# Occupational Stress among the Women Police Officers in Southern India

### K. Rajamahendran\*

PhD Research Scholar, Department of Commerce, Sethupathy Govt. Arts College, Ramanathapuram, (Affiliated to Alagappa University), Tamil Nadu, India.

#### K. Muthalagu

Assistant Professor in Commerce, Department of Commerce, Sethupathy Govt. Arts College, Ramanathapuram (Affiliated to Alagappa University), Tamil Nadu, India.

\*Corresponding Author Email: isiva84@gmail.com

# INTRODUCTION

Law enforcement is one of the most stressful professions, marked by a set of unique occupational challenges that make policing exceptionally demanding (Peñalba, McGuire & Leite, 2008). Police officers routinely face physical danger, extended working hours, rapid decision-making pressures, and considerable emotional strain. Factors such as negative work environments, limited family time, unhealthy lifestyle habits, sleep deprivation, conflicts with superiors, and inadequate living conditions contribute significantly to occupational stress (Waters & Ussery, 2007; Keinan & Malach-Pines, 2007). These conditions are compounded by a lack of institutional support and the societal expectation for police personnel to uphold public order under all circumstances (Backman et al., 1997).

Occupational stress in policing has been linked to various adverse outcomes, including physical illness, mental health challenges, and diminished job satisfaction. The consequences often manifest in fatigue, depression, irritability, and decreased work performance, with potential long-term effects on individual well-being and public safety (Sundaram, Sekar &Subburaj, 2014). Stress within law enforcement is not just a personal burden; it becomes an institutional and public concern when it affects performance and morale (Lakshminarayanan, 2017).

Particularly in India, the psychological impact of policing is insufficiently addressed by policy frameworks or healthcare systems. Moreover, women in policing, while increasingly represented, face additional stressors due to societal expectations and inadequate institutional support (Geetha et al., 2020). This study aims to assess the prevalence of occupational stress—both operational and organizational—among women police personnel and to explore the underlying causes from their lived experiences.

## **REVIEW OF LITERATURE**

Occupational stress among police personnel has been extensively studied across global contexts, with researchers highlighting the multidimensional nature of stress in law enforcement roles. Holt (1993) and Spector (1997) emphasized that heightened job stress significantly reduces job satisfaction and negatively affects performance. Tett and Meyer (1993) observed that job satisfaction is closely linked to employee commitment and turnover intentions, indicating how crucial stress management is for organizational sustainability.

Waters and Ussery (2007) identified operational stressors as those directly related to field duties—such as confronting violence, making life-altering decisions under pressure, and exposure to traumatic events. Organisational stressors, on the other hand, stem from institutional structures and hierarchies, including lack of resources,

**Abstract:** This study examines occupational stress among women police officers in Southern India, focusing on operational and organisational stress factors. Law enforcement is a highly stressful profession, and female officers, who often juggle societal and professional roles, are particularly susceptible to elevated stress levels. A cross-sectional survey involving 50 female police officers was conducted using a pre-tested semi-structured questionnaire to assess perceived stress levels and its sources. The study reveals that 90% of participants reported high operational stress, while 80% experienced high organisational stress. The most significant stressors identified were staff shortages, bureaucratic red tape, excessive administrative duties, and difficulty maintaining physical health. The findings highlight the urgent need for addressing occupational stress as a public health issue, as it impacts both the wellbeing of officers and their professional efficiency. The study suggests implementing stress management programs, periodic health check-ups, and providing special considerations for female officers. These measures could significantly enhance officer health and contribute to a more efficient and sustainable police force.

**Keywords:**Women Police Officers, Occupational Stress, Organisational& Operational Stress.

inadequate leadership, bureaucratic red tape, and inconsistent policies (McCreary & Thompson, 2006).

Backman et al. (1997) noted that physical symptoms such as fatigue and sleep disturbances often co-occur with psychological stress among police personnel. These stressors also impact interpersonal relationships, both within and outside the workplace, compounding the effects of occupational strain. Bezerra et al. (2013) further highlighted how chronic stress can lead to long-term health issues, absenteeism, and reduced productivity.

