently a huge blame culture even where members are acting in good faith. Genuine good faith acts used to be supported and the feeling generally is the less work you do, the less trouble you get into, and this is feeding down through the services'* [Detective Sergeant, Female, 15 years of service].

Exposure to operational and organisational stressors has also contributed to a decline in police morale, with many participants stating that this is at an all-time low in An Garda Síochána. As with mental health, when describing current levels of police morale, several participants used the phrase 'on the floor'. One participant noted that this was due to a culture of *'not listening to the members of the force'* [Garda, Female, 16 years of service] while another stated *'Morale is as low as it can get. Staff are leaving in their droves. They don't feel valued. They are overworked. There are not enough officers. Everyone is exhausted'* [Sergeant, Male, 18 years of service].

## Discussion

The objective of this paper was to understand the impact of occupational stressors on the mental health of members of An Garda Síochána. It is worth noting that analysis of the Likert Scale found that participants ranked their mental health more positively before joining An Garda Síochána. From the qualitative responses we identified operational stressors such as exposure to trauma and public expectations, and organisational stressors such as bullying and a lack of support from management and excessive workload, as well as the negative impacts of shift work. These factors contributed to poor mental health and declining morale in the organisation. We found that there was consensus on these issues from participants regardless of gender, rank, or length of service. The findings in this paper are consistent with other studies which have examined the relationship between policing and mental health, where research has found that exposure to trauma, excessive workload, bullying, and a lack of support from management all adversely impact the mental health of police officers (Biggs et al., 2021; Bisson Desrochers et al., 2021; Foley et al., 2023; Soomro & Yanos, 2018; Van der Velden et al., 2013). Given that previous studies have identified many of these issues in An Garda Síochána (Fallon, 2018; PWC, 2018), our findings suggest that these are endemic rather than one off concerns.

In the context of operational factors, such as witnessing and experiencing traumatic events, policing is an occupation which is closely associated with both primary and secondary trauma on an almost daily basis (Brewin et al., 2022; Kirschman et al., 2014; Miller et al., 2022). Several participants in this research discussed the trauma associated with losing a colleague in the line of duty. This can be one of the most psychologically destabilizing experiences for police officers (Henry, 2004; Kirschman et al., 2014; Rooney & McNicholas, 2020). Fortunately, death in the line of duty in Ireland is somewhat rare, with 16 such deaths taking place since 2000. This does not, however, in any negate the impact that this can have on other police officers and anyone whose mental health suffers from such traumatic exposure while doing their job should be provided with the appropriate support from their employers.



Unreasonable public expectations, due perhaps to a lack of public understanding or awareness about police resourcing, was also highlighted as having an impact on the mental wellbeing of participants. There has been a downward trend in levels of public satisfaction with An Garda Síochána in recent years, although trust levels in the organisation remain high (Copeland & Walker, 2022; Hamilton & Black, 2023). During the COVID-19 pandemic media reports suggested that they met with varying levels of resistance from the public when enforcing restrictions on movement, including being threatened and being spat and coughed at by members of the public. Falling levels of public satisfaction may be due to a decade of governmental austerity which has seen police resources severely stretched. Policing is not the only area of the public sector that has been subject to retrenchment as austerity has also impacted areas such as social work, community provision and mental health services (Cummins, 2023). It has been the police that have effectively picked up the slack in many of these areas, operating as Punch (1979) described as 'a secret social service'. It may be the case that the public have gotten used to the police operating in a non-police role and this has created an expectation that this should continue. When this expectation is not met, some people may react negatively. The impact that public expectations have on police wellbeing should be further investigated.

Participants were highly critical of management within An Garda Síochána. They alleged that a culture of bullying existed within the organisation and that managers often lacked the skills and competence necessary to do their jobs. Even when such behaviour was reported, there was a lack of support provided. This should not be surprising given An Garda Síochána's chequered history with whistle-blowers (Transparency International, 2013) and there is a perceived lack of support available for Gardai who do speak up (PWC, 2018). Participants also claimed that the promotions system was based on nepotism rather than being a meritocracy, reinforcing findings from previous studies (Fallon, 2018; PWC, 2018). This culture resulted in those who are unsuitable for management roles ending up in these positions, and this has fed into a blame culture within the organisation whereby those managers bully their colleagues to deflect from their own inadequacies. These cultures of nepotism, bullying and blame could, therefore, be considered as reinforcing each other.

Participants highlighted the impact of shift work on their mental health and on their work-life balance. Shift work is associated with considerable impacts on sleep, depressed mood and anxiety, substance use, impairments in cognition, lower quality of life, and even suicidal ideation (Brown et al., 2020). From a policing perspective, irregular schedules, long shifts, mandatory overtime, and a lack of sleep, have been found to be associated with increased risk of overall burnout (Foley & Massey, 2021). A poor work-life balance can have a detrimental effect on both productivity and on family life (Gornick & Meyers, 2003). This is an especially pertinent issue for police officers who may also have childcare responsibilities. At least two participants in this research were married to other members of An Garda Síochána and this has been shown to hinder how families organize their households and their childcare (O'Hara, 2009).

It is important to note that there were several participants who felt that their mental health had not suffered as a result of their role within An Garda Síochána. Some felt that their role within the organisation had made them more mentally resilient, while others felt that they were able to mentally cope with the demands of the job. Some felt that being able to talk about their experiences was of positive benefit. This is important as a police culture which encourages machismo and values masculinity often rejects such positive prosocial behaviours (Brough et al., 2016; McCarty et al., 2007), and can result in police officers suppressing emotions and using more negative coping mechanisms, such as excessive alcohol and drug use (Irizar et al., 2021; Syed et al., 2020).

## Conclusion

This paper has demonstrated the impact of organisational and operational stressors on the mental health of police officers in Ireland. Analysis of the data found that the operational stressors which impacted on the mental health of participants was exposure to trauma and public expectations.

From an organisational perspective the analysis found that issues relating to management, such as bullying, a lack of support and excessive workload all contributed to poor mental health outcomes. Many of these themes emerged in previous research into mental health in An Garda Síochána (Fallon, 2018; PWC, 2018). Fallon (2018) stated that for the rank-and-file members of An Garda Síochána, the institutions represented ‘a cauldron for adversity in relation to trauma and wellbeing’ (37). The findings in this paper suggest that this remains the case.

## Disclosure statement

No potential conflict of interest was reported by the author(s).

## Notes on contributors

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