

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

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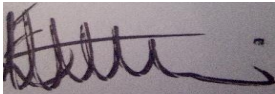
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**DECLARATION**

I, the undersigned, declare that this research thesis is a product of my own work and is not the result of anything done in collaboration. It has not been previously presented to any other institution for the award of a degree. All sources have been appropriately cited and duly acknowledged in full.

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## ABSTRACT

This study examined the relationship between occupational stress and psychological well-being among police officers in Mbeere South Sub-County, Embu County, Kenya. Guided by the Job Demands-Resources Model and Person-Environment Fit theory, it aimed to assess the levels of occupational stress, levels of psychological well-being, their interrelationship, and potential stress mitigation interventions. A mixed-methods cross-sectional design was employed, with a sample of 162 police officers from a population of 280, selected through multi-stage sampling. Data were collected using the Police Stress Questionnaire, WHO-5 Wellbeing Index, key informant interviews, and focus group discussions. Quantitative data were analyzed with descriptive and inferential statistics, while qualitative data were thematically analyzed. Findings revealed that 53.3% of officers experienced severe stress, driven by organizational (54.7%) and operational (58.7%) factors. Psychological well-being was low, with 42.7% indicating poor well-being suggestive of distress. No significant linear relationship was found between occupational stress and well-being ( $r = -0.024$  to  $-0.105$ ,  $p > .05$ ). Interventions like mindfulness and exercise were reported but often deemed minimally effective. The study recommends that the National Police Service implement targeted stress reduction programs addressing organizational and operational stressors, such as improving workflow and resource availability.

## **ABBREVIATIONS AND ACRONYMS**

|                 |   |
|-----------------|---|
| <b>ADHD:</b>    | Attention-Deficit/Hyperactivity Disorder                    |
| <b>APCA:</b>    | Administration Police Comrades Association                  |
| <b>APTC:</b>    | Administration Police Training College                      |
| <b>EAPs:</b>    | Employee Assistant Programs                                 |
| <b>IBM:</b>     | International Business Machines                             |
| <b>LPC:</b>     | Licensed Professional Counselor                             |
| <b>MHP:</b>     | Mental Health Professional                                  |
| <b>NASCOTI:</b> | National Commission for Science, Technology, and Innovation |
| <b>PSTD:</b>    | Post Traumatic Stress Disorder                              |
| <b>SPSS:</b>    | Scientific Package for Social Science                       |

## **DEFINITION OF TERMS**

**Occupational Stress:** Occupational stress refers to the emotional and physical strain police officers experience due to job-related demands that exceed their coping resources or arise from a mismatch between the officer and their work environment (Järvelin-Pasanen et al., 2018). In this study, it includes symptoms such as emotional exhaustion and burnout specific to police duties in Mbeere South Sub-County.

**Psychological Wellbeing:** Psychological wellbeing denotes a positive mental state characterized by emotional balance, vitality, restful sleep, and meaningful engagement with daily life (Steptoe et al., 2015). In this study, it reflects the self-reported emotional state of police officers, measured by the WHO-5 Wellbeing Index.

**Counseling:** Counseling is the professional support given to individuals by trained therapists to help them manage stress, emotional challenges, and improve mental health (Meier & Davis, 2019). In this study, counseling refers to the intervention used to enhance psychological wellbeing among police officers facing occupational stress.

**Emotions:** Emotions are subjective psychological states that influence behavior, thoughts, and social interactions (Ashkanasy & Dorris, 2017). In this study, emotions refer to the self-reported emotional reactions of officers to occupational stressors.

**Police Subculture:** Police subculture refers to the shared norms, values, and informal rules within police organizations that influence behavior and coping strategies (Rose & Unnithan, 2015). In this study, it encompasses the cultural context that shapes how officers in Mbeere South perceive and respond to stress.

**Police Cynicism:** Police cynicism is the skeptical or distrustful attitude some officers develop towards society, the justice system, or their own institutions (Oliveira & Jackson, 2021). In this study, it reflects reduced confidence in policing systems that may exacerbate psychological strain.

**Posttraumatic Stress Disorder (PTSD):** PTSD is a mental health condition caused by exposure to traumatic events, characterized by flashbacks, anxiety, and emotional distress (Resick et al., 2017). In this study, PTSD includes psychological effects experienced by officers due to exposure to traumatic policing situations.

**Stressors:** Stressors are events or conditions that trigger psychological strain by placing demands on an individual's coping capacity (Oken et al., 2015). In this study, stressors are specific occupational challenges, such as exposure to violence, long working hours, and lack of support that police officers encounter in Mbeere South Sub-County.

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# CHAPTER ONE

## INTRODUCTION

### 1.1 Introduction

The chapter introduces the study by providing an overview of its key components. It outlines the background and problem statement, explains the purpose and objectives, and presents the research questions guiding the inquiry. The scope, significance, and assumptions of the study are also discussed, establishing the study's context and boundaries. The chapter concludes with a summary that previews the content of subsequent sections.

### 1.2 Background of the study

Occupational stress is a pervasive issue worldwide, defined as the physical, emotional, and psychological strain that arises when job demands exceed an individual's coping capacity or when there is a poor match between the worker and the work environment (Järvelin-Pasanen, Sinikallio & Tarvainen, 2018). It has significant consequences not only for individuals, affecting physical health, mental wellbeing, and job performance, but also for organizations through reduced productivity, increased absenteeism, and higher turnover rates, and for society through increased healthcare costs and reduced public safety.

Globally, research indicates that occupational stress is a critical problem among law enforcement officers. Studies from developed countries such as the United States show that approximately 25% of police officers experience symptoms consistent with PTSD compared to 3.5% in the general population (Velazquez & Hernandez, 2019). Similarly, in Australia, police officers report significantly higher rates of anxiety and depression compared to other professions (Kyron et al., 2022). A systematic review by Purba and Demou (2019) concluded that law

enforcement is consistently ranked among the professions with the highest occupational stress levels globally.

At the regional level in Africa, the situation is equally alarming. A study conducted among police officers in South Africa found that about 36% reported clinical levels of psychological distress, with factors such as exposure to violence, lack of organizational support, and poor work-life balance being major contributors (Purba & Demou, 2019). In Nigeria, Ogunbamila (2023) reported that over 40% of police officers demonstrated symptoms of mental health conditions related to occupational stress. These figures highlight that occupational stress among police is not just a Western phenomenon but a significant concern across the African continent.

Locally, in Kenya, police officers face similarly high levels of occupational stress. According to the Kenya National Commission on Human Rights (KNCHR, 2020), policing in Kenya is associated with high levels of trauma exposure, low morale, and a lack of mental health support services. Studies have shown that over 35% of Kenyan police officers exhibit symptoms of depression or PTSD (Ndero et al., 2024). A government audit by the Independent Policing Oversight Authority (IPOA, 2022) identified stress-related illnesses and suicides among police officers as a rising concern, with police suicide rates increasing by 40% between 2018 and 2020. These alarming statistics point to a critical need to address occupational stress among Kenyan police officers.

Specific to Mbeere South Sub-County, Embu County, while there are few targeted studies, existing data suggest the problem is indeed present. Ndero (2024) in a broader study on Embu County noted that police officers in rural sub-counties, including Mbeere South, reported

high levels of work-related stress, citing issues such as understaffing, poor working conditions, lack of psychological support, and community hostility. Local police officials also reveal growing concerns over officer burnout, with anecdotal evidence suggesting a rise in absenteeism and disciplinary cases related to mental health challenges. Therefore, the problem is real and urgent within the study area.

The impact of occupational stress extends to officers' psychological wellbeing, a multidimensional concept encompassing mental health, emotional resilience, social wellbeing, and life satisfaction (Trudel-Fitzgerald et al., 2019; van Agteren et al., 2021). Cumulative stress and trauma can erode psychological wellbeing, leading to conditions like anxiety, depression, PTSD, substance abuse, and emotional exhaustion (Syed et al., 2020; Violanti et al., 2017). These not only affect the officers personally but also compromise their ability to serve communities usefully and ethically.

Despite the obvious risks, mental health interventions for police officers in Kenya are insufficient. Studies by Muthondeki, Muriithi, and Mutiso (2014) and Wango (2018) found that Kenyan law enforcement agencies largely lack structured programs for mental health support. There is little in terms of systemic support such as counseling, stress management training, or organizational policies that prioritize officers' psychological welfare (Ndero et al., 2024).

While there is broad acknowledgment of occupational stress in policing, there is a significant gap in localized, empirical research focusing specifically on the relationship between occupational stress and psychological wellbeing among police officers in rural Kenyan settings like Mbeere South. Most Kenyan studies such as Muthondeki et al. (2014) and Wango (2018) focus on urban centers like Nairobi or Mombasa. Rural areas, where officers often face unique

stressors such as isolation, community-police tensions, lack of resources, and poor infrastructure, remain under-researched (Ndero, 2024). There is limited quantitative data on the extent of occupational stress, its specific impacts on psychological wellbeing, and the usefulness of existing (if any) mitigation strategies in Mbeere South Sub-County. Thus, this study aimed to fill this gap by assessing the level of occupational stress among police officers in Mbeere South Sub-County, evaluating their psychological wellbeing, analyzing the relationship between the two, and recommending context-specific interventions.

### **1.3 Statement of the problem**

Occupational stress is a major problem globally, especially among law enforcement officers. In the United States, for instance, the law enforcement officers experienced 25% of mental health issues compared to 3.5% in the general population (Velazquez & Hernandez, 2019). Similarly, in South Africa, 36% of police officers reported clinical levels of psychological distress (Purba & Demou, 2019). In Nigeria, 40% of police officers reported symptoms of mental health conditions related to occupational stress (Ogunbamila, 2023).

The psychological well-being of police officers in Kenya has become a growing concern, with many officers experiencing depression, anxiety, PTSD, and other mental health issues (Ndero, 2024). Alarming rates of murder, suicide, and psychological disorders have been reported within the police service nationwide. Ndero (2024) estimated that approximately 20,000 officers suffer from psychological disorders, with an average of 13 murders and 11 suicides reported annually between 2016 and 2020. While these national statistics highlight the severity of the problem, there is limited empirical data focusing specifically on police officers stationed in Mbeere South Sub-County, Embu County.

Prior studies such as Wango (2018) and Ndero (2024) have documented the traumatic nature of police work and its significant impact on officers' mental health across Kenya. Wango (2018) observed that frontline officers are frequently exposed to distressing incidents that lead to emotional disturbances and burnout, while Ndero (2024) linked repeated trauma exposure to the levels of PTSD, suicide, and violence among officers. However, these studies largely generalize findings to the national level and rely heavily on descriptive accounts rather than quantifying the levels of occupational stress or systematically assessing psychological well-being.

Moreover, to the best of the knowledge of the researcher, no published research or intervention programs focusing on occupational stress or psychological well-being of police officers in Mbeere South Sub-County have been identified. As such, the mental health status of officers in this area remains largely undocumented and unexplored. This study sought to address these gaps by empirically investigating the relationship between occupational stress and psychological well-being among police officers in Mbeere South Sub-County, Embu County. It aimed to provide localized, evidence-based data that can inform mental health interventions and policy decisions tailored to the needs of officers operating in this specific context.

#### **1.4 Purpose of the study**

The purpose of the study was to assess the relationship between occupational stress and psychological wellbeing of police officers in Mbeere South Sub-County, Embu County, Kenya.

#### **1.5 Research Objectives**

1. To find out the levels of occupational stress among police officers in Mbeere South Sub-County, Embu County, Kenya.

2. To determine the levels of psychological wellbeing among police officers in Mbeere South Sub-County, Embu County, Kenya.
3. To assess the relationship between occupational stress and psychological wellbeing among police officers in Mbeere South Sub-County, Embu County, Kenya.
4. To investigate interventions to mitigate occupational stress among police officers in Mbeere South Sub-County, Embu County, Kenya.

### **1.6 Research Questions**

1. What are the levels of occupational stress among police officers in Mbeere South Sub-County?
2. What are the levels of psychological wellbeing among police officers in Mbeere South Sub-County?
3. What is the relationship between occupational stress and psychological wellbeing among police officers in Mbeere South Sub-County?
4. What interventions can mitigate occupational stress among police officers in Mbeere South Sub-County?

### **1.7 Scope and Delimitations**

This study focused on the relationship between occupational stress and psychological wellbeing among police officers in Mbeere South Sub-County, Embu County, Kenya. The primary population included active-duty police officers stationed in the sub-county. This group was chosen due to their significant role in maintaining public safety and their potential exposure to occupational stressors. The study was confined to Mbeere South Sub-County, providing a specific regional focus that allows for in-depth and context-specific findings.

The main variables of interest were occupational stress and psychological wellbeing. Occupational stress was examined through workplace-related pressures, while psychological wellbeing was considered in terms of an individual's overall mental wellness and quality of life, indicating how well they cope with stress, maintain energy, and find purpose in their everyday experiences. The study was delimited to a two-month data collection period and did not include police officers who are retired, resigned, or stationed outside Mbeere South Sub-County. It also excluded other factors that may influence psychological wellbeing, such as physical health or family dynamics, which were beyond the scope of this study. While the study aimed to provide valuable insights, it may not reflect the experiences of police officers in other regions of Kenya. Furthermore, the study relied on self-reported data, which may be subject to biases such as social desirability or recall bias.

### **1.8 Significance of the Study**

This study is valuable to several key stakeholders:

#### **1. Police Officers in Mbeere South Sub-County**

The study provide data on the levels of occupational stress and levels of psychological well-being, raising awareness among officers about their mental health status. This insight may encourage them to seek targeted support services based on identified stressors and well-being challenges specific to their context.

#### **2. Law Enforcement Leadership and Police Service Commission**

The findings on the relationship between occupational stress and psychological well-being offer evidence to inform the development of tailored wellness programs and policies. These can address specific organizational and operational stressors identified in the study, enhancing psychological support for officers.

### **3. Mental Health Professionals and Counselors**

The results, including identified interventions to mitigate stress, would equip professionals with data on the unique stressors and well-being levels of police officers in Mbeere South. This may support the design of customized counseling and mental health strategies aligned with the study's findings.

### **4. Policy Makers in Kenya's Security Sector**

The study's insights into stress levels, well-being levels, and effective interventions provide evidence to guide policy decisions within the National Police Service. These findings may support targeted initiatives to reduce occupational stress and improve psychological well-being, directly addressing the study's objectives.

## **1.9 Justification of the Study**

The relationship between occupational stress and psychological wellbeing among police officers in Kenya remains underexplored, especially in rural or semi-urban areas such as Mbeere South Sub-County. While global studies have documented the mental health challenges faced by law enforcement officers (Kyron et al., 2022; Ogungbamila, 2023; Purba & Demou, 2019; Velazquez & Hernandez, 2019), there is limited empirical research focusing on the Kenyan context, particularly in regions outside major urban centers.

Police officers routinely face high-risk situations, resource constraints, long working hours, and systemic pressures, all of which can contribute to chronic stress and psychological strain (Purba & Demou, 2019). However, existing literature in Kenya tends to emphasize operational efficiency and public safety outcomes (Ndero, 2024; Wango, 2018), often overlooking the internal wellbeing of officers as a factor affecting performance and service delivery.

This study contributes valuable insights into the lived experiences of police officers in Mbeere South, highlighting how occupational stress impacts their psychological wellbeing. Furthermore, the study is grounded in relevant theoretical frameworks, the Job Demands-Resources (JD-R) Model (Schaufeli & Taris, 2014) and Person-Environment Fit Theory (Van Vianen, 2018), which support a robust investigation into how workplace demands interact with personal and organizational resources. Through generating data that is both academically and practically relevant, this study supports the development of more useful interventions, policies, and scholarly discourse around occupational mental health within Kenya's security sector.

### **1.10 Assumptions**

1. **Honesty of Respondents:** It was assumed that police officers participating in the study provided honest responses during surveys and interviews. This ensured the validity and reliability of the data collected on occupational stress and psychological well-being.
2. **Stability of External Conditions:** It was assumed that external factors such as economic conditions, organizational policies, and workload demands would remain relatively stable during the study period, ensuring that any relationships observed between occupational stress and psychological well-being are not unduly affected by sudden external changes.
3. **Willingness to Participate:** It was assumed that the police officers would be willing to participate in the study.

### **1.11 Summary**

This chapter sets the foundation for the study, emphasizing the critical role of police officers in public safety and the stressors they face, such as trauma, long hours, and high-pressure situations. It defines occupational stress and highlights the need to address this stress to improve police officers' wellbeing. The problem statement identifies a research gap in

understanding the relationship between occupational stress and psychological wellbeing among police officers in Mbeere South Sub-County, underscoring the importance of this study. The chapter outlines four research objectives: assessing occupational stress, evaluating psychological wellbeing, analyzing their relationship, and proposing mitigation strategies. It highlights the study's significance in filling a research gap, informing policy, and developing targeted interventions, with broader implications for other high-stress occupations. The scope and delimitations focus on active-duty officers in Mbeere South Sub-County, while the assumptions section addresses key beliefs essential for the study's validity and reliability.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

This chapter reviews existing literature related to occupational stress and psychological wellbeing among police officers. It explores key theoretical perspectives, establishes a conceptual framework, and reviews empirical findings to provide a thorough understanding of the factors influencing stress and wellbeing in police work. The chapter is organized into four distinct sections; Theoretical Review, Empirical Review, Research Gap and Conceptual Framework.

#### **2.2 Theoretical Review**

This study was informed by the following theories: Job Demands-Resources (JD-R) Model and the Person-Environment Fit Theory.

##### **2.2.1 Job Demands-Resources (JD-R) Model**

The Job Demands-Resources (JD-R) model, developed by Bakker and Demerouti in 2001, provides a comprehensive framework for analyzing how job characteristics affect employee well-being and organizational outcomes (Schaufeli & Taris, 2014). The model categorizes job characteristics into two broad categories: job demands and job resources, and it emphasize how their interaction influences psychological states and performance.

Job Demands refer to physical, psychological, social, or organizational aspects of a job that require sustained physical or mental effort (Schaufeli & Taris, 2014). These demands are not inherently negative but can lead to strain when they exceed an employee's coping capacity. In the context of policing, relevant demands include heavy workload, exposure to traumatic events

or violence, long working hours, and role ambiguity. These factors are associated with increased risk of emotional exhaustion, stress, and burnout, contributing to what the model identifies as the health impairment process.

