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PERCEIVED EFFECTIVENESS AND USE OF PREVENTION AND SUPPORT MEASURES FOR PROFESSIONAL VICTIMISATION AMONG LITHUANIAN POLICE OFFICERS

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Abstract *Professional (occupational) victimisation in policing—manifesting as external aggression from the public, internal harassment and bullying, and organisational/systemic forms of secondary victimisation—poses significant risks to officers' well-being, perceived safety and organisational performance. Lithuania has developed a multi-layered prevention and support architecture that combines labour-law prohibitions of violence and harassment, occupational safety and health (OSH) duties to manage psychosocial risks, organisational procedures for reporting and case-handling, and statutory provisions for psychological, medical and rehabilitation support. However, empirical evidence remains limited regarding how police officers assess the practical effectiveness of these formally established measures and how often they are used. The purpose of this study is to evaluate police officers' perceptions of the effectiveness of prevention and support measures aimed at addressing professional victimisation and to examine patterns of reporting, utilisation and perceived usefulness of available support. A cross-sectional quantitative research design was applied using an anonymous online survey of Lithuanian police officers (n = 137). Data were analysed with descriptive statistics and non-parametric tests (Mann–Whitney U) to compare evaluations of effectiveness between officers with and without victimisation experience, supplemented by qualitative content analysis of an open-ended question on additional prevention measures (n = 40). The findings indicate that professional victimisation is salient in officers' occupational environment through both direct and indirect exposure, while victimisation experience is not significantly associated with key socio-demographic or occupational characteristics. Officers' evaluations of formally established measures were moderate overall: none achieved high perceived effectiveness, and ratings did not differ significantly between those who had and had not experienced victimisation, suggesting a shared system-level assessment. Psychological support was evaluated most positively, whereas trust- and confidentiality-dependent mechanisms (e.g., confidential reporting pathways, peer/internal support arrangements and rehabilitation-related measures) received lower evaluations. Practice-related indicators revealed substantial underreporting and limited utilisation of support measures among victimised officers, and the perceived usefulness of received support was frequently difficult to assess. Qualitative proposals emphasised strengthening accountability for external aggression, ensuring genuinely anonymous internal reporting, reinforcing leadership accountability and organisational climate, and expanding continuous training. Overall, the results suggest that the principal challenge concerns the credibility, accessibility and consistent implementation of prevention and support mechanisms rather than their formal existence.*

Keywords: *professional victimisation, police officers, prevention measures, support mechanisms.*

Introduction

Professional (occupational) victimisation in policing is an increasingly salient public-safety and organisational governance issue because it undermines officers' health, perceived safety and work capacity, and can indirectly affect service quality and institutional legitimacy. Conceptually, it denotes work-related experiences of harm—physical, psychological, social or

reputational—arising from officers' role-based exposure to aggression and hostile conduct, including threats and behaviours likely to cause psychological harm (Dursun and Aytac, 2021; Pritz and Chou, 2025). The literature supports distinguishing three overlapping forms particularly relevant for policing and prevention. External (public-initiated) victimisation encompasses verbal abuse, intimidation, threats, discrimination and physical attacks by citizens, suspects or detainees. Empirical work on police–citizen encounters treats aggression against officers as involving psychological aggression (e.g., verbal abuse, intimidation, discrimination) alongside physical violence (van Reemst, Fischer and Weerman, 2022), and scoping evidence indicates that while prevalence and correlates are widely described, prevention and protective strategies remain less developed than the scale of the problem would warrant (Pritz and Chou, 2025). Internal (organisation-initiated) victimisation includes bullying/mobbing and harassment by colleagues or supervisors and is treated within workplace-violence frameworks because of its sustained psychosocial impact and implications for mental health and organisational functioning (Dursun and Aytac, 2021). Organisational/systemic victimisation is often discussed as secondary victimisation, whereby unsupportive organisational responses and weak support infrastructures intensify adverse outcomes and diminish trust in reporting and support mechanisms; a recent scoping review shows that organisational reactions and broader system responses can shape the severity and persistence of psychological and occupational consequences after victimisation (Goormans, Verbouw and Vandeviver, 2024). In Lithuania, these forms are visible in available evidence: police activity reviews document unlawful actions against officers and preventive actions by the organisation, including administrative proceedings that frequently relate to degrading content on social media and institutional responses such as preventive conversations and warnings for illegal influence, insults or threats (Lithuanian Police, 2024; Lithuanian Police, 2025). Internal victimisation is also empirically evidenced: Lithuanian research on police employees demonstrates that workplace bullying is present and is negatively associated with well-being, while organisational bullying risk factors predict both bullying and well-being outcomes, implying that prevention must address organisational conditions rather than relying solely on individual coping (Vrublevskaja and Bagdžiūnienė, 2025). More broadly, national-level surveys of statutory services indicate organisational strain that is directly relevant to victimisation vulnerability and secondary victimisation dynamics: in the 2020 statutory services employee study, police employees, relative to other services, evaluated workload, work organisation and work–life balance less positively, and the survey explicitly included the evaluation of psychological assistance and health services, signalling that support and psychosocial risk management are recognised as policy-relevant dimensions (Vileikienė, 2021).