Research by Kirkcaldy and Furnham (1995) revealed that female police officers frequently encounter higher stress levels due to societal role expectations, lack of gender-sensitive workplace policies, and balancing family obligations with professional duties. Geetha et al. (2020) supported this view, noting the additional psychological burden on women in male-dominated work environments. Despite growing awareness, Sivakumar (2016) found limited empirical studies on this topic in the Indian context, suggesting an urgent need for focused research on occupational stress among Indian policewomen.

The literature thus provides a strong foundation for examining the multifaceted stress experiences of female police officers, particularly in operational and organisational domains.

# RESEARCH METHODOLOGY

This study employed both quantitative and qualitative approaches and was designed as a cross-sectional study conducted among female police officers serving in various police stations across southern India. A total of 50 participants were selected using a simple random sampling technique. Each selected officer was formally informed about the study through internal communication, and written informed consent was obtained prior to participation. Data were collected using a pre-tested, semi-structured questionnaire. The first section of the questionnaire collected personal and socio-demographic information, while the second section assessed levels of occupational stress. Associations between variables were tested using the Chisquare test for categorical data, and the t-test or ANOVA was used for continuous variables.

# **FINDINGS**

Table 1: Socio-Demographic and Health Profile of Women Police Officers

omen i once omeers				
Variable	Category/Value	n (%) / M ean ± SD		
D esign ation	Civil Police Officers	48 (96%)		
	Sub-Inspectors	2 (4%)		
Age	Mean Age	41.08 ± 5.012 years		
Socio-economic Status	Middle Class	31 (62%)		
Educational Qualification	Degree or Higher	50 (100%)		
M arital S ta tu s	M arried	46 (92%)		
	U nm arrie d	3 (6%)		
	Divorced	1 (2%)		
Work Experience	Average Duration	10.03 ± 5.16 years		
	None	43 (86%)		
Com orbid	Bronch ial Asthma	5 (10%)		
Conditions	Diabetes Mellitus	2 (4%)		
	Thyroid Disorders	2 (4%)		
Sleep Duration (<6 hours/day)	Yes	39 (78%)		
Continuous Sleep at Night	Yes	16 (32%)		

The study (Table.1) included 50 women police officers, of whom 48 (96%) were Civil Police Officers and 2 (4%) were Sub-Inspectors. The mean age of the participants was 41.08 years (SD = 5.012), with the majority (62%) belonging to the middle socioeconomic class. All participants had attained an educational qualification of a degree or higher. Most of the respondents (92%, n = 46) were currently married, while 6 percent were unmarried and 2 percent divorced. The average duration of work experience among participants was 10.03 years (SD = 5.16). Regarding health status, 86 percent reported no comorbid conditions. Among the rest, 10 percent (n = 5) had bronchial asthma, while 4 percent each reported diabetes mellitus and thyroid disorders. In terms of sleep patterns, 78 percent of the officers reported getting less than six hours of sleep per day, and only 32 percent indicated they were able to sleep continuously through the night.

Table 2. Distribution of Participants by Occupational Stress Levels

Occupational Stress	Levelof Stress (n %)		
	Low	Moderate	High
Organisational stress	8 (16%)	19 (38%)	23 (46%)
Operational stress	6 (12%)	14 (28%)	30(60%)

Table 2 and Figure 1 presents the analysis of organisational and operational stress levels among the participants. It was observed that 38% of the respondents experienced moderate organisational stress, while 46% reported high levels of stress. In contrast, when assessing operational stress, a significantly higher proportion 60% reported high stress, with 28% experiencing moderate stress.