Job Resources, on the other hand, are the physical, psychological, social, or organizational aspects of the job that help in achieving work goals, reduce job demands and the associated costs, or stimulate personal growth and development (Schaufeli & Taris, 2014). Examples include supervisory and peer support, access to counseling services, autonomy in decision-making, and opportunities for professional development. These resources play a central role in the motivational process of the model, enhancing engagement, commitment, and well-being while buffering the effects of high demands (Schaufeli & Taris, 2014). The dual process within the JD-R model captures two pathways. The first pathway is health impairment process, where excessive job demands drain employees' mental and physical resources, leading to stress, burnout, and poor psychological health. The second pathway is motivational processes, where sufficient job resources promote work engagement, reduce stress, and improve performance and satisfaction.

In this study, the JD-R model was applied to explore how specific job demands (such as workload, exposure to violence, and role ambiguity) and job resources (such as social support, counseling availability, and autonomy) interact to affect occupational stress and psychological well-being among police officers in Mbeere South Sub-County. The model's emphasis on the dynamic interplay between demands and resources was used to identify the causes of stress and potential protective factors. Through examining both sides of the equation, the study aimed to recommend practical, evidence-based interventions to enhance officers' mental health and resilience, such as improving access to counseling, reducing administrative burdens, or

strengthening workplace support networks. The JD-R model focuses on the job and overlooks how the interplay between the person and their environment at work could influence occupational stress. This shortcoming made it necessary to include Person-Fit Theory in this study.

### **2.2.2 Person-Environment Fit Theory**

Person-Environment Fit Theory was initially conceptualized by Kurt Lewin in the mid-20<sup>th</sup> century and later refined by scholars like Kristof-Brown et al. (2005) and Van Vianen in subsequent years, including major contributions in 2018 (Van Vianen, 2018). This theory postulates that the congruence between an individual's characteristics (such as abilities, values, and needs) and their work environment (such as demands, culture, and resources) predicts behavior, well-being, and performance. Misalignment, or "misfit," is associated with stress, reduced job satisfaction, and lower well-being.

The core idea Person-Environment Fit Theory is captured by Lewin's formula:  $B = f(P, E)$ , which means behavior is a function of the person and the environment. P-E fit is conceptualized in several dimensions, but the most commonly studied include: Person-Job Fit (The alignment between an individual's skills, knowledge, and abilities and the demands of the job), Person-Organization Fit (The congruence between an individual's values, personality, and goals and those of the organization), Person-Group Fit (Compatibility between an individual and their work team), Person-Supervisor Fit (Alignment between an employee and their supervisor's expectations or style), and Dynamic Fit (This involves the fit over time as both individual and organizational characteristics change, recognizing that alignment can evolve) (Sekiguchi & Yang, 2021).

A good fit leads to positive outcomes such as job satisfaction, reduced stress, commitment, and well-being, while misfit leads to dissatisfaction, stress, turnover, and reduced mental health. The theory is particularly useful for understanding how internal (person-based) and external (environment-based) factors interact to influence occupational outcomes.

The aspects of this theory that were utilized in this study are person-job fit, person-organization fit, and dynamic fit (Sekiguchi & Yang, 2021). Person-job fit examined how police officers' skills, resilience, and expectations align with their job demands, such as administrative pressure and high responsibility. Person-organization fit sought to understand how the organizational culture, including communication and support, aligns with officers' values and expectations. Dynamic fit involved evaluating how evolving job conditions (such as increased workload) affect the alignment over time. The theory provided a lens to investigate the mismatches between police officers' personal capacities (such as coping skills) and the demands of their roles. The study explored how these misalignments contributed to occupational stress and diminished psychological well-being. Recommendations focused on fostering alignment, such as tailoring roles to officers' strengths and creating a supportive organizational culture to reduce stress.

The two theories collectively provide a robust and comprehensive framework for understanding occupational stress and psychological wellbeing among police officers. The JD-R model offers a dual-process approach, emphasizing the balance between job demands (such as workload and trauma exposure) and resources (such as social support and autonomy), which directly affects mental health outcomes. By applying this model, it becomes clear how resource availability or scarcity impacts the psychological wellbeing of police officers, highlighting the importance of interventions that enhance job resources to mitigate stress. The Person-

Environment Fit Theory explains how the alignment (or misalignment) between an officer's personal capabilities and the demands of their work environment influences occupational stress and psychological distress. A lack of fit between personal resources and environmental demands contributes to heightened stress levels, lower job satisfaction, and higher turnover rates. These theories offer a multidimensional perspective on occupational stress in policing, addressing both the internal (individual resources) and external (organizational demands and support) factors. They not only explain the root causes of stress but also provide practical pathways for mitigating stress through better resource management, fostering organizational support, and ensuring a good fit between officers and their work environments.

## **2.3 Empirical Review**

### **2.3.1 Levels of Occupational Stress Among Police Officers**

Queirós et al. (2020) conducted a mixed-method study in Portugal that examined the levels and measurement of occupational stress and burnout among 2,057 police officers of the Polícia de Segurança Pública (PSP), representing about 10% of the national force. Using a cross-sectional online survey, the researchers validated a Portuguese version of the Operational Police Stress Questionnaire (PSQ-Op) alongside the Spanish Burnout Inventory and the Kessler Psychological Distress Scale. Their findings revealed 85% of officers experienced high operational stress, 89% reported high work-related stress, and 76.2% high social-related stress. The study's methodological rigor is a notable strength, as it employed both exploratory and confirmatory factor analyses to establish the psychometric validity of the PSQ-Op, supported by high reliability coefficients (Cronbach's  $\alpha = 0.96$ ). Moreover, its large national sample enhanced generalizability within the Portuguese policing context. However, a key weakness lies in its reliance on self-reported data collected online, which may have introduced response bias,

particularly social desirability effects common in uniformed professions. Additionally, the study's urban and national policing context may not capture stress patterns experienced by officers in rural or resource-constrained environments, such as those in African settings. Another limitation is the lack of analysis of demographic moderators (e.g., rank, gender, or age) that could reveal subgroup variations in stress exposure. Despite these limitations, the study provides valuable quantitative evidence that occupational stress among police officers is pervasive and multifaceted, encompassing both work-related and social domains. In relation to the present study, which sought to determine the levels of occupational stress among police officers in Mbeere South Sub-County, Embu County, the Portuguese findings highlight the universality of policing stress but expose a research gap concerning rural, low-resource African contexts where infrastructural deficits, community relations, and limited mental health services may compound stress experiences.

A meta-analysis study by Syed et al. (2020) provides a powerful, global overview of mental health levels among police, establishing a critical benchmark with pooled rates of 14.6% for depression and 14.2% for PTSD. A key strength of this research is its methodological rigor, encompassing a vast sample of 272,463 officers from 24 countries, which allows for robust, generalizable conclusions about the universal severity of this issue. Furthermore, it successfully identifies high occupational stress and poor social support as primary risk factors, offering crucial etiological insights (Syed et al., 2020). However, a significant weakness is its lack of contextual specificity; by aggregating data predominantly from North America, Europe, and Australia, it creates a "global" estimate that systematically excludes and obscures the realities of policing in low-resource and African contexts like Kenya. This represents the central gap that this research aimed to fill. The policing environment, institutional pressures, and cultural coping

mechanisms in Mbeere South are fundamentally different from those in the high-income nations that form the basis of this meta-analysis. Therefore, while Syed et al. (2020) confirm that occupational stress is a universal problem, their findings cannot speak to its specific levels or unique drivers within a rural Kenyan sub-county, which is the precise empirical void this study was designed to address.

Yadav and Yadav (2025) conducted a cross-sectional observational study to assess the levels of operational and organizational occupational stress among police personnel, focusing on associated socio-demographic and occupational factors. The research was carried out in Delhi, India, with a sample of 374 police officers selected through two-stage random sampling. Methodology involved self-administered questionnaires using the Police Stress Questionnaire (PSQ-Op and PSQ-Org) on a 7-point Likert scale, analyzed using descriptive statistics, chi-square tests, and t-tests in SPSS. Key findings revealed a high levels of 91.5% moderate-to-high operational stress (37.2% moderate, 54.3% high) and 54.2% moderate-to-high organizational stress (29.1% moderate, 25.1% high). Strengths of the study include its use of validated tools and stratified sampling for representativeness within ranks. Limitations include its urban focus, lack of disaggregation by demographic variables like age or marital status, which the current study in Mbeere South Sub-County, Embu County, Kenya, addressed by examining rural-specific dynamics, and demographic breakdowns in a low-resource African setting.

Mini et al. (2025) performed a cross-sectional survey to investigate organizational and operational stressors among police officials and their associations with behavioral risks like physical inactivity and substance use. Conducted in Thiruvananthapuram district, Kerala, India, the study sampled 253 police officers aged 30–55 from randomly selected urban and rural stations. Methodology utilized self-administered questionnaires with the Police Stress

Questionnaire (PSQ-Op/Org) on a 7-point Likert scale (cut-offs for high stress:  $\geq 3.5$  operational,  $\geq 4.0$  organizational), alongside socio-demographic, behavioral, and health measures, analyzed using bivariate and multivariate logistic regression in SPSS. Key findings showed 75.5% high operational stress (mean 4.9) and 65.6% high organizational stress (mean 4.9), with 83% overall high workplace stress, relevant to levels as these rates were significantly associated with age, inactivity, alcohol/tobacco use, and morbidity, highlighting stress health impacts in low and middle-income Asian settings (Mini et al., 2025). The strengths of this study lie in use of validated tools, high consent rate, and ethical rigor. Limitations include potential reporting and selection biases, small sample with few females, and no confounders like coping strategies, which the current Mbeere South study mitigated by focusing on rural African demographics, social support mediation, and broader variable disaggregation.

Bezie et al. (2024) conducted an institution-based cross-sectional study to determine work-related burnout levels and associated factors as indicators of occupational stress among police officers. Located in the Central Gondar zone, Northwest Ethiopia, the study sampled 608 officers through multistage random sampling. Methodology employed self-administered questionnaires with the Copenhagen Burnout Inventory (CBI, 7 items, average  $\geq 50$  for burnout), Operational/Organizational Police Stress Questionnaires, and others for demands/satisfaction/sleep, analyzed using logistic regression in SPSS. Key findings revealed 45.7% burnout (95% CI: 41.75–49.69), relevant to stress levels as it was linked to female gender, high demands, job dissatisfaction, organizational/operational stress, and sleep issues, underscoring psychosocial hazards in African low-resource policing (Bezie et al., 2024). Strengths encompass use of reliable tools, and adequate sample from urban/rural areas.

Limitations involve self-report bias which the Mbeere South study overcomes through triangulation.

Raju et al. (2020) undertook a cross-sectional observational study to evaluate stress levels among police workers and its associations with service duration, job nature, and dietary habits. The study was located in the Provincial Armed Constabulary (PAC) in Sitapur, Uttar Pradesh, India, involving a sample of 245 police workers. Methodology consisted of a pre-structured questionnaire for stress assessment and demographics, with data analyzed using chi-square tests for associations. Key findings indicated 31.84% mild stress, 16.73% moderate stress, and 0.41% severe stress. Strengths of this study include its focus on understudied paramilitary personnel and incorporation of lifestyle factors. Limitations encompass the small sample size, lack of validated stress scales, and no examination of gender or rank differences, which the present study in Mbeere South Sub-County addressed through a larger, demographically disaggregated sample in a rural Kenyan environment, emphasizing institutional supports and coping mechanisms.

### **2.3.2 Psychological Wellbeing Among Police Officers**

In a cross-sectional survey conducted in the Midlands region of England, Jackman et al. (2020) assessed psychological well-being (PWB) levels among 381 police employees using the Warwick-Edinburgh Mental Well-Being Scale (WEMWBS), a 14-item tool scored on a 5-point Likert scale with totals ranging from 14 to 70 (higher scores denoting greater PWB; internal consistency  $\alpha = .92$ ). The study reported an overall median PWB score of 44.00 (interquartile range: 13.00; 95% CI: 42.80–44.63), with operational staff (e.g., officers) exhibiting a median of 43.00 (mean = 42.75) and non-operational staff a median of 45.00 (mean = 44.43), showing no significant differences between groups ( $p = .06$  via Mann-Whitney U-test). This indicates moderately elevated PWB levels in this English police force, though below the general

population norms (typically around 50-51). Strengths of this study include the use of a validated, reliable scale and inclusion of diverse roles for broader representation, while limitations encompass the low response rate (<20%) and potential self-report biases, which restrict causal insights and generalizability.

Ogunbamila (2023) examined PWB levels in a cross-sectional survey of 1,193 Nigerian police personnel from Lagos and Ogun States, employing the 25-item Well-Being Manifestation Measure Scale (WBMMS) rated on a 5-point Likert scale (overall range: 25–125; higher scores reflecting higher PWB;  $\alpha = .91$  overall,  $.73-.91$  for subscales). Overall sample means included control of self and events ( $M = 15.69/20$ ,  $SD = 2.31$ ), happiness ( $M = 16.94/25$ ,  $SD = 2.82$ ), social involvement ( $M = 14.38/20$ ,  $SD = 2.45$ ), self-esteem ( $M = 14.60/20$ ,  $SD = 2.28$ ), mental balance ( $M = 16.66/20$ ,  $SD = 2.39$ ), sociability ( $M = 15.06/20$ ,  $SD = 2.50$ ), and total PWB ( $M = 93.34/125$ ,  $SD = 9.48$ ), suggesting moderate to high dimensional levels with room for improvement in social aspects. Stratified by perceived organizational support (POS) groups, high POS personnel displayed the highest overall PWB ( $M = 96.13$ ,  $SD = 7.31$ ) compared to moderate ( $M = 93.40$ ,  $SD = 9.68$ ) and low ( $M = 90.43$ ,  $SD = 9.69$ ). The study's strengths lie in its large sample and dimension-specific reporting for the PWB assessment, but limitations include regional confinement and reliance on self-reports without objective measures.

Shide (2024) investigated PWB levels through a cross-sectional survey of 357 police officers in Benue State, Nigeria, utilizing the 22-item Psychological General Well-Being Index (PGWB) with a total range of 22–132 (higher scores indicating better PWB;  $\alpha = .84$ ). While raw mean scores were not reported, the study quantified variance in PWB levels, noting that operational stress and coping strategies jointly explained 28.4% of overall PWB variance ( $R^2 = .284$ ,  $p < .01$ ), with subscale variances ranging from 8.4% for anxiety to 32.9% for self-control,

implying variable dimensional stability amid stressors. This highlights generally moderate PWB levels susceptible to occupational influences in this African context. Strengths of this study encompass representative multi-stage sampling and reliable multidimensional measurement, whereas limitations involve the absence of descriptive means or levels rates for absolute PWB quantification and potential biases from self-administered questionnaires.

Zhang et al. (2025) evaluated subjective well-being (a proxy for PWB) levels in two studies among frontline police officers in Wushi County, Xinjiang, China, using the 9-item Index of Well-Being (IWB;  $\alpha = 0.89$ ). In the cross-sectional phase with 299 officers, no specific mean IWB scores were provided, but PWB levels were inferred as negatively correlated with stress ( $r = -0.493, p < .01$ ). The quasi-experimental intervention phase with 24 officers showed equivalent pre-intervention IWB levels between groups ( $p > .05$ ), with post-intervention scores significantly higher in the experimental group ( $p < .001$  via t-test), indicating improved PWB following positive psychology counseling. This suggests baseline moderate PWB levels amenable to enhancement in this ethnic-minority region. Strengths of this study include the dual design for both baseline and change assessments, while limitations comprise small experimental sample size, convenience sampling, and omission of raw means or levels data for precise level determination.

### **2.3.3 Relationship Between Occupational Stress and Psychological Wellbeing**

In a longitudinal study, Turliuc and Balcan (2023) explored the effects of occupational stress on PWB among 210 Romanian gendarmes (96.1% male) in Iasi, Romania, with data collected at two time points (T1: December 2021; T2: April 2022, N = 199 after attrition). Methodology involved self-administered surveys using the Organizational and Operational Police Stress Questionnaires (PSQ-Org/Op), Psychological Well-Being Scale (PWBS),

Interpersonal Support Evaluation List (ISEL) for social support, and selected Ways of Coping Scale (WCS) subscales, analyzed with Pearson correlations and parallel mediation via Hayes' Model 4 (5000 bootstraps) in SPSS Process v4.0. Findings indicated that baseline organizational stress ( $\beta = -0.7243$ ,  $p < 0.05$ ) and operational stress ( $\beta = -1.0344$ ,  $p < 0.001$ ) negatively predicted PWB at T2, with low-to-moderate negative correlations (OrgS-PWB:  $r = -0.27$  to  $-0.32$ ; OpS-PWB:  $r = -0.35$  to  $-0.36$ ,  $p < 0.01$ ); social support partially mediated both relationships (OrgS indirect =  $-0.2421$ , 95% CI  $[-0.4589, -0.00359]$ ; OpS indirect =  $-0.2584$ , 95% CI  $[-0.4712, -0.0637]$ ), as did self-control for OrgS (indirect =  $-0.1464$ , 95% CI  $[-0.3346, -0.0191]$ ). The longitudinal design is a key strength, establishing temporal precedence, and validated scales ensure reliability, but limitations include self-report biases in a military culture, a moderate sample from one unit, and a short follow-up period, limiting broader applicability. The current Mbeere South study addressed these by focusing on rural Kenyan police and demographic disaggregation.

Kanmani et al. (2024) investigated the relationship between occupational stressors and PWB among 278 women police officers in Madurai district, Tamil Nadu, India, using a cross-sectional survey design with stratified proportionate and simple random sampling. Data were collected via a structured questionnaire including the 14-item Mental Health Inventory-38 subscale for PWB (range 17–69, higher scores indicating better PWB), analyzed with frequency tables, t-tests/ANOVA, and step-wise regression. Findings showed that stressors like longer working hours, problems outside stations, and working in general versus all-women stations negatively impacted PWB (overall  $M = 41.33 \pm 10.50$ ), explaining 21.6% of PWB variance (hours:  $p < 0.01$ ; outside problems:  $p < 0.001$ ; station type:  $p < 0.001$ ). Strengths of this study include a gender-specific focus addressing an understudied group and policy-relevant findings

for Indian policing, but self-reports risk bias and the single-district scope restricts generalizability. The Mbeere South study mitigated these by examining both genders in a rural Kenyan context, incorporating social support mediation, and disaggregating by rank and age.

Keech et al. (2020) examined how stress mindsets influence the relationship between occupational stress and PWB in 134 police officers from the Queensland Police Service, Australia, using a cross-sectional online survey. Measures included validated scales for stress beliefs, proactive coping, somatic symptoms, perceived stress, and PWB, analyzed using Bayesian path analysis with 200,000 MCMC iterations in Mplus v7.4. Findings confirmed that adverse stress mindsets directly and indirectly (through reduced proactive coping and increased somatic symptoms) diminished PWB, supporting a negative stress-PWB relationship exacerbated by negative beliefs about stress consequences. The use of advanced Bayesian modeling is a strength, providing robust evidence of indirect effects in a high-demand policing context, but the small sample size limits statistical power, and the cross-sectional design precludes causal conclusions. The Mbeere South study addressed these gaps by targeting a larger rural sample and exploring social support as a mediator to enhance PWB under stress.