Despite this relevance, the Lithuanian policing environment is characterised by a formal prevention architecture that should, in principle, mitigate victimisation and its consequences: criminal-law provisions define liability for violence, threats and interference with officers' duties, while organisational and sectoral policies provide for preventive and support measures, including psychological assistance and health-related services (Vileikienė, 2021; Lithuanian Police, 2024; Lithuanian Police, 2025). However, the existence of formal measures does not itself demonstrate their practical effectiveness. International evidence suggests that institutional response is a substantive part of the victimisation experience: supportive organisational practices can buffer harm, whereas unsupportive reactions contribute to secondary victimisation and erode trust in protection and reporting (Goormans, Verbouw and Vandeviver, 2024). In Lithuania, the co-occurrence of documented external incidents, empirically observed internal bullying dynamics, and organisational indicators of workload and climate strain suggests a plausible implementation gap between "on-paper" safeguards and experienced protection—yet

empirical assessment of perceived effectiveness of specific prevention and support measures remains limited (Vrublevskaja and Bagdžiūnienė, 2025; Vileikienė, 2021).

Accordingly, the **problem addressed in this paper** is that preventive and supportive measures for police professional victimisation may be formally established but insufficiently effective in practice from officers' perspective, potentially weakening reporting, uptake of support, and overall prevention impact. **The purpose of this paper** is therefore to evaluate whether legally and institutionally defined prevention and support measures are perceived by Lithuanian police officers as effective in addressing professional victimisation. The study is guided **by three research questions**: (RQ1) How do police officers evaluate the effectiveness of formally established prevention and support measures aimed at addressing professional victimisation? (RQ2) Which measures are most and least likely to be used, and how do officers evaluate the usefulness of the support they have received? (RQ3) What additional prevention measures do officers propose as necessary to improve protection and reduce professional victimisation?

To answer these questions, the study uses a cross-sectional quantitative research design based on an anonymous survey of Lithuanian police officers (n = 137). The analysis combines descriptive statistics with non-parametric group comparisons (Mann–Whitney U) to test differences in perceived effectiveness by victimisation-experience groups, complemented by thematic content analysis of responses to an open-ended question on additional prevention measures.

Prevention and Support Architecture for Professional Victimisation in Policing: Global Standards and the Lithuanian Framework

Authoritative international and European policy frameworks converge on a common architecture for preventing and responding to professional victimisation (violence and harassment) in the world of work: (I) a rights-based and OSH-embedded normative commitment that defines violence/harassment broadly and recognises it as a workplace risk; (II) primary prevention through systematic risk assessment and organisational controls (with particular attention to psychosocial risks and gender-based violence); (III) secondary prevention through accessible reporting routes, prompt and impartial fact-finding, confidentiality and protection against retaliation; (IV) tertiary responses through victim-centred remedies, health and psychosocial support, rehabilitation and return-to-work arrangements; and (V) enforcement, monitoring and social dialogue to ensure that formal standards translate into effective practice (International Labour Organization, 2019; International Labour Organization, 2021; European Commission, 2007; European Commission, 2021; World Health Organization, 2022).

Under ILO Convention No. 190 and Recommendation No. 206, violence and harassment are treated as a violation of the right to a safe world of work and require an "inclusive, integrated and gender-responsive" approach that combines prevention, protection, enforcement, remedies and guidance, including training and awareness-raising and the establishment of safe complaint mechanisms with protection from reprisal (International Labour Organization, 2019; International Labour Organization, 2021). The WHO similarly emphasises that workplace mental health protection depends primarily on organisational interventions that reduce psychosocial risks (e.g., excessive workload, poor support, hostile relations), complemented by manager and worker training, accessible support pathways and credible confidentiality safeguards to overcome underuse driven by stigma or low trust (World Health Organization, 2022). European instruments reinforce this model by coupling "zero tolerance" organisational

commitments with procedural guarantees—rapid and impartial handling of complaints, discretion/confidentiality, fair treatment and consequences for perpetrators—while also foregrounding support and reintegration for affected workers (European Commission, 2007). The EU OSH strategic framework embeds psychosocial risks and work-related violence/harassment as OSH priorities and underscores risk assessment, prevention planning, training and enforcement as the practical backbone of prevention (European Commission, 2021). Updated European multi-sectoral guidelines on third-party violence and harassment further stress that high-contact services require robust incident recording and review, de-escalation training, trusted reporting channels, coordination with external authorities, and multi-level victim support; they also highlight that normalisation ("part of the job") and weak confidence in procedures are key drivers of underreporting (European Multi-sectoral Social Partners, 2025). Taken together, these sources frame effective prevention as an implementation challenge: legal norms are necessary but insufficient without organisational capacity, trusted procedures and tangible support that reduces secondary victimisation.

