The levels of Depression, Anxiety and Stress in Police Officers

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ABSTRACT

The current survey was aimed at assessing the levels of depression, anxiety and stress in police officers of Khyber Pukhtoonkhwa, Pakistan. The query included 315 conveniently selected police officers from three districts of the province. Depression Anxiety and Stress Scale (Lovibond & Lovibond, 1995) was administered. The findings of the study revealed that the Police Officers had severe levels of depression and stress accompanied by extremely severe levels of anxiety.

Keywords: Depression; anxiety; stress; police; Pakistan

INTRODUCTION

Depression, anxiety and stress are the most commonly diagnosed psychological problems (Brown, Chorpita, Korotitsch & Barlow, 1997; Davies, Norman, Cortese & Malla, 1995; Farmer, 1998; Ollendick & Yule, 1990). Several studies have revealed that depression, anxiety and stress tend to produce several negative consequences in the workplace such as decreased performance and satisfaction (Cavanaugh, Boswell, Roehling & Boudreau, 2000; Greenberg, 1999; Poole, 1993; Seaward, 1999). The outcomes of depression, anxiety and stress are also associated with negative outcomes in other aspects of life, including general satisfaction (Kessler et al., 1994; Youngren & Lewinsohn, 1980), quality of life (Norvell, Hills & Murrin, 1993), and social interactions (Alden & Phillips, 1990; Davies et al., 1995). Researchers (Geller & Hobfoll, 1994; Eaton, Kessler, Wittchen & Magee, 1994; Fifer et. al, 1994; Lovibond, 1998) have suggested that each of these problems can be associated with decreased performance on the job, decreased satisfaction in the work environment, and poor interpersonal skills; which contribute to poor customer service, increased intention to leave, and impaired peer relations in the workplace.

Traditionally, it was believed that stress, anxiety and depression were separate constructs with varying etiologies and symptoms; however, the high co-morbidity rates, especially between anxiety and depression, have gained interest and attention throughout the field (Lovibond & Lovibond, 1995; Stavrakaki & Vargo, 1986; Dobson, 1985; Feldman, 1993). Some associations are also developed between stress and depression (Hammen, 1991; Kirkcaldy, Cooper & Ruffalo, 1995; Lazarus, 1984).

Stress in police officers and other law enforcement personnel is an inspiring area for the researchers. Law enforcement is constantly identified as one of the most stressful occupations (Burke, 1994; Carlier, Lamberts & Gersons, 1997; Kirkcaldy et al., 1995; Norvell et al., 1993). Police work is generally regarded as a highly stressful occupation (Violante, 1983). Policing is considered as the most psychologically dangerous profession worldwide (Axel & Valle, 1979). Police officers are frequently exposed to various traumatic situations ranging from threats to themselves and their colleagues, to witnessing riots, injuries or death of citizens, bombings, shootings, criminal activities and often fatal shootings of perpetrators (McCafferty, Godofredo, Domingo & McCafferty, 1990). They are required to operate in situations of conflict, apprehend violent criminals, and face hostile members of the public and
deal with the inevitable political pressures of public life (Violanti & Paton, 1999). Studies have linked various stressors of police work to psychological distress, depression, anxiety, alcoholism, burnout, cardiac disorders and suicide; as well as family and marital problems (Biggam, Power, & MacDonald, 1997; Kop, Euwema, & Schaufeli, 1999; Loo, 1999; Territo & Vetter, 1981; Violanti, 1992). Evidence also suggests that police officers are at increased risk for suicide (Violanti, 2004; Violanti, Castellano, O’Rourke, & Paton, 2006; Kposowa, 1999; Charbonneau, 2000; Daresburg et al., 2006; Hartwig and Violanti, 1999).

The current survey was designed to measure the levels of depression, anxiety and stress in police officers of the Khyber Pakhtunkhwa province of Pakistan as no such study existed earlier which could have measured the mental health of the understudied police officers.

**METHOD**

**Participants**

The research participants were 315 conveniently selected police officers. The participants belonged to districts of Peshawar, Abbottabad and Mardan of Khyber Pukhtoonkhwa province of Pakistan.

**Instrument**

*Depression, Anxiety and Stress Scale (Lovibond & Lovibond, 1995)*

The Depression, Anxiety and Stress Scale (DASS) comprises of 42 items. It is a self-report inventory that deals with three different but relevant factors i.e. depression, anxiety, and stress. Each of the three DASS scales contains 14 items, divided into subscales of 2-5 items with similar content. The Depression scale measures dysphoria, hopelessness, devaluation of life, self-deprecation, lack of interest/involvement, anhedonia, and inertia. The Anxiety scale measures autonomic arousal, skeletal muscle effects, situational anxiety, and subjective experience of anxious affect. The Stress scale is sensitive to levels of chronic non-specific arousal. It measures difficulty in relaxing, nervous arousal, and being easily upset/agitated, irritable/over-reactive and impatient. Respondents are asked to use 4-point severity/frequency scales to rate the extent to which they have experienced each state over the past week. Scores for Depression, Anxiety and Stress are calculated by summing the scores for the relevant items. Gamma coefficients that represent the weight of each scale on the overall factor (total score) are .71 for depression, .86 for anxiety, and .88 for stress. Anxiety and stress may weight higher than depression on the common factor as they are more highly correlated and, therefore, dominate the definition of this common factor (Lovibond and Lovibond, 1995). Reliability of the three scales is considered appropriate and test-retest reliability is similarly considered adequate with .71 for depression, .79 for anxiety and .81 for stress (Brown et al., 1997). Exploratory and confirmatory factor analyses have sustained the proposition of the three factors (p < .05; Brown et al., 1997). The DASS anxiety scale correlates .81 with the Beck Anxiety Inventory (BAI), and the DASS Depression scale correlates .74 with the Beck Depression Scale (BDI).

