

Drawing a line: Boundary work in victim support police work

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Drawing a line: Boundary work in victim support police work

Victim support entails one of the most intense stress- and trauma-laden interactions faced by law enforcement professionals, and this function or role frequently triggers long lasting negative effects on officers' psychological health and wellbeing. As police officers interact daily with victims, but also with other officers, social services, and institutions, the limits between tasks and needs may directly affect how they manage stress, trauma, and notions of individual and organisational responsibility. As such, boundary work may be a useful framework to understand and even improve how victim support police officers interact with other individuals and organisations. Drawing from a ground-breaking qualitative, in-depth research with police officers that provide support to victims of gender-based and domestic violence, this paper analyses conscious and unconscious boundaries as key elements in the officers' wellbeing. Informed by the empirical findings of a case study of Catalonia's Mossos d'Esquadra police corps, this paper explores how victim support officers negotiate their individual and organisational boundaries as they interact with other agents and institutions, and how these negotiations affect them. This paper argues for the relevance of an officer's agency and discretion for distinguishing between conscious and unconscious boundaries, as their limits may be blurred throughout the wide range of interactions.

Keywords: victim support; burnout; compassion fatigue; boundary work

Introduction

Policing is a profession that has been frequently studied as an occupation prone to stress-, burnout-, and compassion fatigue. The nature of policing and the characteristics inherent to police forces as organisational settings have been analysed as factors that make police officers more likely to suffer from job-related mental health difficulties and issues (Burke & Deszca, 1986; McCarty et al., 2019; Rojas Solís et al., 2021; Schaible & Six, 2016). Victim support is one of the most intensely stress- and trauma-laden interactions that police officers have with other individuals, in this case victims (Losung

et al, 2021; Schaible & Gecas, 2010). This form of policing may seem rather innocuous as compared to high-stakes patrolling, but it may trigger long lasting negative effects on a police officer's psychological wellbeing (Foley & Massey, 2021; Navarrete et al., 2022).

This specific occupation, victim support police work, must be understood within a wider frame of user-professional interactions, such as those of victim support, essential workers or health and safety professionals. Regarding the specific context of the COVID-19 pandemic, police officers have faced threats and challenges with relevant consequences regarding mental and physical wellbeing of those workers deemed essential, and particularly those who interacted with patients, victims, and other types of users (Li et al., 2021; Rojas Solís et al., 2021). This context aggravates the long-standing effects and consequences of austerity measures for health, emergencies, and safety professionals in Spain and other Southern European countries (Heras-Mosteiro et al., 2016).

Burnout and compassion fatigue are occupational and pandemic-related mental health issues that have come to the forefront of the study of policing and of officers' needs and experiences (De Camargo, 2022; Frenkel et al., 2021). Victim support officers experience specific needs and challenges linked to their unique and close interactions with victims and their traumatic experiences, but also with other public administrations and police officers. Therefore, victim support police professionals perform their tasks amidst a wide range of key factors within and outside their police corps, including interactions with victims and other social actors (Losung et al., 2021; Schaible & Gecas, 2010). This victim-officer interplay also involves expectations about where social services begin and policing ends, and about risk and urgency assessments (Hoyle, 2000; Wilson & Segrave, 2011; Winkel et al., 2004). For the police officers

who provide victim support, their professional and personal senses of self, as well as the limits of the boundaries they define with other professionals and with victims, play a defining role with potential long-lasting effects on their health and wellbeing.

The use of boundaries as conscious strategies or mediation against stress- and trauma-related occupational hazards has been analysed both within and outside the COVID-19 pandemic context, particularly from the conceptual perspective of ‘boundary work’ (Rapp et al., 2021). This type of conscious and adaptive use of distances, as evidenced by victim-professional or work-leisure boundaries, contrasts with the unwilling and unconscious role of boundaries as effects of burnout and compassion fatigue. As such, related yet distinct roles may be played by boundaries within professional settings in which police officers interact with victims and their needs and expectations. This article aims to explore how victim support police officers speak of their engagement with victims and the police force and how they frame their boundary work strategies. Drawing from qualitative, in-depth research within the regional police force of Catalonia, the Mossos d’Esquadra (henceforth, the PG-ME), the article builds upon the study of occupational stress- and trauma-related hazards, namely burnout and compassion fatigue, to analyse the role of conscious and unconscious boundaries. The paper analyses different understandings of boundary work and its relation to burnout and secondary trauma or compassion fatigue. This article aims to contribute to the growing literature on police resilience, or the officers’ ability to cope with stress- and trauma-related occupational hazards and strains. Drawing from key research on police burnout and trauma-linked health issues (see Bhowmick & Mulla, 2021; Burke & Deszca, 1986; Foley & Massey, 2021; McCarty & Skogan, 2013; Ogińska-Bulik & Juczyński, 2021), this paper argues that boundary work may play an ambiguous key role. On the one hand, it may be unconsciously deployed because of

burnout or trauma; on the other hand, it may be consciously used to manage or avoid trauma or stress, and as such function as a resilience-building strategy.