Lithuanian regulation and authoritative national guidance reflect this global architecture to a substantial extent by combining labour-law prohibitions, OSH governance requirements and sector-specific police arrangements. The Labour Code explicitly requires employers to ensure that employees do not experience conduct that violates dignity or physical/psychological integrity and defines violence and harassment broadly (including psychological, gender-based and sexual harassment), covering both single incidents and repeated behaviour capable of producing physical, psychological, sexual or economic harm and/or creating an intimidating, hostile or degrading environment (Republic of Lithuania, 2016/2024). This normative layer is reinforced by equality regulation that defines sexual harassment as unwanted conduct of a sexual nature that violates dignity and creates an intimidating or degrading environment, thereby strengthening the legal basis for addressing harassment and discrimination-related victimisation (Republic of Lithuania, 1998/2024). In parallel, the OSH system institutionalises primary prevention via risk management: the Law on Safety and Health at Work obliges employers to organise preventive measures and structures, while secondary regulation requires professional risk assessment in all workplaces and explicitly integrates psychosocial risk investigation through dedicated methodological instructions (Republic of Lithuania, 2003/2024; Ministers of Social Security and Labour and Health, 2012/2022; Ministers of Health and Social Security and Labour, 2019). National inspectorate guidance operationalises these duties by treating violence/harassment as a psychosocial risk to be prevented through policy commitments, organisational controls, employee involvement, training, monitoring and continuous improvement, thereby aligning with the global emphasis on organisational prevention rather than reliance on individual coping alone (State Labour Inspectorate, n.d.; State Labour Inspectorate, 2022). A further compliance-oriented consolidation is provided through the legally approved description of prevention measures for violence and harassment at work, which specifies core organisational and procedural components (preventive policy, reporting and handling procedures, responsible persons/commissions, training, and support measures) and requires review and updating of measures if they are ineffective (Chief State Labour Inspector, 2024).

Within the policing sector, the Police Department's internal violence and harassment prevention policy translates the general architecture into a police-specific organisational procedure by defining scope across work-related contexts, listing prohibited behaviours, establishing reporting and handling arrangements, and formalising confidentiality and assistance measures (Lithuanian Police, 2022/2024). Tertiary support is particularly developed through statutory-service guarantees: the Internal Service Statute provides for medical

rehabilitation, health restoration and preventive medical and psychological rehabilitation funded through public resources for officers injured in the line of duty and within the system more broadly (Republic of Lithuania, 2003/2024). This is complemented by the Ministry of the Interior's regulation of psychologists' practical activities in statutory institutions, which defines psychologists' functions, stipulates confidentiality, extends support to family members, and specifies that psychological assistance should be provided following critical incidents and occupationally traumatic exposures (Ministry of the Interior, 2023). Pathways for formal recognition of duty-related health impairment are supported by specialised medical expertise regulation, while general frameworks on accident investigation and social insurance provide reporting, investigation and compensation mechanisms for work-related harm (Government of Lithuania, 2004/2014; Republic of Lithuania, 1999/2023; Ministry of the Interior, 2023). Finally, whistleblower protection legislation introduces an additional protective layer by requiring internal reporting channels, mandating confidentiality and prohibiting retaliation through a broad list of adverse actions that includes intimidation, harassment and career restrictions (Republic of Lithuania, 2017/2025). In sum, Lithuanian regulation and guidance map closely onto the global model across the three prevention levels: primary prevention through psychosocial risk assessment and OSH controls; secondary prevention through reporting and internal handling procedures; and tertiary prevention through psychological, medical and rehabilitation support.

At the same time, when assessed against the international emphasis on trusted implementation, several vulnerabilities remain that plausibly contribute to the perception of limited effectiveness among officers. First, while the legal framework clearly defines violence/harassment and mandates psychosocial risk assessment, it leaves substantial discretion over the intensity and enforcement of organisational controls, making outcomes dependent on local managerial capacity and commitment—an issue highlighted internationally as a key determinant of underreporting and secondary victimisation (Ministers of Health and Social Security and Labour, 2019; European Multi-sectoral Social Partners, 2025). Second, internal reporting and case-handling arrangements may be perceived as insufficiently independent in hierarchical organisations if ultimate decision-making authority rests with senior leadership or if "anonymous" reporting is perceived as only partial anonymity—factors known to reduce trust and uptake (Lithuanian Police, 2022/2024; World Health Organization, 2022). Third, whistleblower protection channels may not be perceived as a fit-for-purpose route for reporting all forms of interpersonal victimisation unless the harm clearly meets statutory criteria of reportable wrongdoing, potentially leaving grey zones for reporting internal bullying/mobbing dynamics (Republic of Lithuania, 2017/2025). Fourth, compensation and formal investigation pathways are structurally better aligned with acute, documentable events and medically certified impairment than with cumulative psychosocial harm, meaning that purely psychological victimisation and secondary victimisation may be more difficult to evidence, attribute and remedy despite formal availability of psychological support (Republic of Lithuania, 1999/2023; Government of Lithuania, 2004/2014; Ministry of the Interior, 2023). Finally, while third-party violence is recognised within the psychosocial risk logic, national and organisational texts are comparatively less explicit about policing-specific interfaces between external victimisation, criminal justice processes and organisational support (e.g., structured victim feedback, procedural safeguards to reduce secondary victimisation during external proceedings), leaving a potential gap between deterrence logic and officers' lived experience of protection and assistance (European Multi-sectoral Social Partners, 2025; Lithuanian Police, 2022/2024). These observations support the central premise of the study: Lithuania's prevention and support architecture is formally extensive and broadly consistent with global

standards, yet its practical effectiveness likely depends on the credibility, accessibility and perceived independence of implementation mechanisms.