**Procedure**

After acquiring a written permission from the Inspector General of the Frontier Police Force, the participants of the research were individually approached by the researcher in three districts of the province i.e. Peshawar, Abbottabad and Mardan. The officers in-charge of different police stations facilitated the research procedure. The participants were informed about the purpose of the study and their consent to participate was obtained. The participants responded to the instrument in individual settings and the issues of confidentiality and secrecy were also made clear to them. Demographic information was collected after
establishing a satisfactory level of rapport with them. This information did not include their identities. The instructions which were already mentioned in the instrument were also made clear to them. The researcher was available for the respondent in case the respondent needed help in translating / understanding difficult words. The subjects and the facilitators were acknowledged for their cooperation. The scores obtained were analyzed using the Statistical Package for Social Sciences (SPSS).

RESULTS
In order to estimate the internal consistency of Depression, Anxiety and Stress Scale, the following analyses were made:

Table 1. Cronbach’s Alpha reliability of Depression, Anxiety and Stress Scale and its sub scales

<table>
<thead>
<tr>
<th>Scale</th>
<th>No. of Items</th>
<th>Alpha</th>
</tr>
</thead>
<tbody>
<tr>
<td>DASS overall</td>
<td>42</td>
<td>.910</td>
</tr>
<tr>
<td>Depression</td>
<td>14</td>
<td>.782</td>
</tr>
<tr>
<td>Anxiety</td>
<td>14</td>
<td>.741</td>
</tr>
<tr>
<td>Stress</td>
<td>14</td>
<td>.768</td>
</tr>
</tbody>
</table>

The Depression, Anxiety and Stress Scale (DASS) is found reliable by measuring its reliability on Cronbach’s alpha whereas the Cronbach’s alpha reliability for the overall scale is excellent (.910); and for its subscales i.e. depression (.782), anxiety (.741), and stress (.768) is acceptable.

In order to measure the overall levels of depression, anxiety and stress among the police officers; their scores were calculated as under:

Table 2. Means and Interpretation of the overall scores of the police officers on Depression, Anxiety & Stress Scale (DASS)

<table>
<thead>
<tr>
<th>Category</th>
<th>N</th>
<th>M</th>
<th>Interpretation on DASS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>315</td>
<td>22.00</td>
<td>Severe Depression</td>
</tr>
<tr>
<td>Anxiety</td>
<td>315</td>
<td>23.33</td>
<td>Extremely Severe Anxiety</td>
</tr>
<tr>
<td>Stress</td>
<td>315</td>
<td>23.30</td>
<td>Severe Stress</td>
</tr>
</tbody>
</table>

The above table shows severe levels of depression (M=22.00 i.e. interpreted on DASS as Severe Depression) anxiety (M=23.33 i.e. interpreted on DASS as Extremely Severe Anxiety) and stress (M=23.30 i.e. interpreted on DASS as Severe Stress) among the police officers on Depression, Anxiety and Stress Scale.

DISCUSSION
The current survey was aimed at measuring the levels of depression, anxiety and stress in the police officers of Khyber Pakhtunkhwa Pakistan. The instrument applied was found excellently reliable. The findings projected Severe Depression, Extremely Severe Anxiety and Severe Stress in the understudied police officers.
The findings of the current study were in aligning with the similar studied conducted in other parts of the world. Researchers have been inclined to explore the relationship between psychosocial job factors and depression, anxiety and stress (Karasek, 1979; Kawakami et al., 1996). Depression, anxiety and stress have been considered as significant outputs in stressful working settings (Bennett, Williams, Page, Hood & Woollard, 2004; Caplan, 1994). Policing is commonly considered as the most stressful and remarkably difficult careers. Officers are documented to suffer from very high levels of stress through performing work that is both physically and emotionally demanding (Dick, 2000; Gershon, Barocas, Canton, Li & Vlahov, 2009; He, Zhao & Ren, 2005; Kopel, & Friedman, 1999; Morash & Haarr, 1995; Schwartz & Schwartz, 1981). Historically, the objective of police is to protect life and property. This role is linked with many challenges such as fighting and prevention of crimes. These roles and responsibilities expose police officers to different work situations which require different physical and mental ability (Alkus & Padesky, 1983; Anshel, 2000; Morash, Haarr, & Kwak, 2006) to deal with confidently and effectively. Researchers argue that police officers remain exposed to a variety of stressful situations which impact negatively on their health and performance (Gibbons & Gibbons, 2007; He, Zhao & Archbold, 2002; Malach-Pines & Keinan, 2007). Furthermore, the police possess a huge amount of discretion that requires them to make difficult decisions about arresting certain individuals or even using deadly force (McCarty, Zhao & Garland, 2007; Malach-Pines & Keinan, 2007). The highest level of associated stress are related to organizational factors such as management style, poor communication, lack of support, inadequate resources and work overload (Kop, Euwema, & Schaufeli, 1999).

CONCLUSION

With special reference to the easily observable difficulties in the departmental system of the understudied police officers, it was a general belief too that the police force was under severe workload. This workload was usually considered unrewarding by the police and reduces the levels of job satisfaction among them. Insufficient remuneration and disrespect from the society were the two major stressors which were found while conducting additional interviews with officers of different ranks. The study has suggested the police department to incorporate the services of professional Clinical Psychologists to keep the officers’ mental health at adequate levels.
REFERENCES