Boundary work within burnout and compassion fatigue

Police work is a professional activity fraught with stress- and trauma-prone tasks and interactions that may negatively affect officers' wellbeing and health. The promotion of police resilience from the perspective of their tasks and work environments responds to the fact that 'it is not possible to remove trauma from police work' (Foley & Massey, 2021: 308). Both the police work itself and how police organisations work may have a relevant role in the officers' wellbeing, and as such their mediating role regarding health and wellbeing are key for the promotion of police resilience (Andersen et al., 2015; McCraty & Atkinson, 2012). Resilience of police officers and organisations will be analysed first from the point of view of resilience as a psychological and organisational concept. This review will be complemented with that of the two main psychological effects studied by the research that informs this paper: burnout, as excessive occupational stress, and compassion fatigue, as excessive occupational secondary trauma. Finally, boundary work will be explained and reviewed as a conceptual and practical perspective that may counter the aforementioned negative effects.

Police resilience and police work ecology

Resilience, as a psychological concept, is commonly conceptualised as a reactive capacity, or as a form of post-traumatic response or ability to bounce back from negative experiences (Liu & Boyatzis, 2021; Maitlis, 2020). This concept, resilience, has evolved from links to the natural sciences, with a significant conceptual expansion

towards the social sciences (Schwarz, 2018). The American Psychological Association's definition, based on psychological practice, includes both adversity and response to it: resilience may be understood as the capacity to bounce back after negative experiences, or as 'the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress' (APA, 2012). Similarly, resilience may be understood as the 'ability to bounce back from the ravages of chronic stress and moving to a state of renewal, thriving and flourishing' (Liu & Boyatzis, 2021), recovery after workload excess and/or trauma (Méndez-Fernández et al., 2021), post-traumatic evolution and growth (Maitlis, 2020), an 'individuals' ability to adapt to significant adversities while maintaining good mental and physical wellbeing' (Wadi et al., 2020), or the ability to face trauma and/or adversity (Janssens et al., 2021).

Resilience is thus composed of both a negative experience and a learning or recovery process that draws from the negative experience, in our case of an occupational nature. As such, police resilience may be understood as the officers' and/or police organisations' ability to endure adversity and trauma, to understand or reduce their effects, and even to grow or learn from them. Both individual and collective or organisational resilience may be seen from two simultaneous perspectives, that of a personality trait, or 'ego resilience', and that of a trainable skill, or 'state resilience' (Liu & Boyatzis, 2021).

Its recent study has highlighted the multifaceted and dynamic nature of resilience, as it is no longer understood merely as a stable or basic personality-based trait, but also as a process or outcome that links it to organisational and collective efforts, as well as to training and personal adaptation (Domínguez Ruiz et al, 2022; Wadi et al, 2020). It is the dimension of resilience as a trainable skill, or 'state resilience', that allows us to argue for the organisational or collective responsibility for

resilience. Rather than interpreting it from an exclusively individual perspective, resilience can—and should—be understood as a collective or organisational effort ranging from individual responses to obstacles and hindrances, but also as a training or adaptation process that involves the management and procedures of the organisation. It is under this light that resilience can be considered the goal and the outcome of a conscious and explicit ‘social ecology of police work environments’, in which individual, organisational, and social factors intertwine (Ghazinour & Rostami, 2021).

Burnout and compassion fatigue

Burnout studies can be traced back to the 1970s, with the analysis of excessive job-related stress among health, education, and social services workers by Herbert Freudenberger (1974). Contemporary understandings and usages of this concept perceive it as a combination of three key dimensions: emotional exhaustion, detachment or cynicism, and a feeling of inefficacy (Maslach & Leiter, 2016; Rapp et al., 2021). Recent conceptualisations of burnout have focused on ‘a critical mental health problem that leads employees to experience emotional exhaustion, anxiety, and unproductiveness’ (Aldossari & Chaudri, 2021). From the perspective of job-related hazards, it is ‘a work-related syndrome, consisting of emotional exhaustion, depersonalization, and a decreased sense of personal accomplishment’ (De Simone et al., 2021) produced by chronic psychological stress and the interplay between the autonomic nervous system and endocrine and immune processes (Bayes et al., 2021).

Current studies of the consequences and effects of burnout include physical and emotional exhaustion, irritability, low self-esteem, fatigue, pessimism, low or reduced productivity, a negative attitude towards other people, and a greater likelihood to experience anxiety, depression, cardiovascular conditions, type 2 diabetes, as well as premature death (Aldossari & Chaudri, 2021; Bakker & de Vries, 2021; De Simone et

al., 2021; Foley & Massey, 2021). We share Leiter and Maslach's (2005) notion that the six central environmental factors are a) the workload; b) the influence, autonomy, and control perceived by the professional; c) rewards, including economic, social, and symbolic; d) interpersonal relations within the work environment; e) the procedural justice or impartiality perceived in the organisation's decisions and relations, and f) the motivation and values ascribed to the job or organisation.