Methodology

This study employed a cross-sectional quantitative research design using an anonymous online survey to capture police officers' perceptions of the practical effectiveness of formally established prevention and support measures addressing professional victimisation. The choice of a survey design was driven by the need to obtain standardised, comparable evaluations of multiple measures from a geographically dispersed occupational group and to quantify patterns of perceived effectiveness and uptake at a single point in time (Bryman, 2016; Creswell and Creswell, 2018). Data collection was implemented via a web-based questionnaire (apklausa.lt) distributed to police units through publicly available institutional work-email contacts, with invitations sent to 16 police units, the Police Department, county chief police commissariats, and selected specialised units. The study relied on non-probability, volunteer participation; accordingly, inference is framed as descriptive and analytical rather than population-representative, consistent with methodological guidance for survey research where sampling frames are constrained and response is self-selected (Dillman, Smyth and Christian, 2014; Bryman, 2016). The achieved sample comprised n = 137 internal service police officers aged 20–64 years (M = 41.5), with 44.53% men and 55.47% women; the mean length of service was 17.6 years, and most respondents worked in county/district commissariats (78%), with 20% in specialised units and 2% in the Police Department.

The questionnaire was constructed on the basis of prior literature and structured into six sections: (I) socio-demographic characteristics (age, gender, length of service, workplace context); (II) exposure to professional victimisation and situational context (including perceived workplace safety); (III) forms of victimisation; (IV) perceived consequences; (V) perceived causes; and (VI) evaluations of the effectiveness of prevention and support measures embedded in Lithuanian regulation and organisational practice, complemented by an open-ended item on additional measures respondents considered necessary. This structure reflects standard survey design principles for measuring complex occupational phenomena by combining descriptive indicators, attitudinal evaluations, and limited qualitative elaboration to improve interpretability of quantitative findings (Dillman, Smyth and Christian, 2014; Bryman, 2016). Given the sensitivity of victimisation-related topics and the hierarchical nature of policing, an online, self-administered format was selected to reduce interviewer effects and social desirability pressures, thereby increasing the likelihood of candid reporting (Tourangeau and Yan, 2007; Dillman, Smyth and Christian, 2014).

Ethical safeguards were integrated into the study procedure. Participation was voluntary, and respondents were informed about the study aims, anonymity, and their right to discontinue completion at any stage; informed consent was operationalised through the participant's decision to submit the completed questionnaire ("submit" as affirmative consent). These safeguards align with widely accepted research-ethics principles of respect for persons, voluntary participation, minimisation of harm, and confidentiality (British Psychological Society, 2021; National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979). Data were collected without direct personal identifiers within the survey instrument, and results were analysed and reported in aggregate form, consistent with confidentiality standards and EU data-protection expectations for research processing (European Parliament and Council, 2016; British Psychological Society, 2021).

Statistical analysis was conducted in SPSS using a combination of descriptive and non-parametric inferential methods. Descriptive statistics (frequencies, percentages and means) were used to summarise prevalence-related indicators and the distribution of perceived effectiveness ratings. Because key variables were ordinal and/or did not satisfy normality assumptions, non-parametric tests were applied: χ^2 tests examined associations between categorical socio-demographic variables and victimisation experience; Spearman's rank correlation assessed monotonic relationships between victimisation exposure indicators and perceived workplace safety; the Mann–Whitney U test compared distributions of effectiveness evaluations between groups defined by victimisation experience; and the Kolmogorov–Smirnov test informed decisions about normality assumptions. This analytical strategy is consistent with recommendations to use non-parametric procedures for Likert-type outcomes and non-normal distributions, particularly when the aim is to compare groups and examine rank-based associations without imposing parametric assumptions (Field, 2018; Pallant, 2020). Responses to the open-ended question on additional measures were analysed using qualitative content analysis to identify recurrent themes that contextualise and extend the quantitative effectiveness evaluations.

Results

RQ1. How do police officers evaluate the effectiveness of formally established prevention and support measures aimed at addressing professional victimisation? To contextualise evaluations of prevention and support measures, the study first examined the distribution of professional victimisation exposure within the sample. Overall, 10.9% of respondents reported having experienced professional victimisation personally, while a further 30.7% had not been directly victimised but reported awareness of such incidents affecting colleagues; taken together, 41.6% indicated that professional victimisation was salient in their immediate occupational environment. Among those reporting personal experience, exposure was typically infrequent but non-negligible: 46.7% indicated 1–2 incidents in the previous calendar year, 6.7% reported 3–4 incidents, and 5.0% reported more than five incidents, while 41.7% stated they could not specify frequency, suggesting either recall limitations or difficulty demarcating discrete episodes in routine policing work. Importantly, professional victimisation experience was not statistically associated with theoretically relevant socio-demographic or occupational characteristics. Chi-square tests indicated no significant relationship between victimisation experience and gender, geographic work location, organisational unit, or work profile (all p-values > .05). Likewise, Mann–Whitney U tests showed no statistically significant differences between victimised and non-victimised groups in age or length of service (both p-values > .05). These results suggest that, within this sample, professional victimisation should be treated as an exposure that is not confined to a specific demographic subgroup, supporting an interpretation of the problem as structurally distributed across policing roles rather than concentrated within a narrow segment of the workforce.