Den Heyer et al. (2025) synthesized secondary data from 34,703 police officers across New Zealand (4,489), Australia (New South Wales: 5,269; national: 8,088), and England/Wales (16,857), applying the Job Demands-Resources (JD-R) model to assess how occupational demands impact PWB. Methodology involved re-analyzing survey data (e.g., PCL-5 for PTSD, Kessler scales for distress) for comparability, focusing on quantitative metrics like crimes/calls per officer. Findings showed high demands (e.g., 51–75% trauma exposure, heavy workloads) negatively related to PWB, yielding elevated PTSD rates (8–20.6% vs. 3.9% general population), distress (31–57%), and sleep/fatigue issues (47–53%); resources like support mitigated these

effects. The large-scale, cross-jurisdictional synthesis is a strength, offering robust comparative insights, but inconsistencies in secondary data (e.g., varying PTSD tools) and lack of primary analyses limit precision. The Mbeere South study addressed these limitations by collecting primary data in a rural Kenyan context with demographic specificity.

Oliver (2023) employed a mixed-methods co-design approach (Double Diamond framework) in two British police forces to explore the relationship between occupational stress and PWB. Study 1 involved a quantitative survey measuring stress with an unspecified scale and PWB, while Studies 2a/2b used qualitative focus groups and interviews, guided by the Demands-Resources-Individual Effects model. The sample size was not specified. Findings indicated that high work demands negatively impacted PWB, with perceived stress as a mediator, while resources like reward, control, and physical activity buffered this relationship, particularly enhancing PWB in inactive officers. The mixed-methods design is a strength, providing holistic insights and practical intervention recommendations, but the unspecified sample size hampers replicability, and the force-specific focus limits generalizability. The Mbeere South study overcame these by using a defined rural sample, quantitative rigor, and demographic disaggregation to assess stress-PWB links.

### **2.3.4 Interventions and Mitigation Strategies for Occupational Stress Among Police**

#### **Officers**

Eddy et al. (2024) investigated the feasibility and acceptability of mindfulness-based resilience training (MBRT) as an intervention to mitigate occupational stress among police officers, alongside a systematic review of health promotion programs and the SHIELD study on wellness policies. The MBRT component was conducted in the United States across four diverse police agencies, while the review and SHIELD were global/U.S.-focused. Methodology for

MBRT involved qualitative semi-structured interviews with audio-recording, transcription, and thematic analysis using coding schemes and triangulation (including expert verification by a police lieutenant); the review synthesized quantitative/qualitative studies on interventions; SHIELD used mixed-methods longitudinal design. The MBRT sample was small (n=5 officers, average 16.8 years of service), the review aggregated multiple studies (sample sizes not specified), and SHIELD's sample was unspecified. Key findings showed MBRT effective for coping with acute/chronic stressors, improving family communication, well-being, and interpersonal functioning; the review found formal fitness/wellness programs reduced stress and health risks; SHIELD indicated wellness policies positively impacted stress mitigation. Strengths of the study include triangulation for reliability, comprehensive review synthesis, and longitudinal mixed-methods for SHIELD, providing evidence-based insights into practical interventions. Limitations encompass the tiny MBRT sample limiting generalizability, lack of primary data in the review, and unspecified SHIELD details, which the current Mbeere South study addressed through larger rural Kenyan evaluation of tailored supports.

Hsieh and Huang (2024) assessed coping strategies and recommended interventions to mitigate occupational stress and depression among male police officers. The cross-sectional survey was conducted in Yunlin, Taiwan, using structured measures of stress, depression, personality, family functioning, and social support, analyzed using multiple regression. The sample comprised 264 male officers. Key findings identified maladaptive coping (e.g., drinking/smoking) as common, recommending interventions like mental health education, destigmatization, counseling, and community-building to enhance social support and reduce stress through the job demands-resources model. Strengths of this study include alignment with theoretical models and multivariate analysis for predictor insights, and informing intervention

design. Limitations involve no direct intervention evaluation (e.g., no pre/post testing), male-only focus and self-report biases, gaps the Mbeere South study filled with gender-inclusive, empirical assessment of implemented supports.

Aden et al. (2024) explored organizational culture's role in occupational stress but recommended interventions based on qualitative insights, without direct testing. The mixed-methods convergent parallel study, guided by the JD-R model, was conducted in Embakasi East Sub-County, Nairobi, Kenya, using surveys (SPSS analysis) and interviews (NVivo thematic coding). The sample included 72 officers for surveys and 10 for interviews. Key findings highlighted supportive debriefings, transformational leadership, mentorship, and peer support as mitigators, reducing stress from rigid culture; recommendations included mental health programs and team-building for high-crime areas. Strengths of the study include feature integrated quantitative ( $\beta=0.646$  for culture-stress link) and qualitative analysis for comprehensive recommendations. Limitation is lack of intervention implementation/evaluation which the current Mbeere South study addressed through rural-specific, tested interventions.

Chenoweth et al. (2024) piloted the Stress First Aid (SFA) training and Professional Quality of Life (ProQOL) self-assessment as interventions to mitigate occupational stress in a semi-rural U.S. police department in Montana. Using the Replicating Effective Programs (REP) framework (pre-implementation phase), methodology involved anonymous Qualtrics surveys for ProQOL baseline, a 4-hour SFA training on stress awareness/strategies, and post-training feasibility surveys with descriptive statistics and qualitative content analysis. The sample was 16 training attendees (diverse roles) and 18 ProQOL completers (10 feasibility surveys). Key findings showed high feasibility (means 4.2–4.7/5 for relevance), moderate baseline compassion satisfaction ( $M=35.8$ ) with low-moderate burnout/trauma stress ( $M=25.9/26.5$ ), and value in

reducing stigma/building support; 100% participation met goals. Strengths of the study include REP rigor, validated tools, and confidentiality for trust in stigma-prone settings. Limitations comprise small sample risking breaches/power issues, no long-term efficacy data, and pilot focus without controls, addressed in Mbeere South through scaled rural evaluation.

Vadvilavičius et al. (2023) systematically reviewed the effectiveness of mindfulness-based interventions (MBIs) to mitigate occupational stress among police officers. The review synthesized eight (quasi)experimental studies from databases like SpringerLink and PubMed, assessing pre/post quantitative measures. Sample sizes were aggregated from reviewed studies (not specified individually). Key findings indicated MBIs significantly reduced stress, sleep problems, PTSD, negative affect, and burnout. Strengths of this study include rigorous inclusion criteria and synthesis of experimental designs for evidence-based conclusions. Limitations involve potential variability in reviewed studies' generalizability and lack of primary data, which Mbeere South countered with direct rural intervention testing.

## **2.4 Research Gap**

While occupational stress and psychological well-being (PWB) among police officers have been studied globally, there was a dearth of research examining these phenomena in the rural, low-resource context of Mbeere South Sub-County, Embu County, Kenya, particularly among lower-ranked officers such as constables and corporals. Existing Kenyan studies on policing stress predominantly focused on urban settings, neglecting rural-specific stressors like logistical constraints, community conflicts, and limited access to mental health support, which may uniquely shape stress levels and PWB in areas like Mbeere South. For instance, no studies have quantified the levels of occupational stress (organizational and operational) or assessed PWB levels using validated scales in this sub-county, leaving a gap in understanding the extent

of these issues among rural officers. Furthermore, the relationship between occupational stress and PWB, including potential mediators like peer support or coping strategies, remained unexplored in this context, with prior Kenyan research lacking disaggregation by rank or locality. Additionally, while global literature highlights interventions like mindfulness and wellness programs, no empirical study has investigated the availability, use, or perceived effectiveness of such interventions in Mbeere South, where resource scarcity and cultural factors may limit their implementation. This study addressed these gaps by examining the levels of occupational stress, measuring PWB levels, assessing the stress-PWB relationship, and evaluating intervention strategies among lower-ranked officers in Mbeere South, providing context-specific insights into a rural, under-resourced policing environment.

## **2.5 Conceptual Framework**

This study examines the relationship between occupational stress and psychological wellbeing among police officers in Mbeere South Sub-County. Occupational stress serves as the independent variable and encompasses both organizational and occupational stress due to operational duties that police officers experience in the course of their duties. Occupational stress due to organizational factors include factors such as heavy workloads and role overload, inadequate resources, in useful leadership and management practices, lack of recognition, job insecurity, internal conflicts, and difficulty balancing work and personal life. These stressors originate from within the institution and affect how officers carry out their responsibilities on a day-to-day basis.

Occupational stress due to operational duties stem from the nature of police work itself and include repeated exposure to traumatic incidents, threats to personal safety, the need to make critical decisions under pressure, strained public relations, emotional demands related to

handling victims and sensitive cases, and navigating legal and ethical pressures. These challenges are inherent to the policing environment and can accumulate over time, leading to significant psychological strain.

The dependent variable in this study is psychological wellbeing. It reflects the officers' emotional and mental state, as observed through indicators such as the presence of a positive mood, emotional stability, a sense of vitality, quality of sleep, and overall engagement with life. These indicators provide a holistic picture of how officers are coping mentally and emotionally within their work context.

The relationship between occupational stress and psychological wellbeing may be influenced by certain intervening variables. These include the availability of organizational support, opportunities for training and professional development, and the officers' own sense of self-efficacy. These factors can either mitigate or worsen the impact of occupational stress. For example, police officers who receive regular mental health support or resilience training may experience less deterioration in their psychological wellbeing despite high levels of stress. Similarly, those who feel confident in their abilities to manage work-related demands may be better equipped to maintain a stable emotional state.

The conceptual framework guiding this study is that high levels of occupational stress, arising from both organizational and operational sources, were likely to negatively affect the psychological wellbeing of police officers in Mbeere South Sub-County. However, this relationship was moderated by the presence or absence of supportive and empowering factors within the officers' work environment and individual capacity.

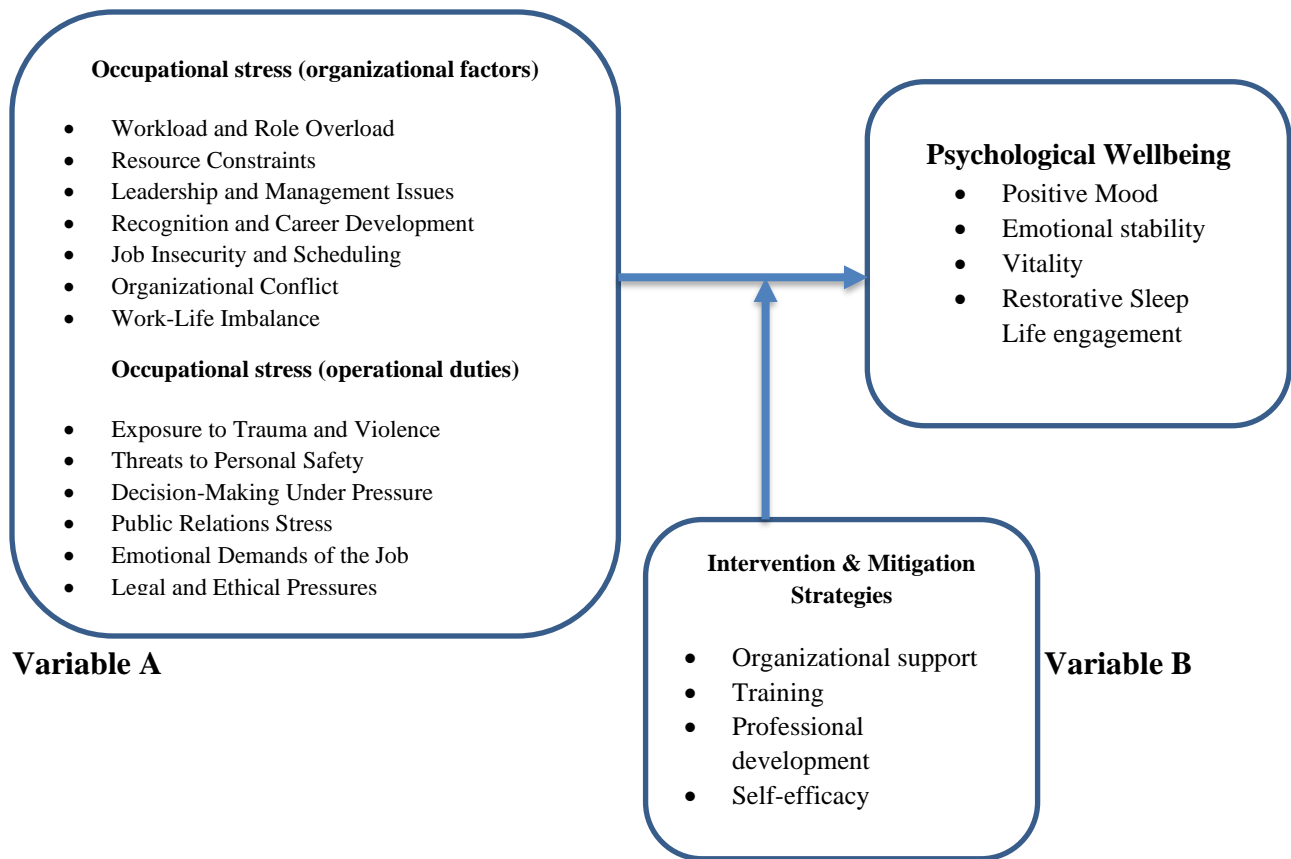


Figure 2. 1: Conceptual Framework

Source: Author (2025)

## 2.6 Summary

This chapter reviews literature on occupational stress and psychological wellbeing among police officers, focusing on theoretical foundations, empirical evidence, and research gaps. It is organized around four sections: theoretical perspectives, empirical studies, gaps, and the conceptual framework. The review is grounded in the Job Demands-Resources (JD-R) Model and the Person-Environment Fit (P-E Fit) Theory. The JD-R Model explains how job demands

and resources influence mental health, while the P-E Fit Theory emphasizes the impact of mismatches between personal abilities and job demands.

Empirical studies reveal that police officers experience high levels of occupational stress due to organizational issues, role overload, and trauma exposure. Psychological wellbeing is shaped by these demands and moderated by factors like resilience and support systems. In Kenya, stress is intensified by resource constraints, operational pressures, and inadequate mental health support, contributing to outcomes like PTSD and reduced performance. Notably, there is limited research on lower-ranked officers and tailored interventions in rural, resource-limited settings. The conceptual framework combines the two theories to explore how occupational stress affects police officers' psychological wellbeing in Mbeere South Sub-County. The review highlights the need for context-specific strategies to improve wellbeing and manage stress usefully. The next chapter outlines the study's methodology.

## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.1 Introduction**

This chapter outlines the methodology that was employed in this study to achieve the research objectives. The methodological framework is designed to systematically investigate the relationships between occupational stress, job demands and resources, and psychological wellbeing among police officers. It details the steps that were taken to gather, analyse, and interpret the data, ensuring the study's validity and reliability.

#### **3.2 Philosophy**

Philosophy refers to the theory of knowledge, particularly the nature, scope, and validity of what constitutes acceptable knowledge in a field of inquiry (Crotty, 2015). It addresses how knowledge is acquired and what counts as legitimate evidence in the research process. In social science research, philosophical assumptions guide the choice of methodologies, data collection instruments, and analysis techniques (Kaushik & Walsh, 2019).

This study is grounded in positivist philosophy, which asserts that knowledge must be based on observable, empirical, and measurable facts rather than subjective interpretations or speculation. Positivism emphasizes the use of scientific methods to uncover objective truths about social phenomena through quantifiable data and statistical analysis (Bhaskar, 2015). Under this paradigm, the researcher maintains a detached and neutral stance, aiming to test hypotheses and establish generalizable relationships through empirical observation. The choice of a positivist philosophy aligns with the study's objective. By adopting a positivist stance, the

research ensured objectivity, replicability, and empirical rigor, essential for establishing valid and reliable findings that can inform policy and practice within the law enforcement sector.

### **3.3 Research Design**

Methodology refers to the overall strategy, framework, or systematic approach used to design, conduct, and justify a study (Cant & Marshall, 2012). It encompasses the rationale behind the choice of methods, the procedures for data collection and analysis, and the philosophical underpinnings (e.g., quantitative, qualitative, or mixed methods) that guide the research process. This study employed a mixed methods approach which is justified by the complex and multifaceted nature of occupational stress and mental health. Quantitative data, collected through standardized instruments, offered measurable and generalizable insights into the levels and patterns of stress and wellbeing. In contrast, qualitative data, gathered through interviews or open-ended questions, provided rich, contextual understanding of how police officers perceive, experience, and cope with stress (Hall, 2020). This combination enhanced the validity of the findings by allowing triangulation and offering a more holistic picture.

A cross-sectional research design was used to examine the occupational stress and psychological wellbeing of police officers at a single point in time. This research design is appropriate and justified for two reasons. First, a cross-sectional design is ideal for capturing a snapshot of the key variables, occupational stress and psychological wellbeing, as they exist in the population at a specific moment. This is particularly useful in the context of police work, where stress levels and coping mechanisms can be influenced by time-sensitive factors such as policy changes, societal tensions, or organizational shifts (Spector, 2019). By collecting data at one point in time, the study can efficiently assess the levels of stress-related issues and their

association with psychological wellbeing across the target group, without the added complexity or time requirements of longitudinal tracking.

### **3.4 Location of the Study**

This study was conducted in Mbeere South Sub-County, one of five sub-counties in Embu County, Kenya, alongside Embu West, Embu East, Embu North, and Mbeere North. Covering an area of 1,312 square kilometers, Mbeere South has a population of 163,476 (Kenya National Bureau of Statistics [KNBS], 2019) and is divided into five administrative wards: Mwea, Mbeti South, Makima, Mavuria, and Kiambere. Situated in a predominantly rural setting, the sub-county is characterized by its semi-arid climate, limited infrastructure, and dispersed settlements, which pose unique challenges for policing. Agriculture, particularly subsistence farming and livestock rearing, dominates the local economy, with low-income levels and limited access to services like healthcare and mental health support contributing to socio-economic stressors. The region's remoteness and poor road networks exacerbate logistical constraints for police operations, such as delayed response times and inadequate resource allocation, which may intensify occupational stress. Community dynamics, including occasional conflicts over land and water resources, further complicate policing duties, exposing officers to heightened operational risks and public hostility. Mbeere South hosts several police stations and posts, primarily staffed by lower-ranked officers (e.g., constables and corporals), who face these challenges with limited institutional support, making the sub-county an ideal context for studying occupational stress and psychological well-being in a rural, low-resource policing environment.

