

## **Mental Well-being of Police Personnel in India: A Scoping Review**

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Police mental well being is of significant concern given that they operate under extreme conditions. This review analyzes studies investigating their stressors, coping mechanisms and allied factors. A scoping review protocol based on PRISMA – ScR guidelines was developed and papers from multiple online databases were sourced. Eligibility criteria included empirical studies that address mental well being challenges of police personnel. 47 papers are included in the review including nine qualitative studies, one intervention study and 37 cross-sectional ones. Results indicate varied areas of concern including high occupational stress, unhealthy coping, and absence of organizational support. Proposed future avenues include longitudinal studies, qualitative research and a policy framework to institutionalize mental well being of Indian police personnel.

**Keywords:** Indian police; police mental health; police mental well being; scoping review

Global data reveals that one in four police officers screens positive for hazardous drinking, one in seven for PTSD/depression, and one in ten for anxiety/suicidal ideation (Syed et al., 2020). In India, such findings are compounded by systemic issues such as understaffing, lack of resources, and bureaucratic hurdles (Common Cause et al., 2019) . Personnel work 12-hour shifts, with frequent night duties (Diana & John, 2016). A survey of 11,000 police personnel reports that 80% are mentally affected by their work (Common Cause, 2019), resulting in anxiety, depression, fatigue, and burnout (Ricciardelli & Johnston, 2022; Yadav et al., 2021). Police work-stress also affects families, communities, and overall effectiveness of law enforcement (Meena et al., 2018; Khadse et al., 2020) . Addressing mental health issues

due to occupational stress among Indian police is essential for improving officer well-being, and efficiency of law enforcement, thus fostering heightened community trust. A scoping review is apt for summarising and disseminating such findings, while also highlighting any gaps in the available literature about the topic (Arksey and O'Malley (2005).

### **Research Questions**

The review addresses the following research questions pertaining to the Indian police. Firstly, it seeks to identify occupational stressors and allied factors influencing mental health outcomes among Indian police personnel. Secondly, it looks to uncover coping mechanisms and social support avenues available to them.

## **Materials and Methods**

### **Search Strategy**

A review protocol, based on the PRISMA-ScR guidelines, was first drafted to guide the review process. The following databases were searched: Google Scholar, Pubmed, Pubmed Central, JSTOR, Elsevier, Sciencedirect, Project Muse, Sage Journals, EBSCO, Proquest, Wiley. Studies published since January 1<sup>st</sup>, 2004, were considered for the review. This time period was decided upon, in view of the advent and growth of social media platforms that have changed the overall nature of communication. Such disruption in communication modes would've altered policing practices, and added to existing job stressors. Keywords such as Indian police and mental health were used in combinations to obtain all relevant studies. Since conducting a scoping review is an iterative process, the inclusion and exclusion criteria were amended as new literature emerged during the search and analysis. Initially, the review focussed on mental well-being interventions that already exist for police personnel in India. However, this was changed to the current scope of the review when such evidence was not forthcoming.

### **Inclusion and Exclusion Criteria**

This review includes studies published from January 2004 onwards, that: (a) are empirically conducted on Indian police personnel (b) address mental health and/or psychological well-being, (c) explore the various job-related mental wellbeing challenges, (d) are available with full text (e) are published in English, and (f) are from indexed journals to reflect higher scientific quality. This review excludes studies that (i) investigate mental disorder(s) that may not be linked to policing roles, (ii) are literature reviews (iii) contain secondary data analysis, (iv) are about paramilitary police or other such fraternities.

## **Results**

A total of 47 papers were available online that met the inclusion and exclusion criteria. This includes nine papers on qualitative investigations, one that reports an intervention study, and 37 that analyse cross-sectional surveys. Four papers (Singh et al., 2019; Singh et al., 2021; Singh et al., 2022; Singh & Kar, 2015) appear to report results from the same dataset. The findings of the review are categorised into the themes specified below.