Against this background, respondents evaluated the effectiveness of formally established prevention and support measures. Across measures, a key pattern was that no single intervention achieved very high endorsement; the highest "effective" rating did not reach 70%, indicating broad scepticism or ambivalence regarding practical impact. The most positively evaluated measure was the possibility of receiving psychological assistance, rated effective by 65.7% of respondents, followed by the employer's duty to ensure safe and psychologically healthy working conditions (59.9%). Legal deterrence tools were evaluated at a moderate level: administrative sanctions for insulting an officer and criminal liability for resistance to an officer

were each rated effective by 56.2%. In contrast, measures that depend on internal organisational trust and procedural credibility received weaker endorsement, including colleagues' support mechanisms and certain internal-help arrangements (39.4%). Other mechanisms—such as psychological rehabilitation following traumatic incidents and the possibility of confidential reporting—were evaluated as effective by fewer than half of respondents, signalling potential deficits in perceived accessibility, confidentiality, or organisational responsiveness. Figure 1 summarises the proportion of respondents who assessed each formally established measure as effective.

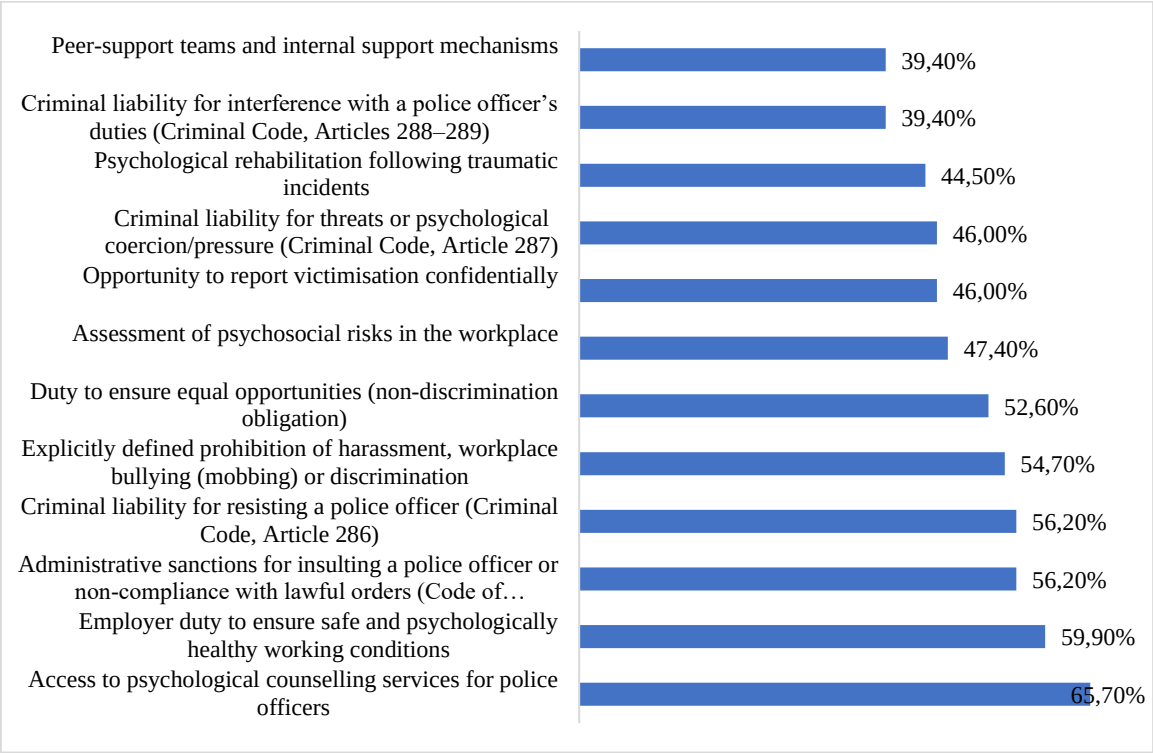


Figure 1. Perceived effectiveness of prevention and support measures (% rating effective).
Source: author's survey (n = 137).

In summary, officers' evaluations suggest a prevention-and-support landscape in which the most credible instruments are those offering direct individual assistance (especially psychological support) and general employer obligations, while internally mediated mechanisms (e.g., confidential reporting pathways and peer-support arrangements) attract lower confidence. The absence of group differences by victimisation experience reinforces the conclusion that perceived limitations are systemic rather than restricted to the subgroup with direct victimisation exposure, thereby supporting the study's central premise of a potential implementation gap between formal provisions and their experienced effectiveness in everyday policing practice.

RQ2. Which measures are most and least likely to be used, and how do officers evaluate the usefulness of the support they have received? Among respondents for whom professional victimisation was salient (i.e., those reporting direct experience or awareness of colleagues' victimisation), reporting behaviour indicates a substantial "non-reporting" pattern. Of officers who had experienced professional victimisation, 29.8% reported the incident(s) to a supervisor or another responsible person, whereas 56.1% chose not to report and 14.0%

preferred not to disclose whether they had reported. Non-reporting was driven primarily by personal reluctance to escalate the issue (48.4%) and by uncertainty regarding where and how to report (12.9%). A further 29.0% selected "other" reasons that largely reflected organisational scepticism and normalisation of victimisation: respondents described such situations as frequent and therefore not worth reporting, perceived them as unimportant to the organisation, or expressed expectations that reporting would not lead to meaningful action. Only 9.7% indicated that they did not report because responsible persons were already aware of the situation through others' reports. Taken together, these findings suggest that underreporting is not explained solely by individual preference but is also shaped by perceived low organisational efficacy, limited procedural clarity, and a "nothing will change" expectation—factors directly relevant to the practical functioning of prevention and support architectures.