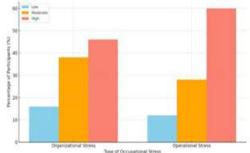


Figure1:Respondents Occupational Stress Levels Table3.Distribution of Organisational Stress Factors Based on Participant Responses

O r gan isationalstressors	Reported stress (moderate& above) %
Bureaucraticredtape	7 8
Staffshortages	7 6
Administrative burden	7 2
In a de quate e quip m e n t	6 4
Internalinvestigations	6 0
Feeling compelled to work beyond scheduled hours	6 2
Regular updates to laws and procedures	5 6
Imbalanced distribution of tasks	5 8
D ealing with the courtsystem	5 8
L ack oftrainin gonnew equipment	5 6
In consistentle adership style	5 4
T oom uch computerwork	5 0
O vercritical leaders hip approach	5 2
Lackofresources	5 2
Responsibility for work outcomes	4 4
When you are ill or injured, your coworkers appear to treat you with disdain	4 2
Dealingwithco-workers	3 2

Table 3 highlights the prevalence of various organisational stressors among women police officers, with a focus on those reporting moderate or higher levels of stress. The findings reveal that bureaucratic red tape is the most frequently reported stressor, with 78% of participants experiencing significant stress due to excessive procedural formalities and rigid institutional processes. This is closely followed by staff shortages (76%) and administrative burden (72%), indicating that resource constraints and workload burden are major concerns. Other prominent stressors include inadequate equipment (64%), feeling compelled to work beyond scheduled hours (62%), and internal investigations (60%), all of which reflect systemic challenges in organisational support, fairness, and operational efficiency. More than half the participants also reported stress due to regular updates to laws and procedures (56%), lack of training on new equipment (56%), and imbalanced distribution of tasks (58%), suggesting instability in the work environment and gaps in professional development. Interestingly, responsibility for work outcomes (44%), illness-related stigma from coworkers (42%), and interpersonal challenges with colleagues (32%), indicating that while personal interactions and accountability contribute to stress, they are less significant compared to structural and procedural issues. Overall, the data underscores the need for systemic reforms, improved staffing, better resource allocation, and supportive leadership practices to alleviate organisational stress among women police officers.

Table4. Operational Stressors and the Percentage of Participants Reporting Them

O perational stressors	Reported stress (moderate & above) %	
Occupation related health issues		
Finding time to stay in good Physical condition	7.4	
Feeling like always on the job	66	
Balancing personal and social commitments	66	
Fatigue	66	
Lack of understanding from family and friends about work	66	
Public criticism and disapproval	60	
Over time demands	62	
Limited personal time for social and family interactions	60	
Stigma associated with the job affects friends and family	60	
Exposure to occupational hazards	62	
Engagement in work tasks on personal days	58	
Traumatic events	52	
Limitations to social life	50	
Working alone at night	46	
Shift in work	46	

Table 4 presents a comprehensive overview of the operational stressors experienced by women police officers, highlighting the proportion of participants who reported moderate or higher levels of stress in each area. The most frequently reported operational stressors were occupation-related health issues and difficulty maintaining physical fitness, each cited by 74% of respondents. This reflects the physically and mentally demanding nature of police work, which often leaves little room for self-care or preventive health measures. A significant proportion of participants (66%) reported feeling constantly on duty, struggling with fatigue, balancing personal and social commitments, and experiencing a lack of understanding from family and friends about their professional responsibilities.

These findings suggest a major blurring of boundaries between personal and professional life, leading to emotional and physical exhaustion. Stress arising from overtime demands (62%), occupational hazards (62%), and public criticism and disapproval (60%) further indicates the highpressure environment in which these officers operate. Equally, 60% of the participants reported that limited personal time for social and family interactions associated with their job impacted their personal relationships, showing how operational stressors extend beyond the workplace. Moderate stress levels were also associated with work on off days (58%), traumatic events (52%), and limitations on social life (50%), suggesting long-term psychological consequences. Lower, but still notable, percentages were seen for working alone at night (46%) and shift work (46%), which reflect the challenges of non-traditional work hours.

Overall, the findings emphasise the cumulative impact of operational stressors that affect not only the officers' professional performance but also their physical health, emotional well-being, and social relationships. Addressing these issues requires organisational strategies that promote work-life balance, provide mental health support, and reduce the extended demands placed on officers during off-duty hours.

Table 5. Association between selected Socio-Demographic and Health Variables with Organisational and Operational Stress

Variables	Test of significance	P Value	
		Organisational stress	Operational stress
Age (>40 years)	Chi square test	0.632	0.298
Socio Economic Class	Chi square test	0.492	0.428
Service duration	T test	0.548	0.697
Physical illness	Chi square test	0.125	0.119

Table 5 presents the results of statistical tests examining the association between selected socio-demographic and health-related variables and two types of occupational stress: organisational stress and operational stress. The tests of significance included the Chi-square test for categorical variables and the t-test for continuous variables. A p-value of less than 0.05 was considered statistically significant.

The analysis revealed no statistically significant associations between any of the variables and the reported levels of organisational or operational stress among the participants.

- · Age (>40 years) showed no significant relationship with either organisational stress (p = 0.632) or operational stress (p = 0.298).
- $\cdot$  Socioeconomic class also did not exhibit a significant association with stress levels (p = 0.492 for organisational stress, p = 0.428 for operational stress).
- · Duration of service, analysed using a t-test, was not significantly related to either form of stress (p = 0.548 for organisational, p = 0.697 for operational).
- · Although physical illness approached significance in in relation to organisational stress (p = 0.125), it did not meet the conventional threshold, and thus cannot be considered statistically significant. The association with operational stress was also non-significant (p = 0.119).

These findings suggest that stress levels among women police officers in this study were not significantly influenced by age, socioeconomic status, service duration, or the presence of physical illness, indicating the pervasive nature of occupational stress across different personal and professional backgrounds.

# **RESULTS AND DISCUSSION**

Policing is widely recognised as a highly stressful profession due to its unique stressors, which can disrupt an individual's psychological and physiological balance, leading to dysfunctional behaviour in the workplace. The present study also found a significantly high prevalence of occupational stress, with 88 percent of participants reporting operational stress (72% high stress and 24% moderate stress) and 82 percent reporting organisational stress (44% each for high and moderate stress). This prevalence is notably higher than the figures reported by Ragesh et al. (2017), who found organisational stress at 74 percent (66% moderate and 18% high) and operational stress at 84 percent (68% moderate and 18% high). The disparity could be attributed to the current study's exclusive focus on female police officers. Previous research by Berg et al. (2006) and Acquadro et al. (2015) indicated that female police officers tend to report higher stress levels than their male counterparts. The findings of this study revealed that operational stress was more prevalent than organisational stress, which contrasts with the conclusions of Gershon et al. (2002) and Brooks and Piquero (1993), who found administrative or organisational stress to be more prominent than operational stress

Additionally, the current study found no statistically significant correlation between years of service and stress levels, unlike several prior studies which reported that employees with more years of experience typically experience lower stress levels than their less experienced peers. The reported staff shortages and subsequent increased administrative duties as major contributors to organisational stress highlight a critical issue. Furthermore, the negative public perception of the police force, coupled with stigma from family and friends, was identified as a significant source of operational stress, raising concerns about the well-being of police officers.

The presence of high levels of occupational stress is a critical concern that requires immediate attention and should be treated as a public health issue. This stress can directly impact both physical and mental health, leading to absenteeism and decreased performance. Consequently, it can undermine crime prevention and correctional services, as well as affect officers' personal and family lives. To address this serious issue, it is recommended to implement stress management programs, conduct periodic health checkups at the workplace, introduce administrative measures to reduce job-related stress, and provide special considerations for female officers and younger staff.

### CONCLUSION

The findings from this study conducted among female police officers further support the notion that policing is linked to high levels of stress. The prevalence of perceived organisational and operational stress was alarmingly high, at 80 percent and 90 percent, respectively. This necessitates urgent attention from authorities, as occupational stress can severely affect the physical, mental, and social well-being of officers, as well as their professional lives.

# RECOMMENDATIONS

- · All individuals identified as experiencing occupational stress in this study should be closely monitored and provided with expert medical care.
- · Police personnel should be educated about the potential consequences of occupational stress.

· Recognising the severity of the issue, authorities must make efforts to identify and address occupational stress among female police officers to enhance their overall health and contribute to a healthier workforce.

#### REFERENCES

- 1. Acquadro Maran D., Varetto A, Zedda M., & Ieraci, V. (2015). Occupational stress, anxiety and coping strategies in police of ficers. *Occup Med*, 65(6), 466-73.
- 2. Backman, L., Arnetz BB., Levin D., & Lublin, A. (1997). Psychophysiological effects of mental imaging training for police trainees. Stress Med. 13, 43-8.
- 3. Berg, AM., Hem, E., Lau B., & Ekeberg (2006). An exploration of job stress and health in theNorwegian police service: a cross-sectional study. *J Occup Med Toxicol*, 1(1), 26.
- 4. Bezerra C de M, Minayo MC de S, & Constantino P. (2013). Occupational stress among female police officers. *Cienc Saude Coletiva*, 18(3), 657–66.
- 5. Brooks, L.W., Piquero, A., Cronin, J. (1993). Police Officer Attitudes Concerning Their Communities and Their Roles: A Comparison of Two Suburban Police Departments. *Am J Police*, *12*(3), 115-39.
- 6. Brown, J., Cooper C., & Kirkcaldy, B. (1996). Occupational stress among senior police officers. *Br J Psychol Lond Engl, 87*(1), 31-41.
- 7. Geetha, S., Manimekalai, K., & Sivakumar, I. (2020). Psychosocial Well-being of Working Mothers in Sivaganga District of Tamil Nadu. International Journal of Psychosocial Rehabilitation,24(1), 257–262.
- 8. Gershon, RRM., Lin, S., & Li, X. (2002). Work stress in aging police officers. J Occup Environ Med, 44(2), 160–7.
- 9. Hellman, CM. (1997). Jobsatisfactionandintenttoleave. JSocPsychol, 137, 677-89
- 10. Holt, RR. (1993). Occupational stress. In: L. Goldberger & S. Breznitz (eds). *Handbook of stress: theoretical and clinical aspects (page* 342-67). New York: Free Press.
- 11. Keinan, G., & Malach-Pines, A. (2007). Stress and burnout among prison personnel:sources,outcomes,andinterventionstrategies. *Crim Justice Behav*, 34, 380-98.
- 12. Kirkcaldy, BD, & Furnham, A. (1995). Coping, seeking social support and stress among German police officers. *Eur Rev Appl Psychol*, 45, 237-46.
- 13. Lakshminarayanan, R. (2017). An overview of strategic planning to combat occupational stress need of the hour in the present Indian context. Pune, Maharashtra: National Institute of Virology, Indian Council of Medical Research. https://iitk.ac.in/infocell/announce/convention/papers/Context%20and%20Human%20Resource-05-R%20Lakshminarayanan.pdf.
- 14.McCreary, DR., & Thompson, MM. (2006). Development of two reliableand valid measures of stressors in policing: the Operationaland Organisational Police Stress Questionnaires. *Int J Stress Manag*, 13, 494-518.
- 15. Peñalba, V., McGuire, H., & Leite, JR. (2008). Psychosocial interventions for prevention of psychological disorders in law enforcement officers. *Cochrane Database Syst Rev, 3*, CD005601.
- 16. Ragesh, G., Tharayil, HM., TP Meharoof Raj, Philip M, & Hamza, A. (2017). Occupational stress among police personnel in India. *Open J Psychiatry Allied Sci*, 8, 148-52.
- 17. Sivakumar, I. (2016). Gender Mainstreaming as a Tool for Women Empowerment. *Indian Journal of Women's Studies*, 9(1), 53-59.
- 18. Spector, PE. (1997). Jobsatisfaction: application, assessment, causes, and consequences. California: Sage.
- 19. Sundaram, MS., Sekar, M., & Subburaj, A. (2014). Occupational stress coping on policing reference to grade III police constables. *International Journal of Business Management & Research*, 4(3), 9-50.
- 20. Tett,RP.,&Meyer,JP. (1993). Job satisfaction, organisational commitment, turnover intention, and turnover: path analyses based on meta- analytic findings. *Pers Psychol*, 46, 259-93.
- 21. Tharkar, S., Kumpatla, S., Muthukumaran, P., & Viswanathan, V. (2008). High prevalence of metabolic syndrome and cardiovascular risk among police personnelcomparedtogeneralpopulationinIndia. *J Assoc Physicians India*, *56*, 845-9.
- 22. Water, JA., & Ussery, W. (2007). Police stress: history, contributing factors, symptoms, and interventions. *Policing*, 30, 169-88.