Compassion fatigue has been analysed predominantly among emergency and healthcare professionals, as well as among other essential workers. Xie et al. define it as 'emotional, physical and psychological exhaustion due to chronic work-related stress exposure among healthcare providers' (2021, p. 2), whereas Edwards and Goussios understand it as 'a condition characterised by the gradual erosion of compassion over time that culminates with empathic disengagement' (2021, p. 247). It may be seen as a form of cost of caring, or as the emotional price for the reaction to stress and for the exhaustion of a professional who helps traumatised people, making healthcare and social service professionals particularly affected (Figley, 1995; Pérez-García et al., 2021). Interactions are the most relevant element, such as those between a victim and a police officer. According to Foley and Massey, compassion fatigue can be easily distinguished from burnout as its 'physical, mental, and emotional exhaustion as well as feelings of hopelessness and dissociation' relate to the empathetic effort, whereas its main four factors are 'poor self-care, previous trauma, lack of satisfaction within the workplace and lack of control in the workplace' (2021, p. 302). Whereas time and accumulation are necessary conditions for burnout, compassion fatigue does not require these conditions, as it is linked to the empathetic effort rather than to an accumulation of negative experiences.

Beyond the physical and emotional exhaustion, the most frequently studied effects of compassion fatigue include exhaustion, anxiety, feelings of inefficacy and disconnectedness, a reduced productivity, job dissatisfaction, lack or reduction of work-personal boundaries, and even the willingness to quit the job (Carlson-Johnson et al., 2020; Edwards & Goussios, 2021; Eng et al., 2021; Pérez-García et al., 2021; Voth Schrag et al., 2021). Individual, interpersonal, and organisational factors may play a mediating role such as that of the factors identified by Figley (2002) as key elements of compassion fatigue. These include empathy as both an ability and a conscious response, exposition to trauma, compassion-led stress, job satisfaction, boundaries with the needs and tasks at hand, repeated exposition, remembering the trauma, and changes in the professional's personal or professional life.

Boundary work and the role of limits and distances

Boundary work can be understood as the conscious or explicit use of boundaries or distinctions between individuals, organisations, stances, or practices (Zietsma & Lawrence, 2010). Boundaries act as cognitive and practice-related distinctions between fields or agents, including institutions and organisations whose distinctions may play a role in value-producing processes and interactions, such as those between customers and companies (Jefferies et al, 2019). Individual interactions, drawing from ethnomethodology, have been the focus of boundary work (see Hallett & Ventresca, 2006), but also organisational boundaries between institutions and companies (Bishop & Waring, 2016).

How specific professional backgrounds affect notions of boundaries, tasks, and needs has been the focus of research particularly within hospital or healthcare settings (see Apesoa-Varano, 2013; Chreim et al, 2013; Kilpatrick et al., 2012). Public

institutions, including the judiciary and police forces, have also been the field or setting of boundary work-related research, including the promotion of organisational resilience (Quick & Feldman, 2014), the negotiation of boundaries within and between police units (Giacomantonio, 2014), inter-organisational collaborations for crime investigation and with judicial authorities (Bjelland & Vestby, 2017; Machado & Granja, 2019), or relationships with organised or individual civilians (Beek, 2012; Lippert & Walby, 2017).

As for the role of boundaries in individual health and wellbeing, most research has focused on the effects of borders such as those between the professional and personal spheres of an individual's life (see Kreiner et al., 2009). The different conscious or unconscious ways an individual negotiates these boundaries, or those between different fields or tasks, allows us to argue for the relevance of boundary work as a framework to study occupational health issues. On the one hand, we may consider the conscious barriers erected by professionals to protect themselves from excessive trauma. On the other hand, we may also consider the unconscious barriers, or detachment, which may be a consequence of previous stress and trauma, and which may limit an officer's ability to deal with victims.

Drawing from Rapp et al. (2021), we understand that boundary work may allow us not only to understand but also to remedy job-related burnout and other issues such as compassion fatigue. Their 'grounded model of boundary work as a buffer to burnout' refers to a series of tactics that allow workers to better process occupational shocks or demands, as they interact with the workers' resources to cope with these shocks and demands. Broadly speaking, *boundary work tactics* may be understood as 'effortful attempts to increase or decrease the distance (or boundary) between self (and/or home domain) and work' (ibid., p. 1173). Rapp et al. consider both 'segmentation tactics',

where professionals distance themselves from work, and ‘integration tactics’, where they reduce the distance between themselves or their home spheres and work.

The fact that Rapp et al. also include tactics that decrease the distance between the personal and professional spheres allows us to take into consideration the active empathy and the personalisation of tasks that we may expect from victim support. Both tactics may thus be identified in the work of police officers who engage with victims, as conscious strategies to reduce the strain caused by occupational stress and trauma, or to maximise their ability to cope with job-related demands. Boundary work may thus be considered from the perspective of individual agency as officers negotiate their personal and occupational borders or identities when interacting with other individuals or organisations.

A single caveat must be highlighted regarding this framework: as we have already seen, burnout and compassion fatigue may affect a worker’s ability to face their occupational tasks and demands. Among the potential effects of these issues, we may find cynicism and irritability for burnout (Foley & Massey, 2021) and detachment or disengagement for compassion fatigue (Edwards & Goussios, 2021). Therefore, workers affected by these two health issues may set unconscious boundaries within or between personal and professional spheres, including how they interact with victims and other individuals. The fact that both burnout and compassion fatigue may also lead to difficulties in separating personal and professional life makes the role of boundaries a blurry and complex one. Consequently, we may see boundaries having a positive role or effect for officers when consciously deploying them in order to protect themselves, whereas a negative role would entail an unconscious limitation for their tasks and occupation.

