

Relationship between Occupational Stress and Psychological Wellbeing of Police Officers in Mbeere South Sub-County, Embu County, Kenya

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ABSTRACT

This study aimed to investigate the relationship between occupational stress and psychological well-being among police officers in Mbeere South Sub-County, Embu County, Kenya. The objectives of the study were to: find out the levels of occupational stress, determine the levels of psychological well-being, assess the relationship between occupational stress and psychological wellbeing, and investigate interventions to mitigate occupational stress among police officers in Mbeere South Sub-County, Embu County, Kenya. The study was informed by Job Demands-Resources (JD-R) Model and Person-environment Fit theory. The study employed mixed-method cross-sectional research design. The target population was 280 police officers in Mbeere South Sub-County. The study sample size was 162 police officers which was calculated using Cochran's formula. Multi-stage sampling approach was used where stratified sampling was used to categorize police officers in the five wards and simple random sampling technique was used to select the sample from the five Wards to reflect the diversity of the target population and minimize selection bias. The quantitative data was collected using Police Stress Questionnaire (PSQ) and WHO-5 Wellbeing Index. Qualitative data was collected using Key Informant Interview Guide and Focus Group Discussion Guide. Respondents in interviews (10) and FGDs (40, 8 from each ward) were selected using purposive sampling. A pilot study was conducted involving a sample of 10 police officers from Mbeere South Sub-County who were not included in the main study. The quantitative data was analyzed using descriptive and inferential statistics. Correlation analysis, ANOVA, and regression analysis were employed to establish relationships and differences between key variables. Tables were used to present the findings. Statistical software (SPSS version 25) was used to aid in the analysis. Qualitative data was analyzed thematically using Nvivo to identify common patterns or themes related to occupational stressors, psychological wellbeing, and coping strategies among police officers. The study found that 53.3% of officers were experiencing severe stress driven by both organizational (54.7%) and operational (58.7%) factors. Psychological well-being was generally poor, with only 37.3% reporting good well-being and 42.7% indicating poor well-being, suggestive of potential depression or severe distress. However, no significant linear relationship was observed between occupational stress and well-being (organizational: $r = -0.024$, $p = .767$; operational: $r = -0.105$, $p = .201$), with the model explaining just 1.5% of variance. Reported interventions, including mindfulness, exercise, meditation, yoga, and family coherence, were neither widely accessible nor rated as highly useful, with the most common options, mindfulness (57.3%) and exercise (56.0%), often perceived as only "little useful." This study recommends that the National Police Service should develop targeted stress reduction initiatives addressing both organizational and operational sources of stress, such as improving workflow efficiency, reducing unnecessary administrative burdens, and providing adequate operational resources.

Keywords: occupational stress, psychological wellbeing, police officers

INTRODUCTION

Policing is globally recognized as one of the most psychologically demanding professions, characterized by exposure to trauma, critical incidents, and chronic organizational pressures (Syed et al., 2020; Violanti et al., 2017). The cumulative effect of these occupational stressors poses a significant threat to the psychological wellbeing of law enforcement officers, manifesting in increased rates of depression, anxiety, post-traumatic stress disorder (PTSD), and burnout (Purba & Demou, 2019). While this is a global concern, the context of

policing in low-resource settings, particularly in sub-Saharan Africa, introduces unique challenges such as understaffing, inadequate equipment, and limited access to mental health services (Adekanmbi & Ukpere, 2022; Ndero et al., 2024).

In Kenya, the psychological burden on police officers is severe. Alarming rates of suicide, homicide, and psychological disorders have been reported within the service (Ndero, 2024a). National estimates suggest approximately 20,000 officers suffer from psychological disorders, with an average of 13 murders and 11 suicides reported annually between 2016 and 2020 (Ndero, 2024a). This crisis is exacerbated by a critical lack of structured mental health support systems and a cultural stigma that discourages help-seeking behaviour (Muthondeki et al., 2014; Wango, 2018). Yet despite the magnitude of the problem, empirical research has largely concentrated on urban centers such as Nairobi and Nakuru, leaving the unique challenges faced by officers in rural postings insufficiently explored.