### **3.5 Target Population**

The target population for this study comprised 280 police officers stationed in Mbeere South Sub-County, Embu County, Kenya. Mbeere South has 3 police stations and 7 police posts.

This population includes officers from various units and ranks who are actively involved in law enforcement duties in the region. These officers play a critical role in maintaining law and order in the sub-county, facing numerous challenges that may contribute to occupational stress, including high workloads, trauma exposure, and resource constraints. The police officers in Mbeere South Sub-County represent a diverse group in terms of gender, age, rank, and years of service. These characteristics are important for understanding how different demographic factors influence the levels of occupational stress and psychological wellbeing within the police service. The target population of police officers in Mbeere South Sub-County presents a unique and important group for examining the factors influencing occupational stress and psychological wellbeing. Their diverse characteristics, coupled with the challenging nature of their roles, make them a crucial focus for this research, as findings may offer insights into how to support their wellbeing and enhance their performance in maintaining public safety.

### **3.6 Sampling Techniques**

This study used a multi-stage sampling approach that involved stratified and simple random sampling techniques to select a representative sample of police officers from Mbeere South Sub-County. Stratified sampling technique was used where police officers in Mbeere South Sub-County were categorized based on the ward where they are stationed and therefore there were five strata; Mwea, Mbeti South, Makima, Mavuria, and Kiambere. Simple random sampling process began with obtaining a comprehensive list of all active police officers in Mbeere South Sub-County from the Sub-County Police Headquarters, forming the sampling frame. This list included officers across all ranks stationed at police stations and posts in the five wards (Mwea, Mbeti South, Makima, Mavuria, and Kiambere), totalling approximately 280 officers based on administrative records. Each officer was assigned a unique identification

number to anonymize the data and facilitate randomization. Using a random number generator (via statistical software such as SPSS or a random number table), 150 numbers were generated to select the corresponding officers from the list. This ensured that every officer had an equal chance of being selected, regardless of rank, gender, or station assignment. The selected officers were then contacted through their respective station commanders to participate in the study, with informed consent obtained prior to data collection. This method ensured representativeness within the rural policing context of Mbeere South, addressing logistical constraints and enabling a robust examination of stress and well-being across diverse officer experiences.

Ten respondents for the interviews and 40 for FGDs were selected through purposive sampling from the same pool of officers who completed the quantitative survey. The selection criteria ensured representation across different demographic groups, including rank, years of service, and gender, to capture diverse perspectives. Key informants, such as senior officers and those with specific roles related to mental health or staff welfare were also included in the interviews to provide expert insights.

### **3.6.1 Sample Size Determination**

The sample size for this study was 162 police officers from Mbeere South Sub-County. This sample size was calculated using Cochran's formula for determining the sample size in large populations as follows:  $n_o = \frac{Z^2 \times p \times (1-p)}{e^2}$

Where:

$n_o$  = the sample size,

Z = Z-score corresponding to the desired confidence level (1.96 for a 95% confidence level),

p = estimated proportion of the population experiencing occupational stress is unknown and therefore assumed to be 50% (0.5),

e = margin of error, often set at 5% (0.05).”

$$n_o = \frac{1.96^2 \times 0.5 \times (1-0.5)}{0.05^2} = 384.16$$

For this study, a 95% confidence level and a 5% margin of error were used, and assuming that the proportion of police officers experiencing occupational stress is 50% (since exact levels is unknown), the initial sample size is calculated. Adjusting for finite populations is crucial when the total population being studied is relatively small (Uakarn et al., 2021). The adjustment ensures accuracy and reduces unnecessary oversampling which could be inefficient and potentially misleading. Given that the total population is 280 police officers, and therefore relatively small, the sample size was adjusted using Cochran’s formula for finite populations (Qing & Valliant, 2024) as suggested by Uakarn et al. (2021):

$$n = \frac{n_o}{1 + \frac{n_o - 1}{N}}$$

Where:

N = the total population size (280 police officers).

$$n_o = 384.16$$

$$n = \frac{384.16}{1 + \frac{384.16 - 1}{280}} = 162.2 = 162$$

$$n = 162$$

After adjusting for the finite population, the final sample size of 162 police officers was sufficient to capture representative data on occupational stress and psychological wellbeing. Given that this is a cross-sectional study, the attrition rate was not expected to be high and therefore it did not affect the validity and reliability of this research.

A sample size of 162 police officers was appropriate for several reasons. First, this sample was representative. Collecting data from 162 officers is both feasible and manageable, considering logistical and time constraints, while still allowing for reliable generalization of findings to the police service. The simple random sampling technique and the chosen sample size of 162 officers was well-suited to meet the study's objectives of examining the levels and relationships between occupational stress and psychological wellbeing among police officers.

### **3.7 Research Instruments**

#### **3.7.1 Demographic Questionnaire**

The demographic section of the questionnaire collected key background information on respondents to help contextualize the analysis of occupational stress and psychological wellbeing among police officers in Mbeere South Sub-County. These variables are critical in understanding how individual characteristics may influence stress experiences and mental health outcomes. The age variable provides insight into generational differences in stress perception and coping mechanisms. Younger officers may face different stressors compared to older, more experienced personnel.

Gender was included to explore potential differences in stress exposure, emotional response, and wellbeing across male and female officers. This can help determine if stress mitigation strategies need to be gender-sensitive. The rank of an officer is a crucial

organizational variable, as it may influence the nature of responsibilities, exposure to stressors, and access to support systems. Lower-ranked officers may face more occupational stress due to operational duties and less autonomy, which could impact their psychological wellbeing. The years of service indicate the level of experience and possible cumulative exposure to occupational stress. Officers with longer service may develop better coping strategies or, conversely, experience burnout over time.

Educational level may affect an officer's access to career development opportunities, communication skills, and coping capacity. It is useful in analyzing whether higher education correlates with better stress management or wellbeing outcomes. Lastly, marital status helps to assess the role of family support and personal relationships in buffering work-related stress. Officers with strong family support may exhibit better psychological resilience. Collectively, these demographic variables were analyzed alongside the main study variables to identify patterns, trends, and possible moderating effects on occupational stress and psychological wellbeing.

### **3.7.2 Structured Questionnaire**

Two standardized scales were used to collect the quantitative data: Police Stress Questionnaire (PSQ) and WHO-5 Wellbeing Index. The PSQ is a validated scale commonly applied in research on law enforcement stress (Queirós et al., 2020). It was developed by McCreary and Thompson in 2006 to specifically assess stressors unique to police work. It consists of 40 items divided into two subscales: Organizational police stress questionnaire (PSQ-Org) and operational police stress questionnaire (PSQ-Op). The PSQ-Org has 20 items measuring stressors related to the organization such as workload, management practices, and workplace politics. Operational Police Stress Questionnaire (PSQ-Op) also has 20 items

measuring stressors associated with operational duties such as exposure to violence, shift work, and interactions with the public. Respondents rated, based on their experience, the level of stress associated with specific stressors on a Likert scale ranging from 1 (no stress at all) to 7 (a lot of stress). The scores were summed to create an overall stress score. The higher the score, the more stress the officer is experiencing due to organizational or operational factors. The total possible score for each subscale is 20-140. Scores below 40 indicate low stress that has minimal impact. Scores between 40 and 90 show moderate stress that may affect wellbeing while scores above 90 indicate severe stress that requires interventions. A high PSQ-Org score suggests need for improving workplace conditions, communication, or leadership. A high PSQ-Op score shows the need for trauma support, training, or workload adjustments.

WHO-5 Wellbeing Index was used to assess the psychological wellbeing of the respondents. This is a short self-reported measure of current mental well-being. It consists of five positively worded statements and is often used in clinical and research settings to screen for depression and monitor psychological well-being. Scores from all five items are summed, yielding a raw score ranging from 0 to 25. The raw score is multiplied by 4 to convert it to a scale of 0 to 100 for ease of interpretation:

$$\text{Standardized Score} = \text{Raw Score} \times 4$$

The interpretation of the scores is as follows:

0–48 translates to poor well-being which suggests likely depression or severe distress. A follow-up assessment is recommended.

52–60 means moderate well-being which indicates some concerns that may warrant further exploration.

64–100 translates to good well-being which generally indicates positive mental health.

A raw score of  $\leq 13$  (or  $\leq 52$  when standardized) is considered a clinical indication for further assessment for depression or psychological distress. In addition to standardized scales, there was a section in the questionnaire to collect demographic information which include age, gender, rank, and years of service. This information was critical for understanding the background of the respondents and for identifying any patterns that maybe associated with levels of occupational stress and psychological wellbeing.

### **3.7.3 FGD and Interview Guide**

Qualitative data was collected through in-depth interviews and focus group discussions (FGDs) to supplement the quantitative findings. These methods were expected to provide richer, contextualized insights into the occupational stressors faced by police officers, their psychological wellbeing challenges, and the coping mechanisms they have employed.

Semi-structured interviews were conducted with 10 selected police officers in the rank of inspector, given their many years in the service to explore their personal experiences of occupational stress, the factors contributing to their psychological wellbeing, and the strategies they have used to cope with stress. Interviews were expected to last approximately 45-60 minutes and used an interview guide to ensure consistency while allowing flexibility for the respondents to share their stories. Five focus group discussions were conducted with groups of 8 officers (one group per ward) creating a platform for them to discuss shared experiences and perceptions related to occupational stress. FGD respondents and those of the in-depth interviews were part of the 162-sample size. The data collected from FGD and in-depth interviews complement that of the structured questionnaire.

The use of qualitative methods is crucial to gain deeper insights into the complex nature of occupational stress among police officers. While the quantitative data provide a broad overview of stress levels and wellbeing, the qualitative methods allowed for a richer understanding of the personal experiences, emotional responses, and coping mechanisms employed by officers. These methods were particularly useful for capturing nuances that are often difficult to measure quantitatively, such as the impact of specific stressors on family life or the role of informal peer support in managing stress.

### **3.8 Pilot Study**

A pilot study was conducted prior to the main data collection to assess the clarity, feasibility, and appropriateness of the research instruments and procedures. The pilot involved a small sample of 15 police officers from Mbeere South Sub-County who were not included in the main study. As a rule of thumb, a small sample of 10-15 participants is enough for a study with a sample of 162 participants to test the research instruments (Ying et al., 2025). This pilot enabled the researcher to identify and rectify ambiguous or confusing questionnaire items, estimate the average time required for completing the survey, refine the structure and flow of key informant interview (KII) and focus group discussion (FGD) guides, assess the logistical aspects of data collection, and test the NVivo coding framework's appropriateness for the thematic analysis. Findings from the pilot informed necessary revisions to the instruments and procedures, ensuring that they are culturally appropriate, ethically sound, and contextually relevant.

#### **3.8.1 Validity of Instruments**

To ensure content validity, all instruments underwent expert review by at least three professionals with expertise in occupational psychology, policing, and mental health. Their feedback was used to assess whether the items adequately capture the constructs of occupational

stress and psychological wellbeing within the local policing context. The Police Stress Questionnaire (PSQ), which consists of two subscales, organizational and occupational stress due to operational duties, has been widely validated and used in law enforcement populations globally. It was reviewed for contextual relevance and appropriateness in the Kenyan context. The WHO-5 Wellbeing Index is a brief global measure of subjective psychological wellbeing with robust cross-cultural validity (Topp et al., 2015). It was also reviewed to ensure that language and phrasing resonate with the local population. The KII and FGD guides were validated through expert judgment and piloting to ensure questions are clear, non-leading, and capable of eliciting rich, in-depth responses.

Construct validity was enhanced through theoretical grounding in the Job Demands-Resources (JD-R) Model and Person-Environment Fit Theory. The instruments were chosen to align with key theoretical constructs. PSQ measures align with the JD-R Model, capturing job demands and strain. WHO-5 measures align with the subjective wellbeing dimension in the Person-Environment Fit Theory. Correlational and regression analyses also served to assess the expected relationships among variables, supporting construct validity statistically.

Face validity was established by pre-testing the instruments with a small sample of police officers, ensuring items are interpreted as intended. Feedback informed the wording and format of both qualitative and quantitative tools.

### **3.8.2 Reliability of Instruments**

Cronbach's Alpha was calculated using SPSS Version 25 to assess the internal consistency of the PSQ and WHO-5 scales. A threshold of  $\alpha \geq 0.70$  was considered acceptable. Each subscale of the PSQ (operational and organizational) was assessed separately. Previous

studies have reported Cronbach's alpha coefficients of 0.89 and 0.90 for the PSQ subscales (McCreary & Thompson, 2006), and 0.82 for WHO-5 across diverse populations (Topp et al., 2015). These benchmarks guided interpretation.

To ensure reliability in qualitative analysis, the inter-coder agreement was tested by having two independent coders analyze a subset of transcripts using NVivo. Coding discrepancies was discussed and resolved through consensus, and the coding framework was refined accordingly. A reflexive journal was maintained to document analytical decisions and improve auditability.

### **3.9 Data Collection Procedure**

The researcher sought authorization from Tangaza University. After obtaining the authorization, she sought a research permit from National Commission for Science, Technology, and Innovation (NACOSTI) and permission to conduct research from the Kenya Police service. After obtaining these documents, the researcher embarked on data collection. At the respondents' level, the researcher sought informed consent from the police officers participating in the study. This section outlines the step-by-step process for collecting both quantitative and qualitative data from the respondents, detailing how police officers were recruited, how the survey was administered, and the procedures for conducting interviews and focus group discussions (FGDs). The first step involved recruiting police officers for the study from the target population in Mbeere South Sub-County. This involved visiting police stations in Mbeere South Sub-County and informing police officers about the study. The researcher met police officers in their respective police stations. A simple random sampling strategy was employed to ensure representation across the sub-county. Key informants, including senior officers and mental health staff, were also identified using purposive sampling method for qualitative data collection.

Once respondents were identified, they were contacted directly through their supervisors or the police department's human resources unit. Each officer was provided with detailed information about the study at their respective work stations, including its purpose, procedures, and expected duration. Respondents were required to sign written informed consent, confirming their voluntary participation. It was made clear that their responses would remain confidential, and they could withdraw from the study at any point without any consequences. The quantitative and qualitative data collection took place concurrently.

The researcher administered questionnaires to respondents using a face-to-face method. This approach is chosen to ensure higher response rates and to assist respondents who may have questions or need clarifications regarding the items in the questionnaire. The researcher scheduled appointments with officers to complete the survey during a designated time, either at their work stations or another location convenient for them. The survey questionnaire took approximately 30-45 minutes to complete.

Following the quantitative data collection, in-depth interviews were conducted with key informants who included police inspectors, officers commanding stations, officers commanding police divisions, and officers in charge of police mental health. The interviews were held in private settings at police stations or administrative offices to ensure confidentiality and encourage respondents to speak freely.

Focus group discussions were organized with groups of 6–8 officers, representing different ranks and units, to explore shared experiences of stress, coping strategies, and psychological wellbeing in a collective setting. Each FGD was conducted in a neutral location, such as a community center or meeting room, to create a comfortable and open environment for

the officers. This encouraged them to discuss issues under investigation freely without fear of victimization. The discussions were facilitated by the researcher as the moderator and a note-taker documenting key themes and interactions. The moderator followed a discussion guide but allowed flexibility for respondents to engage in meaningful dialogue. Each session of group discussion lasted for 60–90 minutes and refreshments were provided to create a relaxed atmosphere. Anonymity was ensured, and no individual responses can be linked to specific respondents in the reports.

All collected data was securely stored in password-protected files and locked cabinets. The data was anonymized during transcription to protect the identities of the respondents. A debriefing session was conducted with respondents at the end of the data collection phase to thank them for their participation and provide them with information on how the study results would be shared. In case of any psychological or emotional harm arising, they were addressed. Respondents were also reminded of their rights to withdraw or request the removal of their data if desired.

### **3.10 Data Analysis**

The quantitative data collected in this study was analyzed using the Statistical Package for the Social Sciences (SPSS version 25) software. The analysis followed a systematic plan aligned with the study objectives and research questions. Data was first entered into SPSS, checked for completeness, and cleaned to identify and correct any missing values, outliers, or entry errors. Descriptive statistics (frequencies, percentages, means, and standard deviations) were used to summarize the demographic characteristics of the respondents and the main variables such as levels of occupational stress and psychological wellbeing. Internal consistency

of the data collection instruments (occupational stress and wellbeing scales) was assessed using Cronbach's alpha coefficient to ensure the reliability of the items used in the questionnaire.

To test the relationships and differences between key variables, correlation analysis, ANOVA, and regression analysis were employed. Correlation analysis (Pearson's correlation coefficient) was used to examine the strength and direction of the relationship between occupational stress and psychological wellbeing. ANOVA was used to compare levels of stress or wellbeing across different demographic or occupational groups such as gender, rank, and years of service. Regression analysis was conducted to determine the extent to which occupational stress predicts psychological wellbeing, controlling for other variables such as age, rank, or duty station. Before conducting inferential analyses, assumptions such as normality, linearity, homoscedasticity, and multicollinearity were tested to ensure the appropriateness of the chosen statistical methods. All statistical tests were conducted at a 95% confidence level ( $p < 0.05$ ) to determine the statistical significance of the results.

Qualitative data collected through interviews and focus group discussions underwent a systematic coding and anonymization process to ensure both data integrity and respondent confidentiality. All qualitative responses were transcribed verbatim. During this stage, any personally identifying information (such as names, locations, ranks, duty stations, or incident specifics) mentioned by respondents were immediately redacted or replaced with generic descriptors or pseudonyms like "Officer A", "Urban Station"). Each transcript was assigned a unique code (such as P01, P02), and a separate master list linking these codes to respondents was securely stored and deleted after data analysis. The anonymized transcripts were used for all subsequent analysis and reporting. This process ensures that even the researcher cannot later trace the data back to individual respondents.

The qualitative data was analyzed using thematic analysis to identify key themes related to occupational stressors, psychological wellbeing, and coping strategies among police officers. Thematic analysis is a flexible qualitative method that involves identifying, analyzing, and reporting patterns or themes within data. This process followed a structured approach to ensure that the insights gained from the qualitative data are reliable and meaningful. NVivo 15 was used to aid in qualitative data analysis. The following three NVivo queries were used to analyse qualitative data: Text Search Query, Word Frequency Query, and Coding Query. Text Search Query was used to identify where key terms or concepts appear across the data set and understand their context. Word Frequency Query was used to explore recurring words and develop inductive codes or themes while Coding Query was used to identify co-occurrence of themes, compare how different nodes interact, and explore relationships between codes. A structured narrative of themes and subthemes, verbatim respondent quotes as evidence, and NVivo-generated visuals (word clouds, models, charts) were used to present qualitative data findings. A summary table that organizes the key themes, definitions, subthemes, and sample quotes was presented for clarity.