Methodology and research setting

A qualitative in-depth study was designed and conducted within the regional police force of Catalonia (Spain), with a geographically representative sample of officers who work with victims of gender-based and domestic violence. The *Policia de la Generalitat-Mossos d'Esquadra* (PG-ME) is the regional police force of Catalonia, an Autonomous Community or self-governing region within Spain. Despite its early XVIII century origins, the PG-ME became an integral police force in Catalonia in 1983, after the devolvement of responsibilities to regional governments in Spain (Mossos d'Esquadra, n.d. a). The PG-ME replaced most roles of the Spain-wide Civil Guard and National Police, with a combination of responsibilities including public order and safety, administrative and judicial policing, criminal investigation, rural policing, and victim support. Their prerogatives lie under the Spanish Penal Code (Código Penal) and Penal Procedural Law (Ley de Enjuiciamiento Criminal), as well as Catalonia-specific administrative laws. The PG-ME has as of 2021 17,360 officers according to the corps' open database, distributed between eight ranks and nine police regions that encompass Catalonia (Mossos d'Esquadra n.d. b).

Within this organisational setting, the research analysed the various occupational strains and psychological issues experienced by victim support officers, and particularly those who interact with victims of gender-based and domestic violence. The choice of these forms of violence and victims drew from convenience and access: due to a public contract with funding from the Spanish Ministry for Equality, we had unprecedented access to a police force, as well as an easier path for the ethical clearance of the participants by their superiors. The PG-ME assessed and vetoed the suitability of the participants to the research, and vice versa, as their personal circumstances were considered. The sensitive nature of police work required full anonymity, which involved

not only personal but also organisational details, so that participant officers could not be identified via their workplace details.

The public funding required the focus on support for victims of gender-based and domestic violence victims and, as such, the research team adapted the conceptual framework to the experiences of these officers. The research included three distinct functional units within the PG-ME, each with different interactions with victims: the public security units (USC, or *Unitats de Seguretat Ciutadana*), the citizen assistance offices (OAC, or *Oficines d'Atenció al Ciutadà*), and the victim support groups (GAV, or *Grups d'Atenció a la Victima*). Although the three units formally belong to the USC, their roles and tasks vary greatly: USC officers respond to emergency calls and patrol the streets, OAC officers remain at police stations and receive the formal reports by the victims, and GAV officers provide specialised support to victims of gender-based, domestic, or hate crime violence and other particularly sensitive cases in terms of the needs and vulnerability of the victims.

In addition to the functional diversity of police force, the research considered the wide range of geographical settings in which the PG-ME operates. The police force divides Catalonia into nine geographical police regions with relevant differences in terms of demographics, human resources, and the type of work performed. Ranging from the sparsely populated Pyrenees to the dense metropolitan area of Barcelona, the nine police regions (RP or *regions policials*) are the main geographical units within the PG-ME. Each region is divided into basic police areas (ABP, or *àrees bàsiques policials*), and these areas are further organised into police stations. To build a sample, we compared the workload of the police regions in 2020 in terms of gender-based and domestic violence cases and divided the nine regions into three groups based on their caseload. After this distinction, we selected one police region from each group.

The qualitative research was designed as a two-phase research that aimed to maximise the exploratory potential of in-depth interviews, on the one hand, and the confirmatory and contrastive character of focus groups, on the other (Lambert & Loiselle, 2008; Michel, 1999). The sampling followed a convenience strategy, as agents volunteered to their superiors in each of the three participant police regions. We depended on the superiors' and the regional headquarters' availability for the interviews and focus groups, as well as on the schedules of the individual agents. Both phases relied on semi-structured interview- and focus group guides, focused on the officers' experiences and everyday tasks, their health, their interactions with victims, their exchanges and relationships with other officers, and their perception of the PG-ME's social image. These topics drew from concepts and themes identified throughout the literature review; however, the exploratory, individual interviews allowed us to identify additional topics for the focus groups. Eleven in-depth individual interviews were conducted with two USC agents, two OAC officers, and seven GAV officers. A second phase of focus groups involved twenty-six officers with groups ranging from three to seven participants. Most officers were women, with more than three years of experience in the force. A vast majority of them had worked in different police stations, whereas only a minority could compare different police regions. Their previous training and experience backgrounds also differed: almost a third had formal training in psychology, therapy, or similar care-based disciplines, whereas a similar percentage had volunteered or collaborated with NGOs.

The interviews took place in regional or local police headquarters, and repeated visits to them ensured a wide range of participants and no common participant in the individual interviews and the focus groups. All interviews and focus groups were fully transcribed, and we conducted a thematic analysis based on the aforementioned

theoretical framework of resilience, burnout, and compassion fatigue. However, the exploratory nature of individual interviews expanded our initial set of topics and approaches, and as such the thematic analysis benefited from a partial in vivo approach to codes. Drawing from this thematic analysis, our research focused on key aspects of the data, such as potential strategies for the PG-ME, the role of the officers' agency, and, as in this article, the role of boundaries and boundary work.

Boundaries in victim support police work

Drawing from the boundary work framework, we must first distinguish between *segmentation* and *integration* tactics or, characterised more succinctly, *distancing oneself* or *getting closer*. Besides the direction of the strategy, when considering explicit boundary work, we must also distinguish between conscious and unconscious boundaries and distances. As we have already seen, both burnout and compassion fatigue, as occupational stress- and trauma-related health issues, may involve unwilling distancing. Workers may find themselves more cynical or detached from their job, responding badly to users or victims, or being unable to adequately separate their personal and professional lives. Similarly, we have seen that particularly for compassion fatigue, exposition and empathy act as key mediators and even direct factors for an excess of trauma. As such, a lack of boundaries, or a willing or unwilling *integration* approach, may facilitate a negative health outcome.

Consequently, we must establish a key distinction to analyse participants' experiences and expectations when engaging in victim support police work. Due to the central role of victims in the work of USC, GAV, and OAC agents from the PG-ME, we focus on the boundaries established between officers and victims, but they may act as a proxy for work-home or work-leisure boundaries. The key distinction we use focuses on

the conscious or unconscious use of boundary work, including both integration and segmentation techniques and tactics. It could be considered that conscious boundaries are more frequently favourable, as they are consciously deployed, whereas unconscious boundaries could be expected to be more frequently unfavourable. However, the consideration of both *integration* and *segmentation* boundaries further complicates this view: for instance, unconscious integration moves may make professionals more likely to empathise with victims and to provide a better support, and as such, this may be seen as a positive process.

Related to the blurred nature of boundary work, or to the purely analytical distinction between integration and segmentation and conscious and unconscious tactics, is that of stress- and trauma-related occupational hazards. Common factors and consequences of both burnout and compassion fatigue make a clear-cut distinction between both phenomena a difficult endeavour. Victim support police work, as experienced by PG-ME professionals, entails both excessive stress and secondary trauma, due to organisational and job-related factors. Only in specific instances did participants clearly distinguish between either stress or secondary trauma as the single cause for their occupational experience. As such, throughout our analysis we focused on the joint experience of excessive stress and secondary trauma as was experienced by participants.

Unconscious boundaries

The unconscious nature of these boundaries could make their identification difficult, but throughout the interviews and focus groups we did identify instances in which the officers acknowledged experiencing unwilling consequences of their occupational burnout or compassion fatigue. It is particularly due to the comparison between ‘good’

and ‘bad’ days, or between easier or more difficult interactions with victims and other individuals that we may analyse and distinguish these effects. For instance, when discussing the effects of excessive stress and the clear need of a vacation or of a break, a GAV officer claimed that besides the physical or mental exhaustion they can ‘respond badly [to the victim], you may have an intervention with people in which you may... end up grumpy when it’s not the time’ (IRP1_3).¹ This officer lived and worked in RP1, a police region from the first group according to their gender-based and domestic violence caseload in 2020. As such, it is the police region with the lowest number of cases and with the sparsest population among in the regions in the sample. The officers working in this region highlighted the differences with the rest of the PG-ME territorial organisation, as they acknowledged experiencing a greater quality of life and a wider range of police work, regarding the variety of tasks and experiences. As compared to a desk job in densely populated Barcelona, or to a police officer doing the same tasks every day, these officers explained how their mostly rural environment required them to combine daily tasks involving traffic, detentions, mediation, case management, patrolling, and so on (IRP1_2). However, an additional specificity of RP1 as compared to RP2 and RP3 is directly linked to the role of boundaries: a greater difficulty separating personal and professional life. All RP1 officers explained the ‘little town’ character or nature of their towns and cities, in which they are more easily engaged and stopped outside of work, such as when they are grocery shopping or taking a walk. For instance, an officer explained how whenever they go to the fishmonger ‘I go for a one-

¹ Drawing from our data management plans, interviews and focus groups are coded consecutively based on the police region. For instance, ‘IRP1_3’ refers to the third interview in the RP1 region, whereas ‘FGRP3_1’ refers to the first focus group in the RP3 region.

minute chore and I stay for at least fifteen minutes because... as I walk the supermarket's aisle people keep on stopping me' (IRP1_1).

As such, the social environment can be a key factor in which exposure to victims and to their cases may be heightened or more frequent, sometimes entering an officer's personal life. The specificity highlighted by RP1 officers, however, should not be seen as something unique to this police region, but rather as a consequence of significant factors that vary along the demographic and geographical characteristics of all police regions. RP1 and RP3 could be seen as opposite sides of a demographical and geographical continuum that contrasts rurality and close-knit community relations, on the one hand, with dense cities and anonymity, on the other. Despite this image, the territorial distribution of the PG-ME and its capillarity as a police force organised in police regions, basic police areas, and police stations, makes us argue that police officers may in fact encounter acquaintances while working in all nine police regions, to varying degrees. The interviews and focus groups in RP2 and RP3 confirm that all police officers easily experience blurred boundaries between their personal and private lives, particularly in smaller cities or with specific victims. For instance, an officer in the densely populated RP3 police region explained during a focus group how