### **Occupational Stress**

Occupational stress among police personnel has been extensively studied, revealing a multi-factorial nature. Results indicate that a substantial proportion of personnel experience psychological distress (Chauhan & Desai, 2010; Choudhary, 2021; Grover et al., 2020; Maurya, 2018; Naik and Kacker, 2019; Parsekar et al, 2015; Kaur et al., 2013) , occupational stress (Deb et al., 2005; Nagar, 2009; Singh et al., 2019) and organisational & operational stress (Ragesh et al., 2017). Stressors include work overload (Alam & Afreen, 2019; Bawa and Kaur, 2011; Deb et al., 2005; Diana & John, 2016; Dhillon et al, 2022; Kumar & Kamalanabhan, 2017; Selokar et al, 2011; Singh et al., 2019; Singh & Kar, 2015), lack of access to food/water (Dhillon et al, 2022; Diana & John, 2016), unspecified hours (Bandyopadhyay & Kumbhare, 2019), inadequate rewards (Alam & Afreen, 2019) (Selokar et al, 2011), criticism from superiors (Selokar et al, 2011) (Singh & Kar, 2015), perceived unfairness (Kumar & Kamalanabhan, 2017) (Singh & Kar, 2015), and lack of time (i) for relaxation (Bandyopadhyay & Kumbhare, 2019; Diana & John, 2016, Selokar et al, 2011), and (ii) for family (Alam& Afreen, 2019) (Singh & Kar, 2015). This leads to anxiety, depression (Grover et al., 2020), burnout, and suicidal ideation (Yadav et al., 2021) .

Officers with high burnout show a negative correlation with marital adjustment (Rani & Garg, 2010), and display higher role conflict, under participation at work, and overall occupational stress (Akhtar & Naithany, 2023; Bawa and Kaur, 2011; Deb et al., 2005). Administrative/organizational pressure contributes more to burnout compared to physical/psychological threats (Xavier and Prabhakar, 2016). Role ambiguity, and work-family conflict were also predictors for the same (Kumar & Kamalanabhan, 2017). Additionally, societal expectations and public criticism create role conflicts and emotional detachment, further contributing to cynicism and burnout (Lambert et al., 2016). A major source of distress leading to suicide attempts was the fear of infecting family members with COVID-19 while on duty (Raina, 2020; Reddy, 2020).

Stressors affecting police personnel have been classified as low level (court proceedings, inadequate salary, irregular duty hours, lack of advancement, poor image of police), moderate level (inadequate equipment, non-recognition, poor work conditions), and high level (unspecified) (Singh & Kumari, 2019). Personnel are also at higher risk for lifestyle diseases further compounding the stress burden (Diana & John, 2016; Nagar, 2009; Yadav et al., 2021).

Male personnel reported higher job satisfaction when taking on leadership roles (Maurya & Agarwal, 2017). Women personnel were more likely to experience stress (Dingankar et al, 2023; Narvekar & D'Cunha, 2020; Ragesh et al., 2017) from gender discrimination, and societal expectations (Tripathi & Azhar, 2021; Tripathi & Azhar, 2023), work-life conflict, and negative job attitudes (Karunanidhi & Chitra, 2014).

Younger officers and those in lower ranks reported higher stress levels (Narvekar & D'Cunha, 2020; Pratap Singh & Pandey,

2013; Ragesh et al., 2017; Sinha et al., 2022). They consider themselves powerless (Bawa and Kaur, 2011) due to limited decision-making and increased exposure to challenges (Dingankar et al., 2023). 'Years in service' was significantly associated with psychological distress with participants reporting disturbed sleep patterns (Parsekar et al, 2015) and physical illnesses (Bawa and Kaur, 2011; Ragesh et al., 2017; Yadav et al., 2021). Respondents from joint families reported lower mental health scores than those from nuclear units (Alam & Afreen, 2019).

### **Coping Mechanisms**

Coping strategies employed by police personnel can be demarcated into individual, familial, and societal levels (Savarimalai et al., 2023). They can also be categorized by frequency of use: mostly used (communicating with close ones), sometimes used (alcohol), rarely used (relaxation exercises), and never used (counselling) (Singh & Kumari, 2019).