Patterns of use of prevention and support measures further reinforce this implementation challenge. Among officers who reported victimisation (n = 57), 43.9% indicated that they had not used any prevention or support measure. The most used measure was participation in training on stress or conflict management (50.9%), implying that the most reachable forms of support are formalised and relatively low-threshold interventions. In contrast, uptake of interventions requiring disclosure, trust, or confidential access was limited: only 10.5% reported using psychological counselling services within the police institution, 14.0% reported receiving support from leadership, and 8.8% used peer-support or internal support mechanisms. Notably, no respondent reported using anonymous/confidential reporting channels for breaches or psychological rehabilitation after a traumatic incident (0% each), which is particularly striking given that these mechanisms are often presented in policy as key instruments for preventing secondary victimisation and facilitating recovery. Overall, the distribution suggests that while training-based prevention is comparatively utilised, individualised and confidentiality-dependent mechanisms—those most closely aligned with early intervention and tertiary support—are least likely to be used.

Officers' evaluations of the usefulness of support received were similarly ambivalent. Among those who had received some form of assistance, 64.9% indicated that it was difficult to assess whether the support was effective, while 22.8% evaluated the received support as effective or very effective. A smaller proportion (12.3%) rated it as ineffective or completely ineffective. This pattern is consistent with two interpretations that are both relevant for policy implications: first, support may be delivered in ways that are insufficiently visible in outcomes (e.g., short-term, generic, or not tailored to the officer's needs), making it difficult for recipients to judge impact; second, low procedural trust and limited follow-up may produce an experience of "formal" support that does not translate into meaningful relief or organisational problem-solving. When considered alongside high non-use of support mechanisms and substantial non-reporting, these findings suggest that the principal limitation is not merely the existence of measures but their practical accessibility, perceived confidentiality, and credibility as routes to real assistance and organisational change.

In summary, with respect to RQ2, formally established measures are most likely to be used when they are routine, low-threshold and institutionally embedded (training), and least likely to be used when they require disclosure, trust in confidentiality, or engagement with internal procedures (confidential reporting channels, psychological rehabilitation, peer support, and—despite high perceived value—psychological counselling). Officers' own accounts of non-reporting and the predominance of "hard to say" evaluations of received support together indicate that the prevention-and-support system is experienced as insufficiently transparent and/or effective to motivate disclosure and sustained uptake, thereby limiting its capacity to mitigate victimisation and prevent secondary harm.

RQ3. What additional prevention measures do officers propose as necessary to improve protection and reduce professional victimisation? Open-ended responses (n = 40) were analysed using qualitative content analysis, applying systematic coding to identify recurrent meaning units, aggregate them into subthemes, and synthesise higher-order themes that capture shared prevention priorities (Elo and Kyngäs, 2008; Schreier, 2012). Because respondents could propose multiple measures, thematic proportions are interpreted as indicative salience rather than mutually exclusive frequencies. Eight themes emerged. First, strengthening legal accountability and sanctions (approximately 30% of respondents) reflected a strong deterrence logic: officers argued for clearer prohibitions, higher penalties and the inevitability of consequences for aggression and non-compliance, including stronger responses to ignoring lawful orders and insulting officers (e.g., "Aiškesni teisiniai draudimai ir griežtesnės sankcijos" [Clearer legal prohibitions and stricter sanctions]; "įstatyminės bazės keitimas, nuobaudos neišvengiamumas" [legal change, inevitability of punishment]; "Didesnės piniginės baudos už pareigūnų teisėtų reikalavimų nevykdymą" [Higher fines for failure to comply with lawful orders]). Second, ensuring anonymity and protection from internal victimisation (about 20%) emphasised safe disclosure as a prerequisite for prevention, proposing fully anonymous reporting channels and repeated anonymous climate surveys, particularly for mobbing and psychological pressure (e.g., "Visiškai anonimiškas pranešimas apie mobingą, psichologinį spaudimą ir kt." [Fully anonymous reporting on mobbing, psychological pressure, etc.]; "Reguliarios apklausos apie mikroklimatą darbo kolektyve (anonimiškai)" [Regular anonymous surveys on team climate]; "Apsauga nuo mobingo bei patyčių" [Protection from mobbing and bullying]). Third, improving organisational climate and interpersonal relations (about 20%) framed victimisation prevention as a cultural and relational task, stressing respectful interaction, teamwork and trust as protective resources (e.g., "mikroklimato realus gerinimas" [real improvement of the microclimate]; "stiprinti darbą komandoje, pasitikėjimas tarp komandos narių" [strengthen teamwork, trust among team members]; "Požiūris į patį pareigūną ir jo labai sunkų atliekamą darbą" [attitude towards the officer and their very difficult work]). Fourth, leadership accountability and ethical management (about 10%) highlighted supervisory behaviour as both a risk factor and a leverage point, proposing explicit, dissuasive consequences for managerial misconduct and more equitable managerial attitudes across roles (e.g., "Numatyti realias, atgrasančias sankcijas vadovams už tokį elgesį" [Provide real, dissuasive sanctions for leaders for such behaviour]; "Vadovų požiūris į skirtingus darbus atliekančius kolegas" [leaders' attitudes towards colleagues in different roles]). Fifth, training and education (about 12.5%) was proposed as a sustained organisational investment: respondents requested regular training for officers and managers focused on ethical behaviour, leadership and psychological health, alongside public education about causes and consequences of aggression against police (e.g., "Reguliarūs mokymai pareigūnams ir vadovams… (etiško elgesio, lyderystės, psichologinės sveikatos temos)" [Regular training for officers and managers… ethical behaviour, leadership, psychological health]; "Šviesti visuomenę, pateikti priežastis ir pasekmes" [Educate the public, explain causes and consequences]). Sixth, strengthening occupational safety and health (about 10%) functioned as a cross-cutting theme, expressed in concise calls to prioritise safety and health as an organisational duty rather than an individual burden (e.g., "Darbuotojų sauga ir sveikata" [Occupational safety and health]; "saugos ir sveikatos užtikrinimas" [ensuring safety and health]). Seventh, enhancing professional prestige and retention (about 10%) linked prevention to structural resourcing and workforce sustainability: respondents emphasised competitive remuneration and retaining experienced officers as conditions that could reduce strain and vulnerability (e.g., "tolygus darbo užmokesčio didinimas, kad PD būtų konkurencingas rinkoje" [gradual wage increases so