I've been working in the corps since 2003 and it happened to me once with a woman, of about... With an adopted son, it was a case of brutal psychological violence from the son towards the mother. And we kept in touch, so much that she got to know my sons and my husband, that she calls me because of my sons' birthdays, that I visit her... An elderly woman. (FGRP3_1)

These fuzzy boundaries led us to an additional consequence of victim support work for police officers: the difficulty of disconnecting from the job. Particularly when discussing trauma-related issues, most officers explained how their job, particularly for those from GAV units, entails the fact that 'there are officers who find disconnecting

very difficult. There are people who find it... who make the problems their own, and you notice it' (IRP1_1). Drawing from the compassion fatigue framework, we identify the role of exposition and of specific cases, as police officers explained instances in which they said that 'I may forget the two complaints I filed yesterday, but I remember an intervention I made 20 years ago with that kid... Of course, it marks you, but you must live with it' (IRP2_2). As for the consequences of this lack of disconnectedness, which may depend on the case and on the officer's experience, we have identified some of the aforementioned effects of compassion fatigue: lack or reduction of productivity, anxiety, feelings of inefficacy, personal and professional dissatisfaction, and even wanting to leave the job. This psychological problem or consequence was thus more relevant for these particular experiences than burnout. Particularly regarding GAV units, participant officers explained that the lack of an adaptive or learning process with this type of trauma easily leads to quitting the job; 'If we make every victim's issues our own... leave the GAV. Quit, quit, because it will affect your health and your mind' (IRP2_1).

Both individual interviews and focus groups discussed the necessity of this adaptive process, without which victim support is not perceived to be feasible for a police officer. This conscious distancing, as we will see, was understood to be more of a learning process rather than training received from the PG-ME, and as such it was understood to be an experience-driven adaptation. This acknowledgment of the need to understand one's relations with victims, with tasks, and with traumas, make us argue for the continuum-like nature of the distinction between conscious and unconscious boundaries set or defined by police officers. Whereas some unwilling consequences of excessive occupational stress and trauma may easily be characterised as unconscious boundaries, the fact that participant officers acknowledged them as they discussed how

they analyse their own and other colleagues' mental health and wellbeing, signals towards a conscious look inward, towards their wellbeing and the challenges of the job.

The recognition of stress- and trauma-led issues by the participant officers may thus be identified as a first necessary step towards conscious tactics or techniques. Nevertheless, different work and social environments described by the participants create facilitating or more difficult settings for identifying and sharing mental health issues and needs. Close or supporting leadership styles, sharing offices or spaces with like-minded colleagues, or having a support network of friends or colleagues act as clear mediators towards this conscious identification and action. Having roles of responsibility, such as being the only GAV officer in a station, may also influence the ability to get some needed distance. An officer from RP3, head of an OAC, compared their experience as a sergeant of a previous task, and considered the role of an unconscious yet relevant boundary: commuting to and from the police station, a time-bound action that is not created as an explicit boundary, but that may act as such.

When I was at Information, three years as sergeant of the Information group... Disconnecting was very difficult because I commuted while discussing work stuff over a phone call. Back home the phone was still ringing... [...] When I arrive at [their police station's municipality], I live there. Back then I could use the commute to... on my way home, right, a tool that I ended up using and which I found very useful. That commute from work to home, radio, disconnecting, if I have to make some calls now I don't make them from the car. I make them at work, and when I get into the car I already start disconnecting. Now I live in [the municipality], it's just a five-minute drive, I don't have the time to do it anymore [they laugh]. And so... is it a good or a bad thing? (FGRP3_2)

Conscious boundaries

Regarding the conscious use of distances set or defined by police officers who work

with victims, and particularly those of gender-based and domestic violence, we may also distinguish between integration- and segmentation-oriented techniques or tactics. The conscious nature of these strategies makes the identification of stress- and trauma-related health issues necessary, as well as their acknowledgment as detrimental consequences of a professional's occupation. Regarding the exposure to trauma, most participant officers acknowledged the need for an emotional learning or adaptation process, without which they could not approach, for instance, 'a dismembered person, a kid that's been raped', from it would be understandable to suffer initial emotional shocks (IRP3_1). As such, we may find the role of both burnout and compassion fatigue throughout the needs and experiences to consciously distance themselves from the job.

The analysis of the conscious boundaries set by the participant officers signalled towards a wide range of settings and relationships to which they may be applied, including both physical and relational dimensions. The only conscious integration boundary work identified throughout the interviews and focus groups is the personalisation or individualisation of cases and victims. An OAC officer explained how she avoids using uniforms and focusing on her computer and the formal complaint, as she starts 'like... forgetting about my role as police. I put myself in her shoes... [...]' (IRP3_3). Even though it is not standard practice or a protocol-backed technique, some officers explained how they actively invest time and effort into becoming a *reference* figure for victims: particularly in GAV or OAC units with few or a single officer, victims may have a long relation with a specific officer, of whom they may even know personal details. This personal connection with victims, particularly after several complaints or interventions, may also be an unwilling consequence of the nature of victim support-related police work, as well as of small towns or neighbourhoods where police officers may be well known. Consequently, it can be argued that the conscious

nature of this integration technique can be discussed, as the positive consequences of close relations with victims may be a rationalisation of adverse characteristics of victim support policing.