Individual-level coping strategies used by personnel include problem solving (Kaur et al, 2013); active coping, humour, positive planning, self-blame, self-distraction (Majumdar et al., 2016); acceptance (Boovaragasamy et al., 2021; Dingankar et al., 2023), approaching duties as a service (Boovaragasamy et al., 2021); volunteering (Savarimalai et al., 2023); family support (Nagar, 2009), religious beliefs (Belur, 2007; Dhillon et al, 2022), avoidance (Singh et al., 2021), and substance use (Diana & John, 2016; Majumdar et al., 2016; Ragesh et al., 2017; Singh et al., 2021). Active problem-solving, seeking support, and mindfulness were shown to improve mental health (Gupta et al., 2023). However, some others were associated with poorer mental health (Singh et al., 2021) with negative distraction, and denial/blame being significantly associated with psychological stress (Kaur et al, 2013).

The presence of supportive leadership significantly decreased stress (Gupta et al., 2023; Kumar & Kamalanabhan, 2017).

Officers enjoyed the highest levels of social support (Kaur et al, 2013; Singh et al., 2019), and mental health (Singh et al., 2019), whereas inspectors had the highest mean scores for occupational stress and maladaptive coping, and the lowest for active and adaptive coping (Singh et al., 2019). Coping and social support significantly moderated the stress-mental health relationship for officers, partially for inspectors, and not at all for constables (Singh et al., 2021). This is concerning since social support has been found to have a negative correlation with suicidal ideation (Joseph & Vishnupriya, 2023) and the lack of such support for constables heightens their risk. Male constables reported better emotion focused coping and problem focused coping styles than female personnel (Pinki & Jha, 2020).

When looking at personality traits, strategies like behavioural disengagement, denial, self-blame, and self-distraction were negatively correlated with extraversion and positively correlated with psychoticism and neuroticism, whereas the opposite was true for active coping, use of emotional support, positive reframing, and acceptance (Naik & Kacker, 2019). Individuals scoring high on neuroticism/psychoticism/extraversion (Kaur et al, 2013), and those with low emotional competency (Kumar Sinha & Mahakud, 2012) were more prone to stress. In women officers, high neuroticism, low agreeableness, and low extraversion contributed to higher occupational stress (Karunanidhi & Chitra, 2014). Overall, extraversion, conscientiousness and agreeableness scores were low (Saini & Sankhla, 2016).

## **Interventions**

Police personnel are trained in technical skills but not in self-management (Ranta, 2009). Multiple studies emphasise tailored interventions or programs (Kumar & Kamalanabhan, 2017; Parsekar et al, 2015; Pinki & Jha, 2020; Ragesh et al., 2017; Singh et al., 2022; Viegas et al., 2023; Viegas & Henriques, 2020), with components of stress management (Ranta, 2009), mindfulness (Pinki & Jha, 2020), peer-support (Dhillon et al, 2022), organisational and individual level strategies (Gupta et al., 2023; Narvekar & D'Cunha, 2020), and addressing gender discrimination (Tripathi & Azhar, 2023). However, personnel refrain from seeking-help due to being perceived as shameful (Kraye et al., 2023), thus highlighting the prevailing stigma.

## **Discussion**

Studies of Indian police personnel report similar findings. Personnel operate under prominent stressors that negatively affect their physical health and mental well-being. Irregular work hours, exposure to violence, and limited opportunities for rest are common stressors that worsen health risks (Meena et al., 2018). Conditions such as hypertension, cardiac issues and substance use are likely, which can impact their private lives (Dingankar et al, 2023). Demographic variations are also apparent; younger officers and lower ranked personnel having minimal autonomy, and with female personnel being at higher risk for adverse mental health which is aligned with global findings as well (Syed et al., 2020).

Personnel use various coping methods for occupational stress. Strategies cultivating wellbeing include seeking support, and problem solving; whereas substance use, distraction, and denial/blame could lead to unfavourable outcomes. Globally, self-blame is associated with increased emotional distress (Callebaut et al., 2016). Some

(social support) are more available to higher-ranked personnel, which is true among Spanish officers as well (Luceño-Moreno et al., 2016). Personnel of lower ranks are left with only individual level strategies at their disposal.