First, the audio recordings of interviews and FGDs were transcribed verbatim to ensure no information is lost in the process. The researcher then familiarized herself with the data by reading the transcripts multiple times to get an overall sense of the content. The next step involves coding the data. Open coding was used, where key ideas and phrases related to occupational stress, psychological wellbeing, and coping strategies were labeled. For example, a statement about workload pressure might be coded as "work-related stressor," and a mention of peer support was coded as "coping strategy." Once the initial codes have been generated, related codes were grouped to form broader themes. These themes captured major patterns in the data,

such as sources of stress (workload, trauma exposure, and administrative pressure), psychological wellbeing challenges (Burnout, anxiety, and depression), and coping strategies (Peer support, seeking professional counselling, and exercise).

The identified themes were reviewed and refined to ensure they accurately represent the data. This involved checking whether the themes work in relation to both the coded data and the entire dataset. Each theme was clearly defined and named, ensuring that they are distinct and capture the essence of the qualitative data. For example, a theme named “Emotional Exhaustion and Burnout” could encapsulate experiences related to long hours and chronic stress.

### **3.11 Ethical Considerations**

Ethical considerations are crucial to ensuring that this study upholds the rights and welfare of all respondents (Arifin, 2018), particularly in research involving sensitive topics such as occupational stress and psychological wellbeing. This section outlines the ethical protocols that were followed, including informed consent, confidentiality, risk mitigation, and the process for obtaining ethical approval.

The study adhered to strict ethical guidelines to protect the respondents' rights and welfare. Police officers, as the study's respondents, were made fully aware of their rights, including the right to voluntary participation, the right to withdraw from the study at any time without consequence, and the assurance that their personal information would remain confidential. Special attention was given to the sensitivity of the topic, occupational stress and psychological wellbeing, acknowledging the potential vulnerability of respondents when discussing these issues.

Informed consent was obtained from all respondents before any data collection or audio recording takes place. The informed consent process ensured that respondents were fully aware of the study's purpose, procedures, and their rights. Respondents were provided with an information sheet that clearly explained the objectives of the study, what their participation entailed, the voluntary nature of their involvement, and how the data was used. The information was presented in a clear, non-technical language to ensure understanding. Respondents were given the opportunity to ask questions about the study before agreeing to participate. After reviewing the information sheet, respondents were asked to sign a consent form to confirm their willingness to take part in the research and audio recording for those that participated in interviews and focus group discussions. Written consent was collected to formalize their agreement. It was explicitly stated that respondents could withdraw their consent and discontinue their participation at any stage of the study, without any consequences or penalties.

To safeguard the identity of respondents, five measures were implemented and they included anonymization, confidential data handling, and no identifying information in reports, post-study confidentiality, and voluntary participation. In regards to anonymization, all data collected was anonymized. Respondents were not identified by name or personal identifiers. Instead, unique codes or pseudonyms were assigned to each respondent, which were used in all data records and reporting.

Raw data (including interview transcripts and completed questionnaires) was securely stored in password-protected digital files and locked cabinets accessible only to the researcher. Any files linking respondents to their assigned codes were kept separately and destroyed after data analysis. When presenting findings, care was taken to exclude any details that could

potentially identify individuals, such as rank, duty station, or specific incidents discussed during interviews. Direct quotes were edited to remove any references that could lead to identification.

After the study concludes, all identifying information was destroyed. Anonymized data was retained for academic purposes but remained untraceable to any respondent. Participation in the study was entirely voluntary. No coercion or pressure was applied. Respondents were reminded that they may refuse to answer any question or withdraw from the study at any point.

While this study poses minimal risk to respondents, it was important to acknowledge and plan for any potential psychological, emotional, or professional risks that may arise from discussing sensitive topics such as occupational stress and psychological wellbeing. Discussing personal experiences related to stress, trauma, or mental health caused emotional discomfort for some respondents. To mitigate this risk, participation was strictly voluntary, and respondents were informed that they may decline to answer any question or withdraw from the study at any time without penalty. Interviews were conducted in a supportive, non-judgmental, and private environment to encourage openness and reduce discomfort. If a respondent shows signs of distress, the interview were paused or stopped as needed, and appropriate psychological support referrals were offered, such as counseling services available within the police service or through external mental health providers.

Another risk was that respondents feared that sharing honest opinions about occupational stress and their psychological wellbeing could lead to retaliation, stigma, or damage to their reputation or career. To mitigate this risk, anonymity and confidentiality were strictly maintained throughout the study. No personal identifiers were collected in the final dataset. Respondents were assigned codes, and no names, job titles, or specific locations were used in reporting

findings. Data was stored securely, and only the researcher has access to raw data. The findings were presented in aggregate form, ensuring no single individual can be identified from the results.

Time-related inconvenience was also a risk for the respondents. Participation slightly disrupted respondents' work schedules, causing inconvenience. To mitigate this, appointments for interviews or data collection were scheduled at the convenience of the respondents, preferably during off-duty hours or approved breaks. The study instruments were designed to be as concise as possible, minimizing the time burden.

Before commencing data collection, ethical approval was obtained from relevant authorities to ensure that the study meets ethical standards for research involving human respondents. A formal application for ethical approval was submitted to the university's ethics review board. The application included the research proposal, the informed consent documents, and details on how respondents' rights were protected. The ethics board reviewed the study design to ensure that the risks to respondents are minimized and that their welfare is safeguarded.

In addition to university ethics approval, permission to conduct the study was sought from NACOSTI and the police administration. The researcher worked closely with police authorities to ensure that the study adheres to institutional protocols and that respondents' participation in the study did not interfere with their professional duties. Ethical clearance documents were kept on file and copies of the approval letters was provided to the research team for reference during data collection. The study adhered to all ethical requirements as was specified by the university ethics board, NACOSTI and the police administration.

### **3.12 Expected Contribution of the Study**

This study contributes significantly to the advancement of academic and practical knowledge in the areas of occupational health psychology, public safety, and human resource management within high-stress professions such as law enforcement. Specifically, it fills existing gaps in local and regional research by providing empirical data on the nature of occupational stress and its relationship with psychological wellbeing among police officers in Kenya, a context that remains under-researched. Using a mixed methods approach, the study offered both quantitative evidence and qualitative insights, enabling a deeper and clearer understanding of the individual and institutional factors contributing to stress, as well as the coping strategies employed by officers. The findings also contribute to the development or refinement of theoretical models related to stress and wellbeing in law enforcement, particularly within African or Global South contexts. In addition, the study informs future research by identifying new areas of inquiry, methodological approaches, and practical interventions that can be replicated or adapted in similar security settings.

The findings of this study are of practical value to multiple stakeholders in the community including the police service, policy makers, mental health professionals, and the general public. The results provide police leadership and human resource departments with a data-driven basis for designing and implementing employee support programs, such as stress management training, counseling services, and improved working conditions. Findings guided the development of policies and interventions aimed at reducing burnout, improving morale, and enhancing the overall psychological resilience of officers. The study offered evidence-based recommendations for the policy makers and government agencies to inform public safety policy, especially on how to support frontline officers and promote a healthier, more useful police

service. Insights support reforms related to working hours, staffing levels, and mental health infrastructure within security institutions. Mental health practitioners and NGOs working with uniformed services can use the findings to design targeted interventions, community sensitization programs, and advocacy campaigns focused on the wellbeing of law enforcement personnel. The community at large also benefits from the outcomes of this study. A psychologically healthy police service can deliver better, more humane and more useful service to the public. Therefore, the community stands to benefit from improved police-community relations and a more responsive public safety system.

### **3.13 Summary**

The chapter begins with an overview of the research philosophy and design, which is tailored to meet the objectives of the study. The design informs the target population and sampling techniques used to select respondents, ensuring that the sample represents the population under investigation. Following this, the data collection methods are discussed, including the tools used to gather both quantitative and qualitative data, such as survey questionnaire, key informant interviews (KIIs), and focus group discussions (FGDs). Finally, the chapter outlines the data analysis strategies that were applied to address the research questions, detailing the statistical and thematic approaches that were used to interpret the findings.

## CHAPTER FOUR

### FINDINGS

#### 4.1 Introduction

This chapter covers the data analysis, interpretation and presentation of findings. It starts with the demographic characteristics and then present results based on the three objectives of the study. The chapter ends with qualitative data analysis where data coding, emerging themes and summary of qualitative insights are outlined.

##### 4.1.1 Response Rate

The questionnaires distributed were 162 and those completely filled and suitable for analysis were 150. This translates to a response rate of 92.6%. Table 1 shows the study's response rate.

**Table 1: Response Rate**

| <b>Item</b>                       | <b>N</b>   | <b>%</b>   |
|-----------------------------------|------------|------------|
| Questionnaires filled             | 150        | 92.6%      |
| Non-response                      | 12         | 7.4%       |
| <b>Questionnaires distributed</b> | <b>162</b> | <b>100</b> |

#### 4.2 Demographic Characteristics

##### 4.2.1 Age Distribution

Table 2 presents respondents distribution by age.

**Table 2: Respondents Distribution by Age**

| <b>Age in Years</b> | <b>N</b>   | <b>%</b>      |
|---------------------|------------|---------------|
| 24-29               | 22         | 14.7%         |
| 30-35               | 36         | 24.0%         |
| 36-41               | 42         | 28.0%         |
| 42-47               | 30         | 20.0%         |
| 48-53               | 14         | 9.3%          |
| 54-59               | 6          | 4.0%          |
| <b>Total</b>        | <b>150</b> | <b>100.0%</b> |

The age distribution of respondents revealed that 28.0% fell within the 36–41 years age bracket, followed by those aged 30–35 years (24.0%) and 42–47 years (20.0%). A smaller proportion of respondents were in the 24–29 years (14.7%), 48–53 years (9.3%), and 54–59 years (4.0%) categories. This suggests that the sample was predominantly composed of mid-career police officers. The concentration of respondents in the 30–47 years range (24.0%, 28.0%, 20.0% and collectively 72%) suggests that the findings may reflect the perspectives and experiences of established police officers with moderate to advanced career tenure.

#### **4.2.2 Gender Distribution**

Table 3 shows distribution of respondents by gender.

**Table 3: Respondents distribution by gender**

| <b>Gender</b> | <b>N</b> | <b>%</b> |
|---------------|----------|----------|
| Male          | 94       | 62.7%    |

|              |            |               |
|--------------|------------|---------------|
| Female       | 56         | 37.3%         |
| <b>Total</b> | <b>150</b> | <b>100.0%</b> |

Male respondents constituted 62.7% while female respondents accounted for 37.3%. The gender distribution of respondents revealed a predominance of male police officers (62.7%) compared to their female counterparts (37.3%). This disparity aligns with global and national trends in policing, where male officers traditionally outnumber female officers due to historical, cultural, or institutional factors (UNODC, 2020; NPS, 2022).

#### 4.2.3 Rank Distribution

Table 4 presents respondents distribution by rank.

**Table 4: Respondents distribution by rank**

| <b>Rank</b>     | <b>N</b>   | <b>%</b>      |
|-----------------|------------|---------------|
| Constable       | 108        | 72.0%         |
| Corporal        | 22         | 14.7%         |
| Sergeant        | 4          | 2.7%          |
| Inspector       | 8          | 5.3%          |
| Chief Inspector | 8          | 5.3%          |
| <b>Total</b>    | <b>150</b> | <b>100.0%</b> |

The rank distribution revealed a hierarchical structure, with 72.0% holding the rank of Constable, followed by Corporals (14.7%). Higher-ranking officers, Sergeants (2.7%), Inspectors (5.3%), and Chief Inspectors (5.3%), reflecting the typical staffing composition of police organizations where lower ranks outnumber senior positions. Constables, being the frontline

officers, may face higher exposure to stressors (e.g., direct public interaction, shift work, or limited decision-making autonomy). The distribution by rank suggests the findings primarily reflect stressors at the operational level. Senior officers (Inspectors and above) may experience stressors tied to administrative burdens or leadership pressures.

#### 4.2.4 Years of Service

Table 5 shows respondents distribution by years of service.

**Table 5: Respondents distribution by years of service**

| <b>Years of Service</b> | <b>N</b>   | <b>%</b>      |
|-------------------------|------------|---------------|
| Less than 1 year        | 2          | 1.3%          |
| 1-5                     | 10         | 6.7%          |
| 6-10                    | 44         | 29.3%         |
| 11-15                   | 22         | 14.7%         |
| 16+                     | 72         | 48.0%         |
| <b>Total</b>            | <b>150</b> | <b>100.0%</b> |

Forty eight percent (48.0%) of the respondents reported 16 or more years of service, suggesting a highly experienced sample. Those with 6–10 years of service constituted 29.3%, while 11–15 years and 1–5 years accounted for 14.7% and 6.7%, respectively. 1.3% had served for less than one year. This distribution suggests that the majority of respondents have served for more than 5 years and may have accumulated substantial institutional knowledge and exposure to occupational stressors over time. The relatively small proportion of officers in the early stages of their careers implies that the findings may be more reflective of the perceptions and experiences of seasoned personnel rather than newcomers.

#### 4.2.5 Educational Attainment

Table 6 presents respondents distribution by education attainment.

**Table 6: Respondents distribution by education attainment**

| <b>Education</b>  | <b>N</b>   | <b>%</b>      |
|-------------------|------------|---------------|
| High school       | 80         | 53.3%         |
| Diploma           | 36         | 24.0%         |
| Bachelor's degree | 32         | 21.3%         |
| Other             | 2          | 1.3%          |
| <b>Total</b>      | <b>150</b> | <b>100.0%</b> |

Fifty three percent (53.3%) of the respondents reported high school education as their highest qualification. Those with diplomas and bachelor's degrees constituted 24.0% and 21.3%, respectively. A fraction (1.3%) reported "Other" educational backgrounds, which may include post graduate, vocational or specialized training. This distribution indicates that the police service, in this sample, is predominantly composed of officers whose highest formal education attainment was at the secondary school level. There were a relatively smaller proportion of officers with tertiary qualifications (diplomas and bachelor's degrees). This suggests that the respondents could understand clearly what the study was about and provided information from a point of information. In addition, the presence of officers with advanced qualifications, may enhance specialized roles and leadership capacity within the police service to address occupational stress and improve officers' psychological well-being.

#### 4.2.6 Marital Status

Table 7 shows respondents distribution by marital status.

**Table 7: Respondents distribution by marital status**

| <b>Marital Status</b> | <b>N</b>   | <b>%</b>      |
|-----------------------|------------|---------------|
| Single                | 18         | 12.0%         |
| Married               | 126        | 84.0%         |
| Divorced/separated    | 6          | 4.0%          |
| <b>Total</b>          | <b>150</b> | <b>100.0%</b> |

Eighty four percent (84.0%) of the respondents were married, while 12.0% were single, and 4.0% identified as divorced or separated. The findings reflect the experiences of officers embedded in family structures, where stressors may include work-life balance conflicts or familial obligations exacerbating job pressures.

#### **4.3 Levels of Occupational Stress**

The first objective of the study was to find out the levels of occupational stress among police officers in Mbeere South Sub-County, Embu County, Kenya. Table 8 presents results on total stress score from organizational factors and operational duties.

**Table 8: Total Stress Score from organizational factors and operational duties**

| <b>Total Occupational Stress</b> | <b>N</b>   | <b>%</b>      |
|----------------------------------|------------|---------------|
| Low stress <=80                  | 6          | 4.0%          |
| Moderate stress 81-180           | 64         | 42.7%         |
| Severe stress 181-280            | 80         | 53.3%         |
| <b>Total</b>                     | <b>150</b> | <b>100.0%</b> |

The findings indicate high levels of occupational stress among police officers. Specifically, 53.3% of respondents reported cumulative stress when considering both organizational and operational stressors, while 42.7% reported moderate stress. 4.0% of officers were categorized as experiencing low stress, underscoring that tolerable working conditions are the exception rather than the norm in this occupational setting. Collectively, the distribution pattern reveals that 96.0% of officers operate under moderate-to-severe stress levels.

#### 4.3.1 Occupational Stress due to organizational factors

Table 9 shows findings on occupational stress due to organizational factors.

**Table 9: Occupational stress due to organizational factors**

| <b>Occupational stress (Org)</b> | <b>N</b>   | <b>%</b>      |
|----------------------------------|------------|---------------|
| Low stress <=39                  | 6          | 4.0%          |
| Moderate stress 40 – 90          | 62         | 41.3%         |
| Severe stress 91 – 140           | 82         | 54.7%         |
| <b>Total</b>                     | <b>150</b> | <b>100.0%</b> |

The findings presented in Table 9 reveal levels of occupational stress among police officers stemming from organizational factors, with 54.7% experiencing severe stress levels. This contrasts with 4% who report low stress. The concentration of officers in the severe stress category (54.7%), combined with an additional 41.3% experiencing moderate stress, reveals an environment where stressors may have surpassed employees' adaptive capacity.

Table 10 shows results on descriptive statistics on occupational stress due to organizational factors.

**Table 10: Descriptive Statistics on Occupational Stress due to organizational factors**

| <b>Statement</b>                                      | <b>N</b> | <b>Mean</b> | <b>Std. Deviation</b> |
|---|----------|-------------|-----------------------|
| Excessive paperwork                                   | 150      | 3.00        | 1.655                 |
| Lack of resources to do the job properly              | 150      | 4.92        | 1.845                 |
| Bureaucratic red tape                                 | 150      | 3.95        | 2.006                 |
| Staff shortages                                       | 150      | 4.95        | 1.756                 |
| Inconsistent leadership and management decisions      | 150      | 4.40        | 1.966                 |
| Lack of recognition for good work                     | 150      | 4.97        | 1.824                 |
| Internal conflicts with supervisors                   | 150      | 4.15        | 1.950                 |
| Conflicts with colleagues                             | 150      | 2.95        | 1.903                 |
| High workload and unrealistic expectations            | 150      | 4.85        | 1.902                 |
| Balancing administrative duties with operational work | 150      | 3.67        | 1.975                 |
| Lack of career advancement opportunities              | 150      | 5.08        | 2.172                 |
| Job insecurity and concerns about layoffs             | 150      | 4.19        | 2.245                 |
| Shift scheduling and long hours                       | 150      | 4.57        | 2.254                 |
| Limited time for personal and family life             | 150      | 5.53        | 1.982                 |
| Feeling unappreciated by the organization             | 150      | 5.28        | 1.901                 |
| Pressure to meet performance targets                  | 150      | 4.15        | 1.930                 |
| Poor communication within the organization            | 150      | 4.23        | 2.140                 |
| Limited support from senior management                | 150      | 4.81        | 1.844                 |

|  |     |      |       |
|--|-----|------|-------|
| Favoritism and office politics                   | 150 | 5.15 | 2.356 |
| Limited access to psychological support services | 150 | 3.84 | 2.259 |

The analysis of organizational stressors reveals challenges undermining police officers' wellbeing, with work-life balance emerging as the most acute pressure point (M=5.53). The highest mean scores form a telling pattern: feeling unappreciated, M=5.28; lack of recognition, M=4.97, career advancement, M=5.08 favoritism/politics, M=5.15, staff shortages, M=4.95. The 5+ mean scores cluster around psychological and career concerns rather than operational burdens (e.g., paperwork, M=3.00), suggesting officers can tolerate job demands when they feel supported and valued. The stark work-life conflict (M=5.53) likely exacerbates other stressors, as officers struggling with shift schedules (M=4.57) have diminished capacity to cope with organizational frustrations. The data reveals a critical disconnect between management priorities and officer needs. While performance targets show moderate stress (M=4.15), the extreme scores on recognition and appreciation suggest officers perceive their efforts as invisible. This misalignment is compounded by reported leadership inconsistencies (M=4.40) and poor communication (M=4.23), creating an environment where stress proliferates through both policy and culture.