The interviews and focus groups produced more critiques to these close relations, and to the personalisation of cases and issues. For instance, an officer explained how even in a two-person GAV unit they do not 'distribute the cases, because that's also personalising them. [...] It's not good for a victim to focus on an officer because it may become excessive' (IRP2_1). The protocols of police corps support this notion that cases and victims should be managed by the teams and not exclusively by individual officers. This protocol also supports the distribution of tasks when officers are on holiday, as homogeneous criteria and procedures, as well as sharing cases on a team basis, allows 'the officer that covers for you to understand everything [...]. We must work so that everyone can understand it and so we can all work on it' (IRP2_2).

This victim-officer segmentation can be defined not only via a functional distribution of cases, but also thanks to material cues. The role of the police uniform was highlighted by several officers as a conscious tactic to define a distance with victims, as 'the uniform provides safety and a sense of protection' (RP1_3). This protective role was explained by a participant officer from the perspective of the performative nature of the uniform:

In my experience, when Mossos put on the uniform, we kind of put on an emotional armour. Mainly to avoid visibly showing our insecurities, outside, because what we must transmit, we must provide safety, even though our legs may also be shaking. You must do that, take a breath, and come on [...] (IRP2_2)

The strategic use of uniforms as a victim-officer boundary tool is supported by a further technique, particularly useful for a conscious wellbeing promotion effort. The interpersonal nature of victim support services within the police through victim-officer

and services-officer interactions, makes *responsibility* a key concept. The fieldwork with officers highlighted the shifting role and weight of individual responsibility as officers engage with victims' traumas and needs. The fact that OAC officers refer cases to specialised units, and GAV officers liaise with social services and other service providers, make their jobs fraught with notions of victims' needs. In this regard, learning how to define the extent of one's responsibilities and capabilities was explained as a key learning and adaptive process, where drawing the line of that responsibility is of utmost importance. According to an officer, the thought of 'I can't do anything more' allows him to disconnect from the job: 'You help as much as possible, [...] it's out of your hands [...]' (IRP1_2).

From the perspective of GAV units, for instance, the often-blurred distinction between policing and the more 'social service' nature of their work may make the definition of clear-cut responsibilities more difficult, but participant officers consistently argued for the need to draw a line. A conscious segmentation technique may thus be the clear definition of one's responsibilities from a functional perspective: 'If we are to get involved, it must be within our tasks and issues, which is the police side and of what we can offer' (IRP2_2). Similarly, the adaptive process of learning to understand one's responsibilities and margin of action has been found to be an explicit boundary to be able to disconnect from the job:

A: And now the truth is... If you want to disconnect... it's the conviction, right? In other words, I want to disconnect, I need to be able to do so. If I'm a professional, if I've done everything right, I have it under control, I can go home calm. If there's anything they'll call me.

B: Without that you would never leave.

A: I would never leave.

B: You'd never go home... (FGRP3_2)

A final distinction or barrier consciously set by officers to improve their management of occupational stress and trauma is that between personal and work life. As we already discussed, officers from the more rural or less dense end of the spatial continuum, but also from smaller cities or neighbourhoods, may find this distinction difficult. On the other hand, officers within large or medium-sized metropolitan areas who live in a different town or city from that of their police station may find it easier.

Participant officers discussed several conscious techniques with which they draw a line whenever they enter their personal life, particularly after demanding cases or days; these techniques may include physical activity such as sports or walking in parks, but also relaxation and meditation. These resources are not necessarily an initial technique, learned from the PG-ME police academy, but they depend more frequently on the officers' learning and adaptive processes, as they learn about their own needs and tools. This adaptation may also entail forcing oneself to switch off the work cell phone when starting a break or a vacation, but also distinguishing between strictly personal and work-related WhatsApp group chats. Finally, police officers may even avoid discussing their job at home: even when a participant officer's partner is also a Mosso, they may have as a spoken rule to avoid discussing job issues beyond those related to logistics, such as schedules.

Conclusions

Boundaries are an essential part of police work, as officers are involved with significantly different police tasks and units, and as they face a wide range of alterities: victims, offenders, social institutions, media, and so on. How police officers establish distinctions or bridges concerning tasks, organisations, or individuals is thus an essential issue that may have relevant effects on their health and wellbeing. How they interact

and deal with occupational stress and trauma, for instance, can be analysed and even improved from the perspective of boundary work. Under this concept, we may understand conscious and unconscious delimitations of distances between individuals or organisations, including both segmentation and integration tactics or strategies. These distances, understood from both approaching and distancing orientations, may be identified throughout victim support work done by police officers.

Drawing from in-depth, qualitative research with police officers working with gender-based and domestic violence victims in Catalonia's police corps, we have argued that boundaries have a key role in both negative and positive work experiences. Throughout the study, boundaries were understood under two dichotomies: *conscious* and *unconscious*, depending on the officer's explicit and willing use of distances, and *integration* and *segmentation*, depending on the orientation of said distances. This article argues for the continuum-like nature of boundaries. When considering segmentation strategies or techniques, for instance, there is a blurred frontier between unconscious distances set by officers as they experience occupational stress and trauma, on the one hand, and conscious ones, as they explicitly acknowledge the need to distance themselves from victims or tasks or the usefulness of empathy and closeness. This blurredness can be related to an additional one, that between burnout and compassion fatigue, or stress- and trauma-related occupational hazards.