the Police Department is competitive in the labour market]; "patyrusių pareigūnų 'išsaugojimas'" [retaining experienced officers]). Eighth, perceived sufficiency of existing measures coupled with implementation scepticism (about 22.5%) captured a critical tension: some officers argued that formal measures are already adequate but poorly implemented, while others expressed resignation and distrust in any preventive intervention (e.g., "Manau pakaktų ir tų priemonių, kurios yra, jei tik jos būtų efektyvios" [Existing measures would be sufficient if they were effective]; "Priemonių pakanka, reikia jas tinkamai pritaikyti" [Measures are sufficient; they need to be properly applied]; contrasted with "Jokios. Tai neveikia" [None. It doesn't work]).

Overall, this qualitative evidence suggests that officers' prevention priorities extend beyond individual-level support and deterrence toward institutional credibility: effective prevention is expected to combine stronger accountability for external aggression, genuinely safe and anonymous reporting for internal harm, leadership responsibility, and a workplace culture and resource base that make protection and assistance both accessible and trustworthy.

Discussion

The findings support an "architecture–implementation gap" interpretation: although global and European guidance conceptualises prevention and support as an integrated system—rights-based norms, OSH-embedded risk management, trusted reporting and impartial procedures, and accessible victim-centred support—officers' assessments suggest that Lithuanian provisions may not consistently translate into effective, experience-level protection. This aligns with ILO Convention No. 190 and its implementation guidance, which emphasise that prevention requires integrated organisational measures, functioning complaint mechanisms, protection from retaliation and remedies rather than formal prohibition alone (International Labour Organization, 2019; International Labour Organization, 2021). The same logic is reiterated by WHO guidance that prioritises organisational interventions for psychosocial risks and stresses that support is only effective when stigma, confidentiality and trust barriers are addressed (World Health Organization, 2022). In this study, no formally established measure achieved high endorsement (>70%), indicating that the practical credibility of the system remains contested.

A second interpretive point concerns why effectiveness ratings remain moderate across instruments. In policy terms, Lithuania's framework includes broad legal prohibitions (e.g., violence and harassment under labour law), OSH duties and psychosocial risk assessment requirements, and employer-level prevention duties and procedures (Republic of Lithuania, 2016/2024; Republic of Lithuania, 2003/2024; Ministers of Health and Social Security and Labour, 2019; Chief State Labour Inspector, 2024). Yet officers' evaluations suggest that the presence of these mechanisms does not guarantee perceived effectiveness—consistent with European guidance that "zero tolerance" commitments must be supported by visible, fair enforcement and credible case handling (European Commission, 2007; European Commission, 2021). The pattern that even the most highly rated measure—psychological assistance—remains below two-thirds endorsement implies that officers may be judging measures not on formal design but on perceived accessibility, follow-through, and organisational responsiveness in everyday practice.

The psychological support paradox is especially policy-relevant: psychological assistance was rated the most effective measure (65.7%), yet utilisation among victimised officers was low (10.5%), suggesting barriers at the level of access, trust or organisational culture. WHO explicitly notes that workplace mental health supports are often underused when confidentiality

is doubted, stigma is present, or support is not embedded in a broader organisational approach to psychosocial risk reduction (World Health Organization, 2022). In the Lithuanian context, psychological support is institutionally formalised through statutory-institution psychologist regulations and broader internal service support guarantees (Ministry of the Interior, 2023; Republic of Lithuania, 2003/2024). The discrepancy between perceived value and actual use therefore points less to a deficit of formal availability than to implementation obstacles: low psychological safety for disclosure, uncertainty about pathways, and limited confidence that engagement will remain confidential or produce meaningful relief.

The pronounced non-reporting pattern provides further evidence that implementation conditions are central. Most victimised respondents reported not informing a supervisor/responsible person (56.1%), and many justifications reflected normalisation ("such incidents are frequent") and low expectations of organisational response. International third-party violence and harassment guidance identifies underreporting as a predictable outcome when incidents are treated as "part of the job" or when reporting does not lead to timely, visible action, thereby weakening organisational learning and prevention (European Multi-sectoral Social Partners, 2025). This is particularly consequential in a policing environment where external victimisation is frequent and can escalate. From an OSH governance perspective, persistent underreporting undermines risk assessment, prevention planning and the feedback loops required for continuous improvement (European Commission, 2021; Chief State Labour Inspector, 2024).