Two unexpected findings warrant attention: the relatively low stress from colleague conflicts (M=2.95) implies functional peer relationships, while moderate scores on psychological support access (M=3.84) may reflect either adequate availability or low utilization due to stigma. The high standard deviations ( $SD \geq 2.0$  for most items) indicate significant individual variability in stress experiences, possibly tied to rank, tenure, or assignment differences. These results require targeted interventions addressing both structural and cultural dimensions. Prioritizing

work-life balance through shift reforms, establishing transparent promotion criteria to reduce favoritism stress, and implementing recognition systems could mitigate the highest-scored stressors. The findings particularly highlight the need for leadership training to address management inconsistencies that amplify other organizational pressures.

#### 4.3.2 Occupational Stress due to operational duties

Table 11 presents results on occupational stress due to operational duties.

**Table 11: Occupational Stress due to operational duties**

| <b>Occupational Stress(Op)</b> | <b>N</b>   | <b>%</b>      |
|--------------------------------|------------|---------------|
| Low stress <=39                | 8          | 5.3%          |
| Moderate stress 40 - 90        | 54         | 36.0%         |
| Severe stress 91 - 140         | 88         | 58.7%         |
| <b>Total</b>                   | <b>150</b> | <b>100.0%</b> |

The data reveals occupational stress among police officers, with 58.7% experiencing severe stress levels due to operational duties. This highlights the psychological and physical demands of frontline policing, particularly in high-risk situations involving danger, trauma, and unpredictability. A fraction of 5.3% officers report low stress. The 36.0% in the moderate stress indicating that even those not in the highest stress category still face considerable challenges. These findings underscore a need for trauma-informed support systems, risk mitigation strategies, and mental health interventions tailored to the unique stressors of operational policing. The data suggests that without structural and psychological safeguards, exposure to stress may lead to long-term wellbeing concerns among officers.

Table 12 presents descriptive statistics on occupational stress due to operational duties.

**Table 12: Descriptive Statistics on Occupational Stress due to operational duties**

| <b>Statement</b>   | <b>N</b> | <b>Mean</b> | <b>Std. Deviation</b> |
|--|----------|-------------|-----------------------|
| Responding to violent incidents  | 150      | 4.92        | 2.122                 |
| Investigating cases involving child abuse or domestic violence           | 150      | 3.83        | 1.962                 |
| Handling emotionally distressing cases (for example suicides, homicides) | 150      | 4.36        | 2.165                 |
| Risk of personal injury or death on duty                                 | 150      | 5.37        | 1.958                 |
| Making critical decisions under pressure                                 | 150      | 4.67        | 2.088                 |
| Being exposed to unpredictable and dangerous situations                  | 150      | 5.47        | 1.892                 |
| Facing hostility from the public   | 150      | 5.59        | 1.796                 |
| Dealing with disrespect or non-compliance from citizens                  | 150      | 4.79        | 2.022                 |
| Public criticism and media scrutiny                                      | 150      | 5.20        | 1.802                 |
| Managing the emotional impact of dealing with victims and families       | 150      | 4.36        | 1.901                 |
| Witnessing traumatic events  | 150      | 5.13        | 2.049                 |
| The need to use force in certain situations                              | 150      | 4.77        | 2.030                 |
| Carrying firearms and the responsibility that comes with it              | 150      | 4.20        | 2.402                 |
| Fear of legal repercussions for job-related decisions                    | 150      | 5.24        | 2.097                 |
| Working night shifts and irregular hours                                 | 150      | 4.23        | 2.244                 |
| High-speed chases and vehicle-related risks                              | 150      | 3.91        | 2.156                 |

|   |     |      |       |
|---|-----|------|-------|
| Pressure to solve crimes quickly  | 150 | 4.03 | 2.007 |
| Managing informants and undercover operations                               | 150 | 3.81 | 2.190 |
| Lack of control over work assignments                                       | 150 | 3.92 | 2.058 |
| Balancing multiple roles (for example law enforcement, counselor, mediator) | 150 | 3.63 | 2.141 |

The analysis of occupational stress due to operational duties reveals, officers report the highest stress levels from direct public interactions (facing hostility, M=5.59; public criticism, M=5.20) and life-threatening situations (unpredictable danger, M=5.47; injury risk, M=5.37). This triad of threats - from the public, physical environment, and legal system (fear of repercussions, M=5.24) creates a uniquely stressful operational reality where officers constantly navigate hostility while managing mortal risks and accountability pressures.

The most severe stressors (all scoring above 5.0) share three characteristics: they are (1) inherent to policing (unavoidable in daily duties), (2) potentially traumatic (witnessing trauma, M=5.13), and (3) largely outside officers' control. The high standard deviations (SD=2.0) suggest these experiences vary among officers, likely due to assignment types or personal resilience levels. Secondary stressors cluster around decision-making pressures (critical decisions, M=4.67; use of service, M=4.77) and emotional labor (managing victim trauma, M=4.36). Some conventional police stressors show moderate impacts (child abuse cases, M=3.83; high-speed chases, M=3.91), possibly indicating better training or acclimatization to these expected challenges. The lowest scores relate to role ambiguity (balancing multiple roles, M=3.63), suggesting officers may view this flexibility as part of professional identity rather than a stressor.

#### 4.4 Levels of Psychological Wellbeing among Police officers

The second objective of the study was to determine the levels of psychological wellbeing among police officers in Mbeere South Sub-County, Embu County, Kenya. Table 13 presents results on psychological well-being scores.

**Table 13: Psychological Wellbeing Scores**

| <b>Psychological Wellbeing Scores</b> | <b>N</b>   | <b>%</b>      |
|---------------------------------------|------------|---------------|
| Poor well-being <=48                  | 64         | 42.7%         |
| Moderate well-being 52-60             | 30         | 20.0%         |
| Good well-being 64-100                | 56         | 37.3%         |
| <b>Total</b>                          | <b>150</b> | <b>100.0%</b> |

The results indicate a proportion of police officers in the sample experience compromised psychological well-being. Specifically, 42.7% scored at or below 48, placing them in the category of poor well-being. This finding suggests risk of mental health difficulties. A smaller segment (20.0%) fell within the moderate well-being range (scores between 52 and 60), reflecting officers whose psychological state is neither impaired nor optimally functioning. This group may represent individuals who are vulnerable to deteriorating mental health if stressors persist or interventions are lacking. 37.3% of officers' attained scores within the good well-being category (64–100), suggesting that more than one-third of the sample maintains a healthy psychological state despite occupational pressures. These findings highlight an imbalance, where 62.7% of officers fall at or below the moderate threshold. Such a distribution underscores the need for targeted mental health support and organizational reforms to strengthen resilience and reduce the risk of psychological strain.

Table 14 shows the descriptive statistics on levels of psychological well-being.

**Table 14: Descriptive Statistics on Levels of Psychological Wellbeing**

| <b>Statement</b>   | <b>N</b> | <b>Mean</b> | <b>Std. Deviation</b> |
|--|----------|-------------|-----------------------|
| I have felt active and vigorous                            | 150      | 3.17        | 1.856                 |
| I have felt cheerful and in good spirits                   | 150      | 2.77        | 2.044                 |
| I woke up feeling fresh and rested                         | 150      | 2.72        | 1.970                 |
| I have felt calm and relaxed                               | 150      | 2.55        | 1.995                 |
| My daily life has been filled with things that interest me | 150      | 2.39        | 1.979                 |

The psychological wellbeing data presents four of the five indicators slightly exceed the scale's midpoint (2.5), their modest elevations suggest these positive experiences occur occasionally rather than consistently. The highest reported score - feeling active and vigorous (M=3.17) - indicates most officers maintain basic functional capacity, this remains below the maximum potential (5.0). Officers report feeling cheerful (M=2.77) and waking refreshed (M=2.72) more often than not, while calmness (M=2.55) surpasses the mid-point threshold. The single below-midpoint score - daily life interest (M=2.39) - which suggests many officers struggle to find meaning or enjoyment in their routine activities. The substantial standard deviations (ranging 1.86-2.04) reveal important variability within the police service. While some officers may be coping adequately, others likely experience diminished wellbeing. This dispersion is particularly pronounced for cheerfulness (SD=2.04) and calmness (SD=1.99), indicating these emotional states vary widely across individuals.

#### 4.5 Relationship Between Occupational Stress and Psychological Wellbeing

The third objective of the study was to assess the relationship between occupational stress and psychological wellbeing among police officers in Mbeere South Sub-County, Embu County, Kenya. Table 15 presents correlation analysis results.

**Table 15: Correlations Analysis**

| Variables   |                     | Psychological Wellbeing | Occupational stress due to organizational factors | Occupational Stress due to operational duties |
|---|---------------------|-------------------------|---|---|
|   |                     |                         | occupational factors                              | operational duties                            |
| Psychological Wellbeing                           | Pearson Correlation | 1                       | -.024   | -.105   |
|   | Sig. (2-tailed)     |                         | .767  | .201  |
|   | N                   | 150                     | 150   | 150   |
| Occupational stress due to organizational factors | Pearson Correlation | -.024                   | 1   | .683**  |
|   | Sig. (2-tailed)     | .767                    |   | <.001   |
|   | N                   | 150                     | 150   | 150   |
| Occupational Stress due to operational duties     | Pearson Correlation | -.105                   | .683**  | 1   |
|   | Sig. (2-tailed)     | .201                    | <.001   |   |
|   | N                   | 150                     | 150   | 150   |

\*\* . Correlation is significant at the 0.01 level (2-tailed).

Psychological well-being vs. occupational stress due to organizational factors shows a weak negative correlation ( $r = -0.024$ ,  $p = .767$ ) that is not statistically significant. Psychological well-being vs. occupational stress due to operational duties also shows a weak negative

correlation ( $r = -0.105$ ,  $p = .201$ ) that is not statistically significant. Occupational stress due to organizational factors vs. occupational stress due to operational duties shows a strong positive correlation ( $r = 0.683$ ,  $p < .001$ ) that is statistically significant. These results  $\{(r = -0.024$ ,  $p = .767)$  and  $(r = -0.105$ ,  $p = .201)\}$  mean that there is no significant linear relationship between psychological well-being and either form of occupational stress in this dataset. However, occupational stress due to organizational factors and occupational Stress due to operational duties are strongly interrelated, suggesting they often co-occur or escalate together.

Table 16 presents the regression analysis model summary.

**Table 16: Model Summary**

| <b>Model</b> | <b>R</b>          | <b>R Square</b> | <b>Adjusted R Square</b> | <b>Std. Error of the Estimate</b> |
|--------------|-------------------|-----------------|--------------------------|-----------------------------------|
| 1            | .123 <sup>a</sup> | .015            | .002                     | 32.759                            |

a. Predictors: (Constant), Occupational Stress due to operational duties, Occupational stress due to organizational factors

The regression model explains only 1.5% of the variance ( $R \text{ Square} = .015$ ) in psychological well-being. After adjustment, the predictive power drops further to 0.2% ( $\text{Adjusted } R \text{ Square} = .002$ ). The results imply that the model poorly predicts psychological well-being from the two types of stress.

Table 17 presents the analysis of variance results.

**Table 17: ANOVA**

| <b>Model</b> |            | <b>Sum of Squares</b> | <b>df</b> | <b>Mean Square</b> | <b>F</b> | <b>Sig.</b>       |
|--------------|------------|-----------------------|-----------|--------------------|----------|-------------------|
| 1            | Regression | 2439.231              | 2         | 1219.616           | 1.136    | .324 <sup>b</sup> |
|              | Residual   | 157752.769            | 147       | 1073.148           |          |                   |
|              | Total      | 160192.000            | 149       |                    |          |                   |

a. Dependent Variable: Psychological Wellbeing

b. Predictors: (Constant), Occupational Stress due to operational duties, Occupational stress due to organizational factors

The ANOVA table 17 shows the model fitness. Given that  $p = .324$  in the analysis of variance table (ANOVA), the model is not statistically significant. This means that occupational stress does not significantly predict psychological well-being in this regression model.

Table 18 presents regression coefficients.

**Table 18: Regression coefficients table**

| <b>Model</b>                                      | <b>Unstandardized Coefficients</b> |                   | <b>Standardized Coefficients</b> | <b>t</b> | <b>Sig.</b> |
|---|------------------------------------|-------------------|----------------------------------|----------|-------------|
|   | <b>B</b>                           | <b>Std. Error</b> | <b>Beta</b>                      |          |             |
| 1 (Constant)                                      | 62.200                             | 10.182            |                                  | 6.109    | <.001       |
| Occupational stress due to organizational factors | .113                               | .142              | .089                             | .791     | .430        |
| Occupational Stress due to operational duties     | -.195                              | .132              | -.166                            | -1.478   | .142        |

Regression coefficients table 18 shows contribution of each independent variable to the change in the dependent variable. In this case, a one-unit increase in occupational stress due to organizational factors slightly increases well-being (unexpected direction), but not significantly. A one-unit increase in occupational stress due to operational duties is associated with a small decrease in well-being, but again, not significantly. Neither predictor is statistically significant.

Despite high levels of occupational stress and a substantial proportion of respondents showing poor psychological well-being (as seen earlier), this statistical model do not detect a meaningful linear relationship between stress and well-being. This could be due to nonlinear dynamics between stress and mental health (for example thresholds or tipping points not captured by linear models) and moderating variables such as resilience, coping strategies, peer support, or leadership style that were not included in the model.

#### **4.6 Interventions to Mitigate Occupational Stress**

The fourth objective was to investigate interventions to mitigate occupational stress among police officers in Mbeere South Sub-County, Embu County, Kenya. The respondents were asked whether specific interventions or mitigation strategies for occupational stress were in place at their workstations. The findings are presented in table 19.

**Table 19: Interventions or mitigation strategies for occupational stress**

| <b>Item</b>                     | <b>Selected (N, %)</b> | <b>Not Selected (N, %)</b> |
|---------------------------------|------------------------|----------------------------|
| Employee wellness programs      | 74 (49.3%)             | 76 (50.7%)                 |
| Mindfulness-based interventions | 86 (57.3%)             | 64 (42.7%)                 |
| Exercise                        | 84 (56.0%)             | 66 (44.0%)                 |
| Meditation                      | 78 (52.0%)             | 72 (48.0%)                 |

|                  |            |            |
|------------------|------------|------------|
| Yoga             | 74 (49.3%) | 76 (50.7%) |
| Family coherence | 66 (44.0%) | 84 (56.0%) |
| Others (specify) | 66 (44.0%) | 84 (56.0%) |

The highest three common interventions reported were mindfulness-based interventions (57.3%), exercise programs (56%), and family coherence (44%). Nearly half of the respondents reported absence of common interventions like yoga and wellness programs, signaling a gap in stress support structures.

Respondents rated the usefulness of these interventions on a 5-point scale. The results are presented in table 20.

**Table 20: Usefulness of Interventions or mitigation strategies for occupational stress**

| <b>Item</b>                        | <b>Not Useful<br/>at All</b> | <b>Little Useful</b> | <b>Somewhat<br/>Useful</b> | <b>Useful</b> | <b>Very<br/>Useful</b> |
|------------------------------------|------------------------------|----------------------|----------------------------|---------------|------------------------|
| Employee<br>wellness programs      | 36 (24.0%)                   | 80 (53.3%)           | 10 (6.7%)                  | 12 (8.0%)     | 12 (8.0%)              |
| Mindfulness-based<br>interventions | 36 (24.0%)                   | 80 (53.3%)           | 14 (9.3%)                  | 4 (2.7%)      | 16 (10.7%)             |
| Exercise                           | 30 (20.0%)                   | 82 (54.7%)           | 8 (5.3%)                   | 20 (13.3%)    | 10 (6.7%)              |
| Meditation                         | 30 (20.0%)                   | 88 (58.7%)           | 16 (10.7%)                 | 6 (4.0%)      | 10 (6.7%)              |
| Yoga                               | 26 (17.3%)                   | 10 (6.7%)            | 92 (61.3%)                 | 4 (2.7%)      | 18 (12.0%)             |
| Family coherence                   | 4 (2.7%)                     | 20 (13.3%)           | 98 (65.3%)                 | 10 (6.7%)     | 18 (12.0%)             |
| Others (specify)                   | 20 (13.3%)                   | 98 (65.3%)           | 14 (9.3%)                  | 4 (2.7%)      | 14 (9.3%)              |

Most interventions were perceived as only slightly or somewhat useful. A large proportion rated employee wellness and mindfulness programs as “little useful” (>50%). Yoga and family coherence had the highest combined “useful” and “very useful” scores (15%), though still not impressive. This suggests a need for reviewing and improving intervention quality and delivery rather than just availability.

Respondents were asked about availability of interventions or mitigation strategies to improve their psychological wellbeing in work stations. Table 21 presents the results.

**Table 21: Interventions or mitigation strategies to improve psychological wellbeing**

| <b>Item</b>                     | <b>Selected (N, %)</b> | <b>Not Selected (N, %)</b> |
|---------------------------------|------------------------|----------------------------|
| Employee wellness programs      | 76 (50.7%)             | 74 (49.3%)                 |
| Mindfulness-based interventions | 82 (54.7%)             | 68 (45.3%)                 |
| Exercise                        | 70 (46.7%)             | 80 (53.3%)                 |
| Meditation                      | 64 (42.7%)             | 86 (57.3%)                 |
| Yoga                            | 80 (53.3%)             | 70 (46.7%)                 |
| Family coherence                | 82 (54.7%)             | 68 (45.3%)                 |
| Others (specify)                | 68 (45.3%)             | 82 (54.7%)                 |

The data reveals officers’ preferences for various wellbeing interventions, with mindfulness-based approaches (54.7%) and family coherence programs (54.7%) emerging as the most selected strategies. These closely followed by employee wellness programs (50.7%) and yoga (53.3%), indicating a balanced interest in both professional support initiatives and personal wellbeing practices.