Rural police officers, such as those in Mbeere South Sub-County, face a distinct set of challenges. These include geographic isolation, heightened community-police tensions, profound resource constraints, and even less access to psychological support than their urban counterparts (Ndero, 2024a). The combination of high operational demands and organizational limitations creates a challenge for deteriorating mental health, yet their experiences remain largely undocumented and unaddressed. This study, therefore, seeks to fill this critical gap by providing a detailed, localized investigation into the relationship between occupational stress and psychological wellbeing among police officers in Mbeere South Sub-County, Kenya. Guided by the Job Demands-Resources (JD-R) model (Bakker & Demerouti, 2017) and Person-Environment Fit Theory (Van Vianen, 2018), this research moves beyond a simple correlation to explore the levels, lived experiences, and coping mechanisms that define officers' mental health in this under-researched context.

Statement of the Problem

The psychological wellbeing of police officers in Kenya is a pressing public health and organizational concern. Despite the known risks associated with policing, there is a dearth of empirical, context-specific data on the mental health of officers stationed in rural areas like Mbeere South Sub-County. Prior studies have established the traumatic nature of police work in Kenya (Ndero, 2024b; Wango, 2018) but have generalized findings at a national level, often relying on descriptive accounts rather than robust, mixed-methods data. Consequently, the levels of occupational stress, its relationship with psychological wellbeing, and the usefulness of existing mitigation strategies in this rural context remain unknown. Without this localized evidence, interventions and policies are likely to be misinformed and ineffective. This study addresses this problem by empirically investigating the dynamics of occupational stress and psychological wellbeing among rural police officers, providing evidence crucial for designing targeted interventions and informing national policy on officer welfare.

Objectives

The primary objectives of this research were:

1. To determine the levels of occupational stress among police officers in Mbeere South Sub-County.
2. To assess the levels of psychological wellbeing among these officers.
3. To evaluate the relationship between occupational stress and psychological wellbeing.
4. To investigate the interventions used to mitigate occupational stress and their perceived usefulness.

LITERATURE REVIEW

Occupational stress in policing is a well-documented phenomenon globally. The Job Demands-Resources (JD-R) model provides a robust framework for understanding it, positing that strain arises when job demands (e.g., workload, trauma) exceed available job resources (e.g., support, autonomy) (Bakker & Demerouti, 2017). Studies consistently show that police officers exhibit higher rates of mental health disorders than the general population. A meta-analysis by Syed et al. (2020) found notable rates of depression (14.6%), PTSD (14.2%), and anxiety (9.6%) among officers worldwide, with organizational factors like lack of support being significant contributors.

In Africa, the picture of occupational stress is equally concerning. Research in Nigeria has highlighted poor working conditions and gender-specific stressors as major issues (Adegoke, 2014; Wakil, 2015). In Kenya, studies in urban areas like Nairobi and Nakuru have identified organizational factors, such as excessive workload, long hours, and poor management, as key drivers of stress (Biwott et al., 2023; Jonyo, 2015; Oweke et al., 2014). Furthermore, Ndero et al. (2024) linked occupational stress to severe outcomes, including assault, suicide, and homicide within the service.

Psychological wellbeing, conceptualized as a positive state of mental health and functioning, is severely compromised by these stressors. Violanti et al. (2017) emphasized that organizational stress often has a stronger negative impact on health than operational stress. In Kenya, Muthondeki et al. (2014) found that over half of the officers studied experienced chronic fatigue, yet very few accessed available employee assistance programs.

A critical review of the literature reveals a significant gap: the absence of studies focused on rural Kenyan police officers. The unique stressors of rural policing, isolation, resource scarcity, and community dynamics, are not captured in urban-centric research. Furthermore, while many studies establish a correlation between stress and poor wellbeing, few explore the potential buffering factors that might explain why some officers remain resilient despite high stress, a gap this study aims to address.

METHODOLOGY

Research Design

This study employed a concurrent mixed-methods cross-sectional design. This approach was ideal for capturing occupational stress and wellbeing levels as they are at that particular moment while simultaneously gathering rich qualitative data on the lived experiences and contextual factors underlying the statistical trends (Creswell & Plano Clark, 2018).

Participants and Sampling

The target population was 280 active-duty police officers across Mbeere South Sub-County. Using Cochran's formula for finite populations, a sample size of 162 officers was determined. A multi-stage sampling approach was used: first, stations were stratified by ward ($n=5$), and then officers were selected from each stratum using simple random sampling. For the qualitative component, 15 officers were purposively selected for interviews and focus group discussions (FGDs) to ensure representation across rank, gender, and years of service.

Data Collection Instruments

Quantitative data were collected using two standardized instruments:

1. **Police Stress Questionnaire (PSQ):** A 40-item scale measuring stress from organizational (20 items) and operational (20 items) sources on a 7-point Likert scale (McCreary & Thompson, 2006). Scores are categorized as low (20-39), moderate (40-90), or severe (91-140) stress.
2. **WHO-5 Wellbeing Index:** A 5-item scale measuring subjective psychological wellbeing over the previous two weeks on a 6-point Likert scale. Raw scores (0-25) are converted to a 0-100 scale, with scores ≤ 48 indicating "poor wellbeing" (Topp et al., 2015).

Qualitative data were collected using semi-structured Key Informant Interview (KII) and FGD guides. These explored experiences of stressors, coping mechanisms, available support, and suggestions for interventions.

Data Analysis

Quantitative data were analyzed using SPSS Version 25. Descriptive statistics (frequencies, means, standard deviations) summarized the data. Inferential statistics (Pearson's correlation and multiple regression analysis) were used to examine relationships between variables. Qualitative data were transcribed verbatim and analyzed using thematic analysis using NVivo software. Thematic analysis followed the process outlined by Braun and Clarke (2006), involving familiarization, coding, theme generation, and interpretation.

Ethical Considerations

Ethical approval was obtained from Tangaza University and the National Commission for Science, Technology, and Innovation (NACOSTI). Permission was also secured from the Kenya Police Service. All participants provided written informed consent. Confidentiality was maintained through anonymization, and participants were informed of their right to withdraw. Referral information for counseling services was provided.

RESULTS

Demographic Characteristics

The sample (N=150) was predominantly male (62.7%) with a mean age in the 36–41 range (28.0%). Most participants were Constables (72.0%) with over 16 years of service (48.0%), reflecting a seasoned but frontline-heavy cohort. Qualitative accounts confirmed that long service years often came with stagnation and frustration, as illustrated by one officer: *“I’ve done all required exams but have been stagnated in the same rank for 12 years”* (PO2).

Levels and Sources of Occupational Stress

Quantitative results showed that 53.3% experienced severe overall stress, with organizational stressors (54.7%) and operational stressors (58.7%). The most pressing stressors were lack of time for family (M=5.53), feeling unappreciated (M=5.28), and favoritism (M=5.15). Qualitative findings provided texture to these numbers: officers spoke of *“no leave taken... we’re either clerks, guards, or on patrol 24/7”* (FGD1-PO4), and described favoritism and office politics as crushing to morale. Operational stressors were echoed in traumatic narratives, such as *“We collected our colleague’s scattered body parts after an ambush. It was dehumanizing”* (FGD2-PO4).

Levels of Psychological Wellbeing

Wellbeing levels were low, with 37.3% of officers scoring in the “good wellbeing” range, while 42.7% scored ≤ 48 , indicating poor wellbeing and likely depression risk. Low scores were particularly evident in lack of interest (M=2.39) and inability to relax (M=2.55). Qualitative voices reinforced this bleak picture: *“Mental health support is only at the regional level. Nothing exists where we are”* (FGD3-PO1).

Stress–Wellbeing Relationship

Statistical analysis revealed no significant linear correlation between stress and wellbeing (organizational stress: $r = -0.024$, $p = .767$; operational stress: $r = -0.105$, $p = .201$). The weak relationship ($R^2 = .015$) suggests other mediating factors. Thematic data helped explain this complexity: despite overwhelming stress, some officers reported adaptive coping strategies such as spirituality, *“Spirituality and religion are my main sources of comfort”* (FGD1-PO3), and strong peer support: *“We only have each other to lean on”* (FGD3-PO2). These resilience factors likely buffered the direct link between stress and wellbeing.

Interventions and Coping Mechanisms

Quantitatively, mindfulness-based interventions (57.3%) and exercise (56.0%) were most reported, yet their usefulness was rated low. In contrast, yoga and family coherence had higher perceived usefulness, though uptake was minimal (12–15%). Qualitative insights clarified this paradox: institutional wellness programs were dismissed (*“Supervisors don’t care”* FGD3-PO2), while informal coping strategies such as peer solidarity and spirituality were highly valued. Officers also disclosed maladaptive coping, particularly substance use, as a way to manage persistent stress.

DISCUSSION

This study reveals a disconnect between the high levels of occupational stress and the lack of a direct statistical correlation with psychological wellbeing among police officers in Mbeere South Sub-County. The findings

confirm the first two objectives: occupational stress is prevalent, and psychological wellbeing is low. However, the expected strong negative correlation between these variables was not found. This paradox can be explained through the lens of the JD-R model and the qualitative data. The model suggests that the negative impact of high job demands (e.g., trauma, workload) can be buffered by job resources (Bakker & Demerouti, 2017). The qualitative findings identify these buffering resources: *peer support* emerged as a primary, albeit informal, resource that mitigates isolation and stress. *Spirituality* was another key resource, providing officers with a framework for meaning and resilience in the face of adversity. These factors appear to act as moderating variables, disrupting a simple direct relationship between stress and wellbeing for some officers. Conversely, the qualitative data also exposes the lack of formal organizational resources, such as supportive leadership and mental health services. This absence explains why, despite the buffering effects of peer support, overall wellbeing remains poor. The reported interventions are perceived as ineffective because they are likely generic, poorly implemented, or inaccessible, failing to meet the specific needs of this population.

The finding of no significant linear relationship is not an indication that stress does not affect wellbeing; rather, it points to a more complex, non-linear relationship. It suggests a scenario where the impact of stress may be mediated by resilience factors (as seen in Keech et al., 2020) and that there might be a threshold effect where chronic stress leads to a plateau in wellbeing scores. The levels of both stress and poor wellbeing indicate that for many officers, their coping resources have been overwhelmed.

CONCLUSION

This study concludes that police officers in Mbeere South Sub-County operate under occupational stress, which has led to deterioration in their psychological wellbeing. However, the relationship between stress and wellbeing is not straightforward. The absence of a significant linear correlation underscores the complex nature of mental health in high-risk occupations, where individual resilience, peer support, and the stark absence of institutional support interact to create the observed outcomes. While these strategies provide some protection, they are insufficient to prevent psychological distress.

RECOMMENDATIONS

Policy and Program Interventions

1. The National Police Service should decentralize and destigmatize mental health services by establishing confidential counseling units at the sub-county level, staffed by professionals trained in trauma-informed care.
2. Policy reforms should address key organizational stressors identified in this study, including implementing transparent and fair transfer and promotion systems, reviewing shift patterns to improve work-life balance, and ensuring adequate staffing and resources.

Operational Improvements

1. Police leadership to foster a supportive organizational culture. This requires training supervisors to recognize signs of psychological distress and to provide supportive leadership.
2. Peer support programs should be formally integrated into the service structure, training officers to provide first-line psychological support to their colleagues, recognizing the critical role this already plays informally.

Future Research

1. Future longitudinal research is needed to track the progression of stress and wellbeing over time and better understand the causal pathways and tipping points.
2. Research should quantitatively investigate the specific resilience factors (e.g., peer support, self-efficacy, and spirituality) that moderate the stress-wellbeing relationship in this context to inform the design of targeted resilience-building interventions.

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