An additional obscure or murky distinction can be made out from the participants' experiences and views, which directly informs our view about boundary work within victim support police work. The care-related nature of their occupation creates a significant dissonance that explains and creates the need for boundary techniques. On the one hand, these officers are caregivers involved with vulnerable victims in dire need. Either as a USC beat cop that responds to an emergency call, as an

OAC officer who writes down the complaint and translates experiences into police-related facts, or as a GAV support provider, these officers are essential workers for victims' rights. As such, how they treat victims and how they consider their cases and needs matter and have consequences regarding rights and public policies. On the other hand, these officers are caregivers who work under intense and demanding circumstances regarding both excessive stress and secondary trauma. Current workloads, resources, and capacity, as well as the trauma inherent to their job, make them prone to burnout and compassion fatigue, among other negative consequences. Consequently, for these officers victims and their needs have a secondary existence as tasks, hindrances, or inconveniences, as part of their occupation, and in any case from the perspective of how their experiences are shaped by stress and trauma. Boundary work acts as a mediating factor or mechanism for victim support officers: it allows them to consciously and unconsciously navigate between the apparently opposing ends of victims' rights and comfort and workers' psychological and occupational needs and comfort.

Besides the blurred frontier between forms of boundary work, a second theoretical argument put forth by this article, and backed by the data analysed, is the role of individual agency against the background of actual needs and organisational settings. It is the individual officer's recognition of moments of stress- or trauma-related issues as causes for boundaries that mark them as positive or negative. This acknowledgment can be characterised by the instant in which an officer links a series of effects and consequences with a negative occupational issue, and this rationalisation may be easily related to instances in which they share their experiences and emotions with other colleagues, with friends and family, or with professionals. Individual police agency, just as discretion, may be seen not as an exception that crawls from within the

cracks of protocols and training, but as an essential part of policing (Neoclous, 2021). The identification of the relevance of an officer's understanding of how they interact and deal with occupational stress and trauma is the key dimension that allows us to distinguish between conscious and unconscious boundary work, but also to argue for specific policies and organisational changes that may improve the occupational environment within a police force.

The case of the PG-ME also allows us to argue for the importance of the organisational and social background against which police officers find themselves facing occupational needs and issues. The support received by colleagues from other units or from superiors, or lack thereof, are key components of the ecology of police resilience that allows officers to face occupational hazards (see Domínguez Ruiz et al, 2022). Particularly in police work related to victim support, a conscious understanding of integration and segmentation boundaries may play a fundamental role in a healthy and manageable relation to occupational stress and trauma. This is because victim support officers interact daily with a wide range of agents, organisations, and expectations, including victims' traumas, experiences, and needs. An integration or approaching distance, on the one hand, may act as an unconscious move that may endanger an officer's wellbeing as they make victims' issues their own, but also as a conscious technique to approach victims. On the other hand, segmentation or distancing may act as unwilling consequences of burnout or compassion fatigue, but they may also be conscious efforts to guard one's health and sense of responsibility. As such, agency and discretion, or an officer's notion about their limits, needs, and will under a given framework, are the main elements that define the frontier between potentially negative and potentially positive boundary work.

This research has focused on officers' experiences, expectations and needs and, as such, it has prioritised a qualitative focus that aimed for significance rather than representativeness. However, the research design also sought to approach representativeness via a convenience sample that took into consideration both geographical and functional diversity within a single police force, with a total of eleven individual interviewees and twenty-six participants in focus groups. Additional research is needed to take into consideration the dynamic nature of any organisation, as well as differences within and across police forces. Even within Catalonia, the differences between the PG-ME and local police forces with victim support services could be a fruitful vantage point from which to conduct further research.

Besides theoretical contributions to the study of police organisations and of boundary work as a tool, our research also aims to inform a series of corps-wide policies and changes that may be implemented. An example could be the explicit inclusion of agency and discretion as part of training programmes of police academies. Rather than considering agency and discretion as an exception, they can be conceptualised and even embraced as inherent aspects of policing, and as dimensions that may play a crucial role in an officer's management of responsibility, stress, and trauma. This proposal, however, may run counter to existing policies and protocols that may seek to homogenise police action and procedure. Whereas the police academy of the PG-ME includes in their syllabus the understanding and management of risk assessment within tense and violent situations on the street while patrolling, officers receive little to no training on how to understand and manage their individual responsibility and margin of action. An additional organisational change may involve the implementation of mandatory or recommended temporal or spatial boundary work, understood as breaks or possibilities to disconnect from victims and cases. These breaks

or disconnections may involve physical or mental exercise, but also the allocation of scheduled time to disconnect from occupational tasks and issues. Boundaries may be the unconscious consequences of an officer being burned out, but they may also play a pivotal role in promoting a healthy relation to police work.

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