Respondents were asked to indicate how useful the above interventions and mitigation strategies of their psychological wellbeing were. The results are presented in table 22.

**Table 22: Usefulness of Interventions or mitigation strategies for psychological well-being**

| Item                            | Not Useful<br>at All | Little Useful | Somewhat<br>Useful | Useful     | Very<br>Useful |
|---------------------------------|----------------------|---------------|--------------------|------------|----------------|
| Employee wellness programs      | 24 (16.0%)           | 6 (4.0%)      | 90 (60.0%)         | 24 (16.0%) | 6 (4.0%)       |
| Mindfulness-based interventions | 22 (14.7%)           | 8 (5.3%)      | 90 (60.0%)         | 18 (12.0%) | 12 (8.0%)      |
| Exercise                        | 24 (16.0%)           | 8 (5.3%)      | 88 (58.7%)         | 10 (6.7%)  | 20 (13.3%)     |
| Meditation                      | 20 (13.3%)           | 100 (66.7%)   | 10 (6.7%)          | 10 (6.7%)  | 10 (6.7%)      |
| Yoga                            | 24 (16.0%)           | 90 (60.0%)    | 12 (8.0%)          | 14 (9.3%)  | 10 (6.7%)      |
| Family coherence                | 36 (24.0%)           | 80 (53.3%)    | 8 (5.3%)           | 12 (8.0%)  | 14 (9.3%)      |
| Others (specify)                | 26 (17.3%)           | 92 (61.3%)    | 16 (10.7%)         | 8 (5.3%)   | 8 (5.3%)       |

The most useful interventions for psychological well-being (based on “useful” + “very useful” responses) were exercise (20.0%) and mindfulness-based interventions (20.0%). Most interventions, however, cluster around “somewhat useful,” indicating moderate perceived value but possibly limited impact.

#### 4.7 Qualitative Data Analysis

To complement the quantitative findings, qualitative data were collected through Key Informant Interviews (KIIs) with senior police officers and Focus Group Discussions (FGDs) with police personnel of varied ranks. The purpose was to gain deeper insights into the lived

experiences, perceptions, and coping strategies related to occupational stress and psychological wellbeing within the police service.

#### **4.7.1 Data Collection and Coding Process**

Data from the KIIs and FGDs were transcribed, reviewed multiple times, and analyzed using thematic content analysis. Responses were coded and categorized into recurring themes aligned with the major sections of the interview guides. Each respondent was assigned a unique identifier, for example, PO1 for individual key informants and FGD1-PO1, FGD2-PO2, etc., for group respondents, to ensure confidentiality and facilitate traceability of quotations.

#### **4.7.2 Emerging Themes**

The analysis yielded six major themes, each reflecting a critical dimension of the study:

##### **1. Exposure to Traumatic Events and Emotional Distress**

The respondents were asked to describe how traumatic incidents at work affect them. Respondents in both KIIs and FGDs highlighted frequent encounters with traumatic situations, including violence, loss of colleagues, and life-threatening operations. These experiences contributed to severe stress, flashbacks, and emotional exhaustion as one of the respondents demonstrates: *“Blood sprinkled on me when the thug was shot-I still remember the weight of his body falling on my chest”* (FGD2-PO2). This was also evident from one of the respondents who reported that *“We collected our colleague’s scattered body parts after an ambush. It was dehumanizing”* (FGD2-PO4).

## **2. Institutional Support and Mental Health Services**

The respondents were asked to indicate how they cope and the availability of mental health services. Most respondents emphasized the absence or inaccessibility of structured mental health and counselling services. While the Directorate of Counselling was mentioned, its reach was reportedly limited to regional offices and not available at the sub-county or station level. This is highlighted by one of the respondents who stated that: *“Mental health support is only at the regional level. Nothing exists where we are”* (FGD3-PO1). Another respondent supported this claim reporting that *“We manage ourselves because there is no real counselling system here”* (PO3).

## **3. Workload, Understaffing, and Administrative Pressure**

The respondents were asked to describe the primary sources of their stress. Respondents expressed concerns about overwhelming workloads, poor staffing, and inadequate leave or rest. Officers described being required to juggle multiple roles, such as patrol, clerical work, and supervision, with limited breaks or rotation. This is shown by one of the respondents who stated that *“No leave taken. We’re either clerks, guards, or on patrol 24/7”* (FGD1-PO4). Another respondent collaborated this information highlighting that *“Officers work long shifts continuously, some even 12 hours daily”* (PO1).

## **4. Peer Support and Supervisory Systems**

The respondents were asked to indicate whether they receive support from peers and their organization, especially from supervisors. While peer support was cited as a critical coping mechanism, institutional supervisory support was found lacking. Respondents described their supervisors as unapproachable and unsympathetic. One of the respondents said that *“Supervisors*

*don't care. We only have each other to lean on*" (FGD3-PO2). Another respondent added that *"My colleague's help during a traumatic event saved my mental stability"* (PO4).

## **5. Transfers, Promotions, and Resourcing**

The respondents were asked to describe administrative sources of their occupational stress. FGD respondents described systemic issues around unfair transfers, lack of transparent promotion procedures, and disparities in equipment distribution. Such inequities contributed to frustration, demotivation, and family strain. This is demonstrated in the comment by one of the respondents who stated that *"I've done all required exams but have been stagnated in the same rank for 12 years"* (PO2). Another respondent added that *"Officers get promoted or transferred based on favoritism, not merit"* (FGD2-PO5).

## **6. Coping Mechanisms and Suggestions for Interventions**

The respondents were asked to discuss how they cope with their occupational stress. Coping strategies included reliance on spirituality, peer support, distraction through work, and in some cases, maladaptive behaviors like substance use. Respondents recommended expanding psychosocial services, decentralizing counselling, incorporating mental health into police training, and reforming administrative policies. One of the respondents said that *"Spirituality and religion are my main sources of comfort"* (FGD1-PO3). Another respondent suggested that police service need to *"Include mental health in Kiganjo training. We need tools to handle trauma"* (FGD3-PO4).

### **4.7.3 Summary of Qualitative Insights**

The qualitative analysis revealed profound insights into the lived experiences of police officers, uncovering six key themes that shape occupational stress and psychological wellbeing.

Officers described frequent exposure to traumatic events, including violent encounters and loss of colleagues, which leave lasting emotional scars, with vivid accounts of distress lingering long after incidents occur. A critical gap emerged in institutional support, as mental health services remain inaccessible at local levels, forcing officers to rely on informal coping mechanisms.

Workload pressures surfaced as a major stressor, with officers juggling excessive administrative duties, prolonged shifts, and understaffing without adequate rest. While peer support serves as a crucial lifeline, supervisory systems were widely perceived as indifferent, exacerbating feelings of isolation. Systemic inequities in promotions, transfers, and resource allocation further fuel frustration and demotivation, with reports of favoritism undermining morale. Despite these challenges, officers employ varied coping strategies, ranging from adaptive approaches like spirituality and peer solidarity to less constructive behaviors. Their recommendations highlight urgent needs: decentralizing mental health services, integrating psychological training into police education, and implementing fairer administrative policies. Together, these findings point towards actionable solutions that could foster resilience and improve wellbeing.

#### **4.8 Summary**

This chapter presented data analysis and findings. Both quantitative and qualitative data are covered. Descriptive and inferential statistics were used to analyze this data. In addition, thematic analysis was used to process qualitative data. The next chapter presents the discussion, conclusions, and recommendations of this study.

## **CHAPTER FIVE**

### **DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS**

#### **5.1 Introduction**

This chapter discusses the findings of the study in relation to existing literature, draws conclusions based on the four research questions, and offers recommendations for policy and practice. The study sought to explore the levels and effects of occupational stress on psychological wellbeing among police officers in Mbeere South Sub-County. It also assessed available interventions aimed at mitigating stress and enhancing mental health within the police force. The discussion integrates statistical results with prior empirical studies to provide a deep interpretation of the data.

#### **5.2 Discussion of Findings**

This study examined occupational stress, psychological well-being (PWB), their interrelationship, and interventions to mitigate stress among 150 police officers in Mbeere South Sub-County, Embu County, Kenya. The findings are discussed under four objectives, integrating quantitative and qualitative data to provide a comprehensive understanding of the issues in a rural, low-resource African context. Each section compares results with the empirical literature reviewed, highlighting similarities, differences, and contributions to addressing research gaps.

##### **5.2.1 Levels of Occupational Stress among Police Officers**

The study revealed levels of occupational stress, with 96.0% of officers experiencing moderate-to-severe stress (53.3% severe, 42.7% moderate) when considering combined organizational and operational stressors. Organizational stress was severe for 54.7% (41.3% moderate), driven by factors like limited career advancement opportunities (M=5.08), feeling

unappreciated (M=5.28), favoritism (M=5.15), and lack of resources (M=4.92). Operational stress was severe for 58.7% (36.0% moderate), with high scores for public hostility (M=5.59), unpredictable dangerous situations (M=5.47), and risk of injury/death (M=5.37). The strong correlation between organizational and operational stress ( $r=0.683$ ,  $p<.001$ ) suggests these stressors co-occur, exacerbating the overall burden.

Qualitative data reinforced these patterns, with officers describing intense operational stressors like “collecting our colleague’s scattered body parts after an ambush” (FGD2-PO4) and organizational frustrations such as “officers get promoted or transferred based on favoritism” (FGD2-PO5). Workload and understaffing were recurrent themes, with officers noting, “We’re either clerks, guards, or on patrol 24/7” (FGD1-PO4), highlighting systemic deficiencies.

The findings align with global studies on stress levels. Queirós et al. (2020) reported 85% high operational stress and 89% work-related stress among 2,057 Portuguese officers, using the validated Operational Police Stress Questionnaire (PSQ-Op,  $\alpha=0.96$ ). Similarly, Yadav and Yadav (2025) found 91.5% moderate-to-high operational stress and 54.2% organizational stress in 374 Delhi officers, with comparable stressors like bureaucratic pressures. Mini et al. (2025) noted 83% high workplace stress in 253 Kerala officers, linking it to operational demands, while Bezie et al. (2024) reported 45.7% burnout (a stress proxy) in 608 Ethiopian officers, tied to high demands and low support. Raju et al. (2020) found lower stress levels (16.73% moderate, 0.41% severe) in 245 Indian paramilitary workers, possibly due to less validated measures. Unlike these studies, which focus on urban or mixed settings, Mbeere South’s rural context highlights unique stressors like limited psychological support access (M=3.84) and resource scarcity, absent in high-income or urban-focused research. The qualitative insights on trauma and favoritism further

underscore rural-specific challenges, filling a gap in the literature by addressing low-resource African policing environments.

### **5.2.2 Levels of Psychological Wellbeing among Police Officers**

Psychological well-being levels were 42.7% of officers exhibiting poor well-being (scores  $\leq 48$ ), 20.0% moderate (52–60), and 37.3% good (64–100). Descriptive statistics showed low means for daily life interest ( $M=2.39$ ), calmness ( $M=2.55$ ), waking refreshed ( $M=2.72$ ), cheerfulness ( $M=2.77$ ), and feeling active ( $M=3.17$ ), all above the scale midpoint (2.5), indicating sporadic positive experiences. High standard deviations (1.86–2.04) suggest significant variability, possibly tied to rank, tenure, or personal resilience.

Officers' narratives reflected these low PWB levels, with descriptions of emotional exhaustion from traumatic events: "Blood sprinkled on me when the thug was shot—I still remember the weight of his body" (FGD2-PO2). The lack of meaning in daily life was echoed in sentiments about routine monotony and isolation in rural postings, compounded by limited mental health support: "Mental health support is only at the regional level. Nothing exists where we are" (FGD3-PO1).

The results align with global findings but highlight rural-specific nuances. Jackman et al. (2020) reported a median PWB of 44.00 (WEMWBS,  $\alpha=0.92$ ) among 381 UK officers, below general population norms (50–51), similar to Mbeere South's 42.7% poor PWB. Ogungbamila (2023) found moderate PWB ( $M=93.34/125$ , WBMMS,  $\alpha=0.91$ ) in 1,193 Nigerian officers, with low social involvement ( $M=14.38/20$ ), mirroring Mbeere South's low daily life interest. Shide (2024) noted moderate PWB in 357 Nigerian officers, with stress explaining 28.4% variance (PGWB,  $\alpha=0.84$ ), while Zhang et al. (2025) inferred moderate baseline PWB in 299 Chinese

officers (IWB,  $\alpha=0.89$ ), improvable via intervention. The current study's lower PWB scores, particularly in daily life interest, reflect rural challenges like isolation and limited recreational access, unlike urban studies where social support is more available. High variability in Mbeere South suggests subgroup differences (e.g., junior vs. senior ranks), a gap less explored in prior studies, which the current study addressed through demographic disaggregation.

### **5.2.3 Relationship Between Occupational Stress and Psychological Wellbeing**

There was no significant linear relationship found between occupational stress and PWB, with weak, non-significant correlations for organizational ( $r = -0.024$ ,  $p = .767$ ) and operational stress ( $r = -0.105$ ,  $p = .201$ ). The regression model explained only 1.5% of PWB variance ( $R^2 = .015$ ,  $p = .324$ ), with non-significant coefficients (organizational:  $\beta = 0.113$ ,  $p = .430$ ; operational:  $\beta = -0.195$ ,  $p = .142$ ), suggesting other factors mediate or moderate the relationship.

Qualitative data provided context, indicating that peer support and spirituality buffered stress impacts: “My colleague’s help during a traumatic event saved my mental stability” (PO4) and “Spirituality and religion are my main sources of comfort” (FGD1-PO3). Officers noted that issues like favoritism and lack of counseling exacerbated stress without directly lowering PWB, suggesting non-linear or mediated dynamics.

The findings diverge from the literature, which consistently reports negative stress-PWB relationships. Turliuc and Balcan (2023) found significant negative effects of organizational ( $\beta = -0.7243$ ,  $p < 0.05$ ) and operational stress ( $\beta = -1.0344$ ,  $p < 0.001$ ) on PWB in 210 Romanian gendarmes, mediated by social support (indirect effects:  $-0.2421$ ,  $-0.2584$ ). Kanmani et al. (2024) reported stressors explaining 21.6% of PWB variance ( $M=41.33/69$ ) in 278 Indian women officers. Keech et al. (2020) confirmed indirect stress-PWB effects via coping in 134 Australian

officers, and Den Heyer et al. (2025) linked high demands to poor PWB (8–20.6% PTSD, 31–57% distress) in 34,703 officers, mitigated by resources. Oliver (2023) noted stress-PWB mediation by physical activity in UK officers. The non-significant findings in Mbeere South may reflect non-linear dynamics, unmeasured mediators like peer support (evident qualitatively), or cultural coping (e.g., spirituality), not captured in linear models or urban-focused studies. This study’s rural context and qualitative insights highlight unique buffers, addressing gaps in prior research by suggesting context-specific models for African settings.

#### **5.2.4 Interventions to Mitigate Occupational Stress**

Interventions were limited, with mindfulness-based interventions (57.3%), exercise (56.0%), and family coherence (44.0%) most reported, but rated as only somewhat useful (e.g., 60% for mindfulness, 65.3% for family coherence). Wellness programs and yoga were absent for nearly half the sample (50.7% and 50.7%), and meditation was least available (42.7%). Usefulness ratings were low, with exercise and mindfulness at 20% “useful” or “very useful,” indicating limited impact.

Officers reported a stark lack of mental health services: “We manage ourselves because there is no real counselling system here” (PO3). They relied on informal coping like spirituality and peer support, with suggestions for “decentralizing counselling” and “including mental health in Kiganjo training” (FGD3-PO4). Frustrations with systemic issues (e.g., “Officers get promoted based on favoritism,” FGD2-PO5) underscored the need for organizational reforms alongside psychological interventions.

The limited intervention availability and efficacy align with global findings but highlight rural-specific barriers. Eddy et al. (2024) found mindfulness-based resilience training (MBRT)

effective for stress coping in five U.S. officers, with qualitative triangulation, but its small sample contrasts with Mbeere South's larger evaluation. Vadvilavičius et al. (2023) reviewed eight studies, confirming MBIs reduced stress, PTSD, and burnout, supporting Mbeere South's use of mindfulness, though its low perceived usefulness suggests implementation issues. Chenoweth et al. (2024) reported high feasibility for Stress First Aid (SFA) in 16 U.S. officers (M=4.2–4.7/5), contrasting with Mbeere South's low ratings, possibly due to rural access barriers. Aden et al. (2024) recommended untested debriefings and mentorship in 82 Kenyan officers, while Hsieh and Huang (2024) suggested counseling for 264 Taiwanese officers, also untested. Mbeere South's qualitative emphasis on decentralized services and training integration addresses these gaps, proposing culturally tailored, accessible interventions for rural African policing, unlike urban or high-resource studies. The study's mixed-methods approach strengthens its contribution by identifying both availability and efficacy gaps.

### **5.3 Conclusions**

This study concludes that occupational stress is highly prevalent among police officers in Mbeere South Sub-County, arising from both organizational factors (for example workload, recognition, bureaucracy) and operational demands (for example trauma exposure, public hostility). The occupational stress revealed in this study reflects Job Demands-Resources (JD-R) model argument that increased job demands and limited job resources can result in mental health issues for employees. Psychological wellbeing is low, with a proportion of officers experiencing symptoms suggestive of depression or burnout. However, a statistically significant linear relationship between occupational stress and psychological wellbeing was not established, suggesting complex dynamics, possibly mediated by peer support or spirituality, warranting non-linear models. Interventions to mitigate occupational stress and enhance psychological wellbeing

were present but insufficient in both coverage and perceived usefulness. This highlights a significant implementation gap, suggesting that existing programs are not meeting the unique needs of rural police populations.

Qualitative evidence strongly corroborates this conclusion, exposing deep gaps in trauma response, emotional support, and leadership sensitivity. The narratives reveal that officers are often emotionally isolated, unsupported, and operationally overstretched, which may account for the poor wellbeing and stress outcomes observed. Fostering alignment by tailoring roles to officers' strengths and creating a supportive organizational culture can reduce stress as suggested by Person-Environment Fit Theory.

#### **5.4 Recommendations of the Study**

The National Police Service should:

1. 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.
2. Create accessible mental health support systems within rural police units, including trauma-informed counseling services, confidential helplines, and peer-support networks.
3. Implement resilience and coping skills training using evidence-based approaches to enhance officers' ability to withstand occupational stress.
4. Adapt interventions to local cultural and occupational contexts, ensuring they are relevant, engaging, and practical for rural policing realities.

