The Dynamics of Depressive Symptoms on Criminal Investigators in Semarang (North Central Java) Police

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Abstract
According to Sulistyanto (Assistant of Human Resources of Indonesian National Police), a large percentage of police suicide is related to depression. Police suicidal behaviors are serious social and psychological problems that must be anticipated and resolved. In 2016 there were 13 cases of police suicide and 5 cases of suicide attempts recorded in Indonesia. The incident was reduced in 2017 to be 7 cases, similarly in 2018, and in 2019 the cases turned to be 6. Further investigation indicates that one of the main reasons to commit suicide was depression. The purpose of the research was to portray the dynamics of depressive symptoms among the criminal investigators in order to anticipate and prevent further suicidal attempts. The Beck Depression Inventory II (1996) questionnaires were distributed to the criminal investigators in Semarang Police. The number of the questionnaires delivered were 9 and the overall response rate was 27 where 5 police scored 0 to the entire BDI questionnaires, 1 police scored 1 and the other participants scored 2, 6, and 18. Three participants with the highest scores were selected to participate in in-depth interviews. The interviews were conducted 2 times, 30 minutes each. The results indicated that 3 criminal investigators on duty in North Central Java Police were not vulnerable to have major depression disorder so that such suicidal behaviors would not be conducted in immediate time. Furthermore these individuals may be the references or role models for ones who are coping with depression symptoms. Further discussions are followed.

Keywords: Depressive Symptoms, Criminal Investigators, Police

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Introduction

Law Enforcement

One of the most stressful occupations in American society is the work of police. The exposure to multiple critical incident stressors including the risk of being seriously injured and even killed is one of the risk factors of police work (Liberman et al., 2002). Lynn (2019) stated that studies showed police officers and firefighters were more likely to die by suicide than in the line of duty. In 2017, according to the Ruderman Family Foundation, at least 140 police officers and 103 firefighters died by suicide compared to 129 police officers and 93 firefighters in the line of duty. Statistics data in Indonesia showed that there were police officers who committed suicide from time to time. Based on Indonesia Police Watch (IPW) President's statement, Neta S. Pane, in 2016 there were at least 13 cases of police suicide in record alongside with 5 cases of suicide attempts followed by 7 incidents in 2017 (Ramadhan, 2018). Researcher sought similar data regarding police suicide phenomenon in the following years and got the number to be at least 7 and 6.

The infamous motto of police officers around the globe is to serve and to protect others and society which is true too in Indonesia and yet data showed that they sometimes couldn't protect themselves, ultimately doing a suicide behavior. Police suicidal behaviors are serious social and psychological problems that must be anticipated and resolved. According to Sulistyanto (Assistant of Human Resources of Indonesian National Police), a large percentage of police suicide was related to depression. Indonesian National Police Department had dispatched several experts, including clinical psychologist to increase mental health hoping to reduce depressive symptoms of police officers (Pradewo, 2018). The ratio of experts and police in the field had not been adequate so that the purpose of this research was to portray the dynamics of depressive symptoms among police officers especially divisions that were vulnerable to depression and suicide behavior. Division of criminal investigators, patrol unit, and mobile brigade corps (special forces) were regarded to those categories.

Depression and Beck Depression Inventory II (BDI-II)

According to American Psychiatric Association, depression (major depressive disorder) is a common and serious medical illness that negatively affects how you feel, the way you think and how you act. Depression causes feelings of sadness and/or a loss of interest in activities once enjoyed. It can lead to a variety of emotional and physical problems and can decrease a person's ability to function at work and at home (Parekh, 2017). One study represented that there were 631 respondents, and data were collected from both male (n=479) and female (n=152) sworn police officers with the majority of the sample (42.9%) had been working for the police force for more than 20 years at time of survey. The result showed that from 235 respondents (181 men, 54 women), or 37.2%, of the police sample met the criteria for classification as depressed (Lawson, Rodwell, & Noblet, 2012). In another study, its researchers stated that greater childhood trauma exposure, greater neuroticism and lower levels of perceived self-worth during academy training, and greater negative life events and greater perceived work stress in the first year of police service were associated with greater levels of current depression symptoms (Wang et al., 2010). The estimated rate of

probable major depression was 21.6% (180/832). Police officers might have a higher estimated rate of depression than previously thought, and those with depression have a poorer quality of life (Chen et al., 2013). Researchers thought that it was important to become aware to depression.

The Beck Depression Inventory-II (BDI-II) is currently one of the most widely used measures in both research and clinical practice for assessing depression. Confirmatory factor analysis indicated that a bifactor model with a general depression factor and three specific factors consisting of cognitive, affective and somatic showed the best fit to the data. Internal reliability was moderate to high for all subscales and for the total scale. Scores on BDI-II discriminated between clinical and general population, supporting for external validity (Garcia-Batista et al., 2018). The internal consistency of the 21-item BDI-II was high (Cronbach's alpha = .90). Reliability for factors included: sickness behavior (Cronbach's alpha = .82), Affective (Cronbach's alpha = .71), and Cognitive (Cronbach's alpha = .80). All BDI-II factors scores were significantly correlated with depressive severity (i.e., BDI-II total score), hopelessness, desired for hastened death, and anxiety. While this sample endorsed a mild level of depressive symptoms overall, individual participants ranged from minimal to severe. Consistent with existing literature, symptoms that are typically classified as somatic in nature (e.g., fatigue) were highly prevalent (Tobias et al., 2017). Based on these studies, researchers deemed that BDI-II was suitable for current issues.

Methodology

The Beck Depression Inventory II (BDI-II) questionnaires which had been adapted to Indonesian language were distributed to the criminal investigators in Semarang Police. Such questionnaires had been tested by experts and fulfilled the criteria. The police officers completed the BDI-II around 10 minutes after delivery. The researchers then reviewed all the questionnaires and separated the "high-score low-score." The number of the questionnaires delivered were 9 because the other police officers in the same division (criminal investigator) were out-of-reach. The overall response rate was 27 where 5 police scored 0 to the entire BDI questionnaires, 1 police scored 1 and the other participants scored 2, 6, and 18. 3 police officers whose score had had the highest point were personally asked by the researcher to have their permission to conduct further research by interviewing them deeply. All police officers agreed to such an act and the researcher conducted the in-depth interview 2 times for every participant which lasted approximately 30 minutes each. The interview protocol which the researcher used to interview them was made based on the same BDI-II questionnaires. The researcher explored each of the 21-item especially items that they scored high.

Result

The findings from the researcher in-depth interview in portraying dynamics of their depressive symptoms went as follows. First, good social relationship. In police department, especially criminal investigator unit, there would always be teamwork. Good communication skills and trust to one another were required on each individual. Teamwork made the progress and the outcome of work reached maximum capacity which reduced the symptoms. Next, the ability to carry concrete responsibility and

duty. When someone deemed himself worthy and capable to carry such burden in police department, they would develop sense of self-esteem which decreased depressive symptoms. Optimism rate of the future would be best applied in normal barometer. The future might be terrifying especially if we clung to an ideal that might have passed. Police officers who could let go of their ideals and compromised to today's standard tended to resist from the symptoms. Indonesia is a religious country so that police officers performed religious activities regularly. Police officers had been given special time to perform such an act in day-to-day routine, such as sholat at 3 PM and other religious programs. This without a doubt mitigated the depressive symptoms for they rethought and meditated the divine values of their religion. For instance that suicidal behavior would be a severe punishment in hereafter. The ability to accept and learn from past failure or setbacks experience would be crucial in battling depressive symptoms according to police officers. In life they said, setbacks and failures were going to find its way to us. The critical point was that how we coped with it, were we allowing ourselves to be discouraged for a long time by a setbacks or not? Succeeding this ability lowered the depressive symptoms. The police officers said that they did something they loved (hobby) such as sport once a week. According to police officers, doing something that we loved help ourselves lighten the burden of responsibility and duty as police officers and simultaneously reducing symptoms of depression. The last aspect in which police officers regarded to be responsible in combating depressive symptoms was high self-awareness. Police officers whom researcher interviewed claimed that they all practiced self-awareness by doing regular self-talk. They talked to themselves before they conducted such an act and always rethought and were able to vision the consequences in the future.

Conclusions

Based on our research findings, we concluded that 3 criminal investigators on duty in North Central Java Police were not vulnerable to have major depression disorder so that such suicidal behaviors would not be conducted in immediate time, furthermore these individuals might be the references or role models for ones who were coping with depression symptoms. By being aware of what key aspects contributed to trigger such depressive symptoms, we hope that people could conduct the behavior to prevent it worsen. We know that we conducted the research for just one division (criminal investigator unit) of many divisions in Semarang (North Central Java) Police.

So the next research questions are obvious. How about the other divisions such as mobile brigade corps (special forces)? Furthermore, how about other aspects of police mental health, such as Post-Traumatic Stress Disorder (PTSD) and Anxiety? Not only we hope the implications of the present findings is sufficient enough for portraying the dynamics of depressive symptoms but we also hope that this research would be reference for Indonesian government and National Police.

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