The absence of differences in effectiveness evaluations between officers with and without victimisation experience is a noteworthy interpretive anchor. If scepticism were driven primarily by personal negative experiences, one would expect weaker ratings among those directly affected. Instead, the lack of statistically significant group differences implies a shared organisational perception of limited system effectiveness—a broader "collective knowledge" that may circulate through colleague experiences and informal organisational narratives. This resonates with research on the consequences of violence against police, which emphasises that organisational response and perceived support shape coping and long-term outcomes; when officers expect limited support, the victimisation burden can spread beyond direct victims to the wider organisational climate (Goormans, Verbouw and Vandeviver, 2024). In this sense, effectiveness perceptions appear to operate as an organisational-level phenomenon rather than a strictly individual response.

Officers' qualitative proposals (RQ3) closely mirror the global architecture and, importantly, identify where implementation is perceived as weakest. Respondents prioritised stronger and more inevitable accountability for external aggression, truly anonymous reporting and protection from internal victimisation, leadership accountability, and microclimate improvement—elements that map directly onto ILO requirements for effective complaint mechanisms, anti-retaliation guarantees, and integrated prevention strategies, as well as European expectations of impartial procedures and OSH-embedded prevention (International Labour Organization, 2019; European Commission, 2007; European Commission, 2021). The proposals thus function as "policy feedback": officers appear to recognise the correct architecture in principle, but they demand stronger operational credibility (real anonymity, leadership responsibility, enforceable consequences) to make the architecture work in practice.

The results also illuminate a tension between deterrence-oriented and support-oriented approaches. Respondents endorsed legal deterrence tools at a moderate level and proposed stronger sanctions, suggesting that external victimisation is frequently interpreted through a punitive or deterrent frame. This is compatible with a policing environment where criminal and administrative liability forms a visible, formal response to aggression. However, global

frameworks consistently treat deterrence as only one component of prevention; they emphasise organisational prevention, reporting infrastructure, and victim-centred remedies and reintegration as equally necessary (International Labour Organization, 2021; European Multi-sectoral Social Partners, 2025). The comparatively weaker perceived effectiveness and low use of internal support mechanisms in this study suggests that deterrence may be more visible than internal support and organisational prevention, leaving a functional imbalance in the prevention "system."

A further implication concerns organisational sustainability. International evidence links victimisation to psychological strain and occupational functioning, with organisational support moderating the severity and persistence of harm (Goormans, Verbouw and Vandeviver, 2024). In Lithuania, independent evidence indicates that workplace bullying is associated with reduced well-being and is predicted by organisational risk factors, reinforcing the idea that organisational context and resources matter for prevention (Vrublevskaja and Bagdžiūnienė, 2025). Moreover, national statutory-service survey evidence points to workload and work-organisation strain in policing, which may both increase vulnerability to victimisation and reduce willingness or capacity to engage with support mechanisms (Vileikienė, 2021). Taken together, the study's findings suggest that weakly trusted support and reporting systems may contribute to a negative cycle: victimisation and strain reduce engagement, underreporting prevents organisational learning, and unresolved problems further erode trust and retention.

Finally, several limitations should be considered. The sample was voluntary and non-probabilistic, restricting population-level generalisation and raising the possibility of self-selection (e.g., participation by those more concerned with the topic). Measures relied on self-report, which may be affected by recall error, social desirability concerns, and varying interpretations of "victimisation" episodes. The cross-sectional design limits causal inference and cannot test whether organisational measures reduce victimisation over time.

Future research would benefit from (I) organisational process evaluation of reporting and case-handling pathways (timelines, perceived independence, outcomes), (II) mixed-method designs (interviews/focus groups) to examine barriers to psychological support uptake and confidentiality perceptions, and (III) comparative perspectives incorporating supervisors and organisational decision-makers to assess alignment between formal procedures and lived practice (European Multi-sectoral Social Partners, 2025; World Health Organization, 2022).

Conclusions

This study indicates that Lithuanian police officers perceive formally established prevention and support measures for professional victimisation as only moderately effective. None of the assessed measures achieved strong endorsement, and effectiveness ratings did not differ between officers with and without victimisation experience, implying that perceived shortcomings reflect a broader system-level assessment rather than the views of a narrowly affected subgroup. The most credible measure was access to psychological support, whereas mechanisms requiring organisational trust (e.g., confidential reporting and internal/peer-support arrangements) were evaluated less favourably, consistent with a prevention system that is formally developed but unevenly translated into practice.

Recommendations follow directly from this gap between formal provision and perceived practical utility. Priority should be given to strengthening implementation capacity and credibility: (I) clarify and publicise reporting pathways, ensure robust confidentiality/anonymity safeguards, and standardise timely case-handling with transparent follow-up; (II) increase the accessibility and normalisation of psychosocial support through

low-threshold entry points, proactive outreach, and clear confidentiality guarantees; and (III) embed violence/harassment prevention within psychosocial risk management and leadership accountability, linking prevention to workload management and organisational climate indicators.

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