Despite ample evidence of occupational stress and related issues among Indian police, a long-term workplace intervention is lacking. There is a systemic need for a workplace intervention that is feasible, scalable, and acceptable to the Indian police. Recently, counselling and stress management support programs have been initiated (Correspondent, 2021; Kirubakaran, 2022; Mohapatra, 2024; *Police Wellness Program!*, 2019; "The Hans India," 2022). These could be encouraged and their long-term impact assessed, along the lines of global efforts, such as self-awareness training in Greece (Liakopoulou et al., 2020), peer-support in Canada (Milliard, 2020), and mindfulness in Brazil (Trombka et al., 2018; Trombka et al., 2021) and the USA (Grupe et al., 2021).

### **Future Research Directions**

Further research on police personnel is needed to address several research gaps that address specific sub-populations (women personnel), methodologies (longitudinal and qualitative research), and care-components (peer-support, barriers to help-seeking, community support mechanisms).

### **Longitudinal studies**

Most studies on police personnel are cross-sectional, and unable to establish long-term relationships between variables. Longitudinal studies can advance our understanding of the population (Gould, 2000; Hodgins et al., 2001; Teahan, 1975; Wang et al., 2020) by tracking phenomena over years. However, these methodologies demand a larger investment of time, effort

and resources, which could be why they aren't popular.

### **Community-support mechanisms**

While the studies in this review have explored individual-level coping mechanisms there is need to explore community level support avenues. Community support holds promise to enhance police functioning. Interventions at this level are being utilized to strengthen mental health care (Ahmad et al., 2019; Castillo et al., 2019; Glisson & Schoenwald, 2005; Roberts et al., 2011). The police would benefit from interventions incorporating such an outlook.

### **Qualitative research**

While a few qualitative studies are published about the Indian police, one-third of such literature is from the Covid-19 pandemic (Boovaragasamy et al., 2021; Choudhary, 2021; Dhillon et al., 2022). These findings do not apply to common, day-to-day issues that police personnel face. A lack of qualitative insight provides a fragmented understanding of the challenges that the population faces. Qualitative research can also shed light on the lived experience of various sub-groups/units (women officers, jail wardens).

### **Addressing stigma**

Stigma continues to deter people from requesting help in the enforcement sector (Karaffa & Koch, 2015; Soomro & Yanos, 2018; Velazquez & Hernandez, 2019). Further research is needed to know how such unhelpful perceptions can be changed. Investigating how stigma influences help-seeking behaviour and developing strategies to reduce stigma is essential for promoting mental well-being within the police.

### **Minimal research on organisational culture**

At any workplace, organisational culture is a key component that shapes behaviours, attitudes and performances (Maamari &

Saheb, 2018; Shahzad, 2014). This hasn't been investigated among the Indian police, which limits our understanding of organisational structures and peer relationships among police personnel. This is a missed opportunity to improve workplace dynamics, and team performances.

### **Policy framework for enhancing police mental well-being**

There is a need for a national level policy focus on police mental health, with clearly outlined guidelines on wellness, dedicated mental health helplines, and periodic psychological evaluations for early detection and intervention. Steps to reduce burnout and enhance resilience via peer-led support groups could also be considered.

### **Limitations**

The review could have missed grey literature (government reports, scientific proceedings) that isn't easily available online. Secondly, differences in research rigour could impact the quality of the findings presented since this review doesn't critically evaluate the methodologies of the studies. Lastly, the review may have missed out on important insights from secondary data analysis.

### **Conclusion**

While considerable research on police stress in India is available, many gaps still remain. Longitudinal and qualitative research, focussed on organisational complexities, and leading to tailored interventions will be central to advancing our understanding of the population. Organisational and leader support is the need of the hour in the absence of which, personnel are left to find their own recourse to cope with their mental health demands. Such coping strategies often tend to be maladaptive in the long-term. Addressing these areas can create a more effective, and resilient workforce.

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