### **5.4.1 Recommendations for Future Research**

Future research should consider employing longitudinal designs to capture the evolving nature of occupational stress and psychological well-being among police officers. Such approaches would allow researchers to examine how stressors and coping mechanisms change over time, as well as to contextualize quantitative findings with qualitative insights from officers' lived experiences. It would also be valuable to investigate the moderating effects of individual characteristics, such as age, gender, marital status, and rank, on the relationship between occupational stress and well-being. These factors, alongside protective influences like spirituality, peer relationships, and community engagement, could provide a more nuanced understanding of resilience mechanisms within police populations. In addition, future studies should evaluate the design, implementation, and effectiveness of existing wellness programs targeting police officers. Using rigorous experimental or quasi-experimental methodologies would help determine whether these interventions meaningfully reduce stress levels, enhance well-being, and improve job performance, thereby informing policy and resource allocation.

### **5.5 Summary**

This chapter discussed the results of this study in the context of empirical literature reviewed earlier. It also made conclusions out of this discussion. The chapter ends with recommendations that cover policy and program interventions, operational improvements and future research.

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## APPENDICES

### **Appendix I: Informed Consent Form**

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

*Researcher: Eddah Muthoni Kabiru*

Dear Respondent,

I am Eddah Muthoni Kabiru, an MA student from Tangaza University, and I would like to invite you to participate in a study aimed at understanding the relationship between occupational stress and psychological wellbeing of police officers. Before you decide whether to participate, it is important that you understand the nature of this study, its goals, potential risks, and benefits.

**Purpose of the Study:** The purpose of the study is to examine the relationship between occupational stress and psychological wellbeing among police officers.

**Your Participation:** Your participation in this study will involve answering a series of questions through a questionnaire. The questionnaire will be administered by me as the researcher. It is expected to take approximately 45 minutes to complete. Your participation is entirely voluntary, and you may choose to withdraw at any time without any consequences.

**Risks and Benefits:** Participating in this study does not pose any significant risks to you. However, discussing personal experiences related to occupational stress and psychological wellbeing may bring up sensitive or uncomfortable emotions. The potential benefit of this study is the opportunity to reflect on your own experiences, gain insights into your level of occupational stress as well as psychological wellbeing, and contribute to a better understanding of the relationship between the two.

Confidentiality: Your responses will be kept confidential. All information collected will be anonymized, and no identifiable information will be shared with anyone. Your privacy is of utmost importance, and all the necessary steps will be taken to protect it.

Consent: I hereby request your voluntary participation in this study and audio recording of interview or focus discussion. By continuing with the questionnaire administration, interview, or focus discussion, you are indicating your consent to participate. You are free to withdraw from the study at any point without any obligation.

Contact Information: If you have any questions, concerns, or wish to receive a summary of the study's findings, please feel free to contact me at 0722895497 or [kabiru.muthoni@gmail.com](mailto:kabiru.muthoni@gmail.com). You can also use these contacts to seek counseling in case of any psychological harm.

By signing below or proceeding with the questionnaire, you acknowledge that you have read and understood the information provided in this form and consent to participate in the study.

Respondent's Code: \_\_\_\_\_ Date: \_\_\_\_\_

Respondent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Researcher's Signature: \_\_\_\_\_

Thank you for considering participation in this study.

Sincerely,

Eddah Muthoni Kabiru,

Tangaza University.

## **Appendix II: Letter to The Kenya Police Service**

Eddah Muthoni Kabiru

P. O. Box 247-00605, Uthiru, Kenya.

Kenya Police Service

County Police Commander, Embu, Kenya

### **Subject: Request for Permission to Conduct Research**

Dear Sir,

I am writing to seek your permission to conduct research titled "Relationship Between Occupational Stress and Psychological Well-being of Police Officers in Mbeere South Sub-County, Embu County." The purpose of this study is to examine relationship between occupational stress and psychological well-being of police officers.

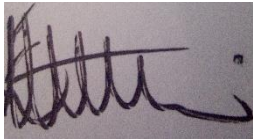
This research is purely academic and will form part of my Master's degree requirements. The findings will provide valuable insights into strategies to improve the psychological well-being of police officers.

I assure you that confidentiality and anonymity of respondents will be upheld throughout the study. No personal identifiers will be used in the research report, and the data collected will be used strictly for academic purposes.

I kindly request access to the police officers in Mbeere South Sub-County for interviews and questionnaires. I am willing to comply with any terms or conditions you may set to facilitate this research.

Enclosed are my research proposal, a copy of my identification, and a letter of introduction from my institution. I look forward to your favorable response. Please feel free to contact me at 0722895497 or [kabiru.muthoni@gmail.com](mailto:kabiru.muthoni@gmail.com) should you require further information.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Eddah Muthoni Kabiru', with a stylized flourish at the end.

Eddah Muthoni Kabiru

### **Appendix III: Letter to NACOSTI**

Eddah Muthoni Kabiru

P. O. Box 247-00605, Uthiru, Kenya.

January 20, 2025

Director General

National Commission for Science, Technology, and Innovation (NACOSTI)

Utalii House, 9<sup>th</sup> Floor, Nairobi, Kenya

#### **Subject: Application for Research Permit**

Dear Sir/Madam,

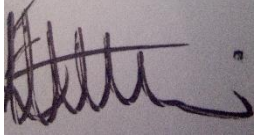
I am writing to request a research permit to conduct a study titled "Relationship Between Occupational Stress and Psychological Well-being of Police Officers in Mbeere South Sub-County, Embu County." This study aims to explore factors influencing occupational stress among police officers and how it impacts their psychological well-being. The findings will provide critical insights to inform interventions for enhancing the mental health of police officers.

I am committed to adhering to the ethical guidelines for research as stipulated by NACOSTI and other relevant authorities. Enclosed are the following documents for your review: 1. Research proposal 2. Letter of introduction from my institution 3. Identification documents.

I kindly request your approval to facilitate this research. Should you require additional information or documentation, please do not hesitate to contact me at 0722895497 or kabiru.muthoni@gmail.com.

Thank you for considering my application.

Yours faithfully,

A handwritten signature in dark ink, appearing to read 'Eddah Muthoni Kabiru', with a flourish at the end.

Eddah Muthoni Kabiru

## Appendix IV: Occupational Stress and Psychological Wellbeing Questionnaire for Police Officers

### Section 1: Social Demographic Information

#### Instructions

Respond to the questions by ticking [ ✓ ] or making a mark [ ✗ ] on the chosen option as appropriate.

1. How old are you?

- 18–23
- 24–29
- 30–35
- 36–41
- 42–47
- 48–53
- 54–59
- 60 and above

2. What is your gender?

- Male
- Female

3. What is your current rank in the police service?

- Constable
- Corporal

- Sergeant
- Inspector
- Other (specify): \_\_\_\_\_

4. How many years have you been serving in the police service?

- Less than 1 year
- 1–5 years
- 6–10 years
- 11–15 years
- 16+ years

5. What is your highest level of education?

- High school
- Diploma
- Bachelor's degree
- Master's degree
- PhD
- Other (specify): \_\_\_\_\_

6. Marital status?

- Single
- Married
- Divorced/Separated
- Widowed

- Other (specify): \_\_\_\_\_

**Section 2a: Police Stress Questionnaire (PSQ-Org)**

Respond to the questions by ticking [ ✓ ] or making a mark [ ✗ ] on the chosen option as appropriate.

7. How much stress do you experience due to the following organizational factors? (1 = No stress at all, 2 = Very little stress, 3 = Mild stress, 4 = Moderate stress, 5 = Quite a bit of stress, 6 = A lot of stress, 7 = Extreme stress)

| Statements   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|--|---|---|---|---|---|---|---|
| i. Excessive paperwork                                   |   |   |   |   |   |   |   |
| ii. Lack of resources to do the job properly             |   |   |   |   |   |   |   |
| iii. Bureaucratic red tape                               |   |   |   |   |   |   |   |
| iv. Staff shortages                                      |   |   |   |   |   |   |   |
| v. Inconsistent leadership and management decisions      |   |   |   |   |   |   |   |
| vi. Lack of recognition for good work                    |   |   |   |   |   |   |   |
| vii. Internal conflicts with supervisors                 |   |   |   |   |   |   |   |
| viii. Conflicts with colleagues                          |   |   |   |   |   |   |   |
| ix. High workload and unrealistic expectations           |   |   |   |   |   |   |   |
| x. Balancing administrative duties with operational work |   |   |   |   |   |   |   |
| xi. Lack of career advancement opportunities             |   |   |   |   |   |   |   |
| xii. Job insecurity and concerns about layoffs           |   |   |   |   |   |   |   |
| xiii. Shift scheduling and long hours                    |   |   |   |   |   |   |   |

|        |  |  |  |  |  |  |  |  |
|--------|--|--|--|--|--|--|--|--|
| xiv.   | Limited time for personal and family life        |  |  |  |  |  |  |  |
| xv.    | Feeling unappreciated by the organization        |  |  |  |  |  |  |  |
| xvi.   | Pressure to meet performance targets             |  |  |  |  |  |  |  |
| xvii.  | Poor communication within the organization       |  |  |  |  |  |  |  |
| xviii. | Limited support from senior management           |  |  |  |  |  |  |  |
| xix.   | Favoritism and office politics                   |  |  |  |  |  |  |  |
| xx.    | Limited access to psychological support services |  |  |  |  |  |  |  |

**Section 2b: Police Stress Questionnaire (PSQ-Op)**

Respond to the questions by ticking [ ✓ ] or making a mark [ ✗ ] on the chosen option as appropriate.

8. How much stress do you experience due to the following operational duties? (1 = No stress at all, 2 = Very little stress, 3 = Mild stress, 4 = Moderate stress, 5 = Quite a bit of stress, 6 = A lot of stress, 7 = Extreme stress)

| Statements  | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---|---|---|---|---|---|---|---|
| i. Responding to violent incidents  |   |   |   |   |   |   |   |
| ii. Investigating cases involving child abuse or domestic violence            |   |   |   |   |   |   |   |
| iii. Handling emotionally distressing cases (for example suicides, homicides) |   |   |   |   |   |   |   |
| iv. Risk of personal injury or death on duty                                  |   |   |   |   |   |   |   |
| v. Making critical decisions under pressure                                   |   |   |   |   |   |   |   |
| vi. Being exposed to unpredictable and dangerous situations                   |   |   |   |   |   |   |   |

|        |   |  |  |  |  |  |  |  |  |
|--------|---|--|--|--|--|--|--|--|--|
| vii.   | Facing hostility from the public  |  |  |  |  |  |  |  |  |
| viii.  | Dealing with disrespect or non-compliance from citizens                     |  |  |  |  |  |  |  |  |
| ix.    | Public criticism and media scrutiny   |  |  |  |  |  |  |  |  |
| x.     | Managing the emotional impact of dealing with victims and families          |  |  |  |  |  |  |  |  |
| xi.    | Witnessing traumatic events   |  |  |  |  |  |  |  |  |
| xii.   | The need to use force in certain situations                                 |  |  |  |  |  |  |  |  |
| xiii.  | Carrying firearms and the responsibility that comes with it                 |  |  |  |  |  |  |  |  |
| xiv.   | Fear of legal repercussions for job-related decisions                       |  |  |  |  |  |  |  |  |
| xv.    | Working night shifts and irregular hours                                    |  |  |  |  |  |  |  |  |
| xvi.   | High-speed chases and vehicle-related risks                                 |  |  |  |  |  |  |  |  |
| xvii.  | Pressure to solve crimes quickly  |  |  |  |  |  |  |  |  |
| xviii. | Managing informants and undercover operations                               |  |  |  |  |  |  |  |  |
| xix.   | Lack of control over work assignments                                       |  |  |  |  |  |  |  |  |
| xx.    | Balancing multiple roles (for example law enforcement, counselor, mediator) |  |  |  |  |  |  |  |  |

**Section 3: WHO-5 Wellbeing Index (Psychological Wellbeing)**

Respond to the questions by ticking [ ✓ ] or making a mark [ ✗ ] on the chosen option as appropriate.

9. Please indicate how you have felt over the past two weeks (0 = At no time, 5 = All the time)

| Statements   | 0 | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|---|
| 1. I have felt cheerful and in good spirits.                   |   |   |   |   |   |   |
| 2. I have felt calm and relaxed.                               |   |   |   |   |   |   |
| 3. I have felt active and vigorous.                            |   |   |   |   |   |   |
| 4. I woke up feeling fresh and rested.                         |   |   |   |   |   |   |
| 5. My daily life has been filled with things that interest me. |   |   |   |   |   |   |

**Section 4: Interventions/ Mitigation Strategies**

10. Which of the following interventions or mitigation strategies are in place to address occupational stress in your work station?

Employee wellness programs [ ]

Mindfulness-based interventions [ ]

Exercise [ ]

Meditation [ ]

Yoga [ ]

Seeking family coherence [ ]

Others (specify) [ ]

11. In a scale of 0-5 where 0 is “not useful at all” and 5 is “very useful”, rate how useful are the above interventions or mitigation strategies to address occupational stress in your work station?

| Statements                         | 0 | 1 | 2 | 3 | 4 | 5 |
|------------------------------------|---|---|---|---|---|---|
| 1. Employee wellness programs      |   |   |   |   |   |   |
| 2. Mindfulness-based interventions |   |   |   |   |   |   |
| 3. Exercise                        |   |   |   |   |   |   |
| 4. Meditation                      |   |   |   |   |   |   |
| 5. Yoga                            |   |   |   |   |   |   |
| 6. Seeking family coherence        |   |   |   |   |   |   |
| 7. Others (specify)                |   |   |   |   |   |   |

12. Which of the following interventions or mitigation strategies are in place to improve your psychological wellbeing in your work station?

Employee wellness programs [ ]

Mindfulness-based interventions [ ]

Exercise [ ]

Meditation [ ]

Yoga [ ]

Seeking family coherence [ ]

Others (specify) [ ]

13. In a scale of 0-5 where 0 is “not useful at all” and 5 is “very useful”, rate how useful are the above interventions or mitigation strategies to improve your psychological wellbeing in your work station?

| <b>Statements</b>                  | <b>0</b> | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
|------------------------------------|----------|----------|----------|----------|----------|----------|
| 1. Employee wellness programs      |          |          |          |          |          |          |
| 2. Mindfulness-based interventions |          |          |          |          |          |          |
| 3. Exercise                        |          |          |          |          |          |          |
| 4. Meditation                      |          |          |          |          |          |          |
| 5. Yoga                            |          |          |          |          |          |          |
| 6. Seeking family coherence        |          |          |          |          |          |          |
| 7. Others (specify)                |          |          |          |          |          |          |

## **Appendix V: Key Informant Interview (KII) Guide for Senior Police Officers**

### **Section 1: Introduction & Demographics**

1. Can you describe your role in the police service, including your rank, years of service, and primary responsibilities?
2. How long have you been in your current role?
3. How has your work evolved over time?
4. How frequently do you encounter traumatic situations at work?
5. How would you describe your typical workload?
6. How does administrative work impact your duties?
7. Can you describe how you have experienced changes in resources such as manpower, equipment, or time?
8. Have there been times when you felt your skills or abilities did not align with the demands of your role?
9. Do you feel supported by your colleagues and supervisors?
10. Are mental health or counselling services available to you?
11. How much autonomy do you have in performing your duties?
12. Have there been improvements in resources over time?
13. What support does the police service provide to help you manage stress?
14. Have you received training to manage stress?
15. Are there policies in place to safeguard your mental wellbeing?
16. How confident do you feel in managing the challenges of your role?

### **Section 2: Occupational Stress**

17. What are the primary sources of stress for officers in your position?

### **Section 3: Psychological Wellbeing**

18. How would you describe your overall mental wellbeing?

19. Do you think the police service does enough to protect officers' psychological wellbeing?

### **Section 4: Interventions or Mitigation Strategies**

20. What interventions or mitigation strategies are in place to address police officers' occupational stress?

21. What interventions or mitigation strategies are in place to improve police officers' psychological well-being?

22. What other measures would you recommend?

## **Appendix VI: Focus Group Discussion (FGD) Guide For Police Officers**

### **Section 1: Introduction**

- Welcome respondents, explain the purpose of the discussion, and ensure confidentiality.
- Encourage open and respectful sharing of experiences.
- Have respondents briefly introduce themselves by sharing their rank, years of service, and main duties.

### **Section 2: Social Demographic Information**

1. As police officers, do traumatic incidents at work affect you?
2. Do you have coping strategies to manage traumatic experiences?
3. How do you manage your workload?
4. What role does administrative work play in your overall stress levels?
5. Have you observed changes in resource availability over time?
4. Do colleagues and supervisors support you?
5. Are mental health services available to you?
6. How much autonomy do you have in your roles?
7. What types of support does the organization provide to help manage stress?
8. What training have you received to cope with stress and enhance resilience?
9. Are there policies in place to protect your mental wellbeing?

### **Section 2: Occupational Stress**

10. What do you see as the biggest sources of stress in your roles?
11. How do these sources of stress affect your personal and professional lives?

### **Section 3: Psychological Wellbeing**

12. How would you describe the overall mental health of police officers?
13. What steps could improve officers' psychological wellbeing?

### **Section 4: Interventions or Mitigation Strategies**

14. What interventions or mitigation strategies do you see in place to address police officers' occupational stress?
15. What interventions or mitigation strategies are in place to improve police officers' psychological well-being?
16. What other measures would you like to see implemented to address occupational stress and psychological wellbeing of police officers in your work station?

## Appendix VII: Tangaza University Authorization Letter.



# TANGAZA UNIVERSITY

*Teaching Minds / Touching Hearts / Transforming Lives*

**REF:** TU/ISERC2025/01/00096

15<sup>th</sup> June 2025

**To:** Eddah Muthoni Kabiru

Reg. No. **20/00857**

Dear Eddah,

**Re:** "Relationship between Occupational Stress and Psychological Wellbeing of Police Officers in Mbeere South Sub-County, Embu County, Kenya."

This is to inform you that TU-ISERC has reviewed and approved your above research proposal. Your application approval number is *TU/ISERC2025/06/00096*. The approval period is **15<sup>th</sup> June 2025 – 15<sup>th</sup> June 2026**. This approval is subject to compliance with the following requirements;

1. Only approved documents including (informed consents, study instruments, MTA) will be used
2. All changes including (amendments, deviations, and violations) are submitted for review and approval by TU-ISERC.
3. Death and life-threatening problems and serious adverse events or unexpected adverse events whether related or unrelated to the study must be reported to TU-ISERC within 72 hours of notification.
4. Any changes, anticipated or otherwise that may increase the risks or affected safety or welfare of study participants and others or affect the integrity of the research must be reