



Occupational stress among police personnel in India

Abstract

Background: Occupational stress and associated physical and mental health related issues are not addressed in Indian police personnel with adequate importance. **Methods:** Cross-sectional survey was conducted among police personnel (both male and female) in Calicut urban police district, Kerala state, India. Police personnel from all designations (ranks), except from the all India services (Indian Police Service) were included in the study. Data were collected using a specifically designed datasheet covering socio-demographic profile, physical and mental health related details which was prepared by researchers. Occupational stress was measured using Operational Police Stress Questionnaire (PSQ-OP) and Organisational Police Stress Questionnaire (PSQ-ORG). **Result:** The study found that both operational and organisational stress was significant among the police officers. Organisational stress was experienced in moderate level by 68% and in high level by 14%. Operational stress scores were in the moderate range in 67% and in high range in 16.5%. The younger age group (21-35 years) and lower level rank police personnel had higher stress. Stress was higher among female police personnel compared to males. While 23% of them had been diagnosed with physical illnesses, a significant four per cent of them with mental illness, and 29% of them reported substance abuse. **Conclusion:** The results point to the high level of stress among Indian police personnel and the need for urgent interventions from the government to address the occupational stress.

Keywords: Law Enforcement Officers. Mental Health. Substance Abuse.

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Introduction

Law enforcement is an occupation with some peculiar characteristics that can cause work stressors, and policing job is one of the most stressful.[1] The reasons for stress are many - negative working environment, long duration of working hours, lack or lesser time for family, irregular or improper eating habits, need to take tough decisions very quickly, sleepless nights, poor living and working conditions, issues with seniors, inadequate time for leisure activities, difficulties in personal life etc.[2,3] The police personnel are one of the few professionals where people are expected to face physical dangers and, if necessary, to risk their lives as well as face significant stress in many other aspects.[4]

Occupational stress is associated with a number of adverse organisational outcomes and many studies consistently found that the higher levels of job stress lead to lower levels of job satisfaction.[5,6] This finding has important

implications for any kind of organisation especially police, because job satisfaction has been shown to predict poorer levels of commitment, outcome, and an increased likelihood of resigning from the work.[7,8] Stress among policemen may present in the forms of fatigability, depression, difficulty to concentrate, irritability, impulsive behaviour, etc.[9] Stress also has a negative impact on the physical health, and both physical and mental illness make the employee unfit for work, and it impacts job satisfaction and reduces work performance.[9]

Occupational stress has become a common and costly health problem.[10] Stress and its impact on mental health and physical health of police personnel are not addressed adequately by the concerned authorities and health professionals in India. The current study focused on two different types of stresses in police personnel, i.e. operational and organisational stress. Operational stress means the stress associated with doing the job and organisational stress is

the stress associated with the organisational culture within which the job is performed in both male and female police officers.[11]

Materials and methods

The objective of the study was to understand the operational and organisational stress experienced by police personnel, and to look for associations among various socio-demographic variables and the levels of stress. The current study has adopted a cross-sectional survey design.

The study was conducted among police personnel in Calicut urban police district, Kerala state, India. Police personnel (both male and female) working under Calicut city Police Commissioner were called for the study in batches of 40 each on consecutive Sundays to the Police club, which has an auditorium. They were given a brief orientation class on physical and mental health related issues. Those who consented to participate in the study were given questionnaires. This was continued for 12 weeks. Police personnel from all designations (ranks), except from the all India services (Indian Police Service) were included in the study. Informed consent was taken from all the respondents. The study conforms to the provisions of the Declaration of Helsinki (as revised in Edinburgh 2000) and the authors have followed all ethical formalities to conduct the study.

Data were collected using a specifically designed datasheet covering socio-demographic profile, physical and mental health related details which was prepared by researchers. Respondents were asked to specify their diagnosis with regard to their health status. Occupational stress was measured by using Operational Police Stress Questionnaire (PSQ-OP) and Organisational Police Stress Questionnaire (PSQ-ORG).[11] Everyone was asked to rate how stressful each item has been for him or her recently, on a seven-point Likert scale ranging from “not at all stressful”, “moderately stressful”, and “very stressful”. Both descriptive and inferential statistics were used for analysis.

Results

Obtained 460 filled in questionnaires from the respondents. None refused consent for filling up the questionnaires, but 54 responses were excluded from the analysis as the questionnaires were incomplete. Hence 406 responses were considered for analysis. The socio-demographic data is presented in Table 1. Stress levels were further classified into low, moderate, and high by taking mean \pm 1 SD as per the suggestion from the author who developed the questionnaire (Table 2). The causes of operational and organisational stress, and their frequency among respondents are given in Tables 3 and 4.

The study found that the operational stress was higher in the age group of 21-35 years compared to other age groups (Table 5). The operational and organisational stresses were higher among police personnel with designations of Junior Civil Police Officers (JCPOs), Senior Civil Police Officers (SCPOs), and Assistant Sub Inspectors (ASIs) compared to officers with other designations (Table 5). Operational

Table 1: Socio-demographic details of the respondents

Variables	Number (%)
Age (in years)	
21-25	1 (0.2)
26-30	15 (3.7)
31-35	68 (16.7)
36-40	109 (26.8)
41-45	77 (19)
46-50	72 (17.7)
50 and above	64 (15.7)
Gender	
Male	371 (91.4)
Female	35 (8.6)
Education	
10th standard	100 (24.6)
Pre-university course	124 (30.5)
Graduation	150 (36.9)
Post-graduation and higher	21 (5.2)
Professional degree	9 (2.2)
Not specified	2 (0.5)
Marital status	
Married	381 (93.8)
Unmarried/divorced/widowed	25 (6.2)
Family type	
Nuclear	244 (60)
Others	162 (40)
Designation (rank)	
Junior Civil Police Officers	223 (55)
Senior Civil Police Officers	95 (23.4)
Assistant Sub Inspectors	58 (14.3)
Sub Inspectors and grades above	30 (7.3)

Table 2: Operational and organisational stress scores

	Operational stress	Organisational stress
Mean (SD)	79.79 (23.27)	76.53 (21.01)
Median	81.00	78.00
Mode	77	81
Minimum	23	20
Maximum	136	128
Stress classification, n (%)		
Low	67 (16.5)	71 (18)
Moderate	272 (67)	275 (68)
High	67 (16.5)	60 (14)

stress was higher among female officers compared to males (Table 5).

Around 23% of them have reported that they were diagnosed with physical health problems (hypertension/

Table 3: Causes of operational stress with percentage of subjects reporting them

Sl. No.	Operational stressors	Percentages of respondents who reported stress (moderate stress and above)
1	Over-time demands	72
2	Not enough time available to spend with friends and family	70
3	Fatigue	70
4	Occupation related health issues	68
5	Limitations to social life	66
6	Working alone at night	65
7	The risk of being injured on the job	64
8	Finding time to stay in good physical condition	64
9	Feeling like always on the job	64
10	Work related activities on days	62
11	Lack of understanding from family and friends about work	60
12	Eating healthy at work	59
13	Negative comments from the public	56
14	Paperwork	56
15	Making friends outside the job	56
16	Shift in work	56
17	Friends/family feel the effects of the stigma associated with job	55
18	Traumatic events	53
19	Managing social life outside of work	52
20	Upholding a "higher image" in public	48

Table 4: Causes of organisational stress with percentage of subjects reporting them

Sl. No.	Organisational stressors	Percentages of respondents who reported stress (moderate and above)
1	Staff shortages	78
2	Bureaucratic red tape	68
3	Perceived pressure to volunteer free time	65
4	Unequal sharing of work responsibilities	65
5	Lack of resources	64
6	Dealing with the court system	63
7	Lack of training on new equipment	63
8	The need to be accountable for doing job	62
9	Constant changes in policy/legislation	62
10	Inadequate equipment	60
11	Dealing with supervisors	60
12	Inconsistent leadership style	61
13	Excessive administrative duties	58
14	Leaders over-emphasise the negatives	57
15	The feeling that different rules apply to different people (e.g. favouritism)	52
16	Feeling like you always have to prove yourself to the organisation	48
17	Internal investigations	48
18	Too much computer work	44
19	If you are sick or injured your co-workers seem to look down on you	37
20	Dealing with co-workers	29

diabetes/renal/allergy etc.) With regard to mental illnesses, four per cent of them reported that they have diagnosed

mental illnesses (psychosis/anxiety disorders), and 29% of them reported that they abused substances (nicotine,

Table 5: Comparison of stress to socio-demographic characteristics

Variables	Operational stress		Organisational stress	
	Mean±SD	p-value	Mean±SD	p-value
Gender				
Male (371)	79.08±23.21	0.046 (S)	76.40±21.24	0.684 (NS)
Female (35)	87.29±22.92		77.91±18.79	
Age (years)				
21-35 (84)	87.33±22.92 [#]	0.004 (S)	80.57±21.73	0.097 (NS)
36-40 (109)	80.37±21.42		75.90±18.10	
41-45 (77)	79.58±20.65		78.66±17.78	
46-50 (72)	75.58±24.06		74.75±24.38	
51 and above (64)	73.86±26.51		71.73±23.41	
Designation				
JCPO (223)	83.52±21.84	0.001 (S)	78.46±19.44	0.001 (S)
SCPO (95)	78.52±22.00		77.56±21.97	
ASI (58)	75.52±25.64		75.12±22.31	
Other higher ranks (30)	64.33±25.65 [@]		61.67±21.56 [@]	

[#]21-35 years age group had significantly higher operational stress compared to the age group of 46-50 years and 51+years, [@]Those in higher ranks had significantly lower operational and organisational stress compared to lower ranks, JCPO=Junior Civil Police Officers, SCPO=Senior Civil Police Officers, ASI=Assistant Sub Inspectors, S=Significant, NS=Not Significant

alcohol, cannabis) and few of them abused multiple substances.

Discussion

There is a dearth of literature on occupational stress and associated health problems among police personnel considering both the genders in India. This study shows that the occupational stress is very high among the police personnel in India. Our findings match with many other studies.[12-16] It was seen that operational stress is more in younger officers. This may be because most of the youngsters are in their initial years of police service. Operational and organisational stress were higher among lower level rank officials. This may be because these officials are directly dealing with the public, and involved in crime investigation and law and order maintenance. It was also seen that operational stress is more in female police personnel compared to males which may be due to the multiple roles that are expected by the society and performed by females without adequate support in Indian context. Few studies have found that working Indian women face significant job stress and a study conducted in the United Kingdom has found that job stress is higher among female police personnel.[17-19]

In the current study, among the respondents, 23% of them reported having physical illness such as hypertension, diabetes, renal problems, allergy, etc. The physical health issues may be related to their stressful job. These findings go along with the findings with other studies which have found that cardiac and metabolic disorders are higher among police personnel.[20-22]

With regard to the mental health issues, 29% of the police personnel had substance abuse. Alcohol and tobacco consumption are considered as the key unhealthy

behaviours that have wide implications for fitness and work performances.[23] A study conducted in India has showed that alcohol and smokeless tobacco chewing habits are higher among the policemen, and smokeless tobacco consumption was one of the risk factors for hypertension.[24] Four percentages of the respondents had diagnosed mental illness. This finding correlates with a study conducted in Italy which showed work related stress play a role in the development of mental health problems in police personnel and studies conducted in other countries have also proved that the occupational stress could be a significant risk factor for psychological distress among police personnel especially to develop post-traumatic symptoms.[25-27]

Presence of high occupational stress is an alarming situation which needs to be addressed immediately and has to be considered as a public health issue. The stress may directly affect their physical and mental health which may result in absenteeism and poor functioning. This, in turn, may affect the crime prevention and correctional services as well as their personal and familial life. Stress management programmes, periodic health checkup at the workplace, administrative solutions to reduce stress in job, special considerations for females as well as young officers are few recommendations to address this serious issue.

Conclusion

Police personnel undergo significant occupational stress. Stress is more among younger age groups, lower level rank police personnel, and in females. Physical and mental health issues are higher among them, which needs immediate attention from the concerned authorities. Structural changes are essential and gender specific stress reduction programmes are also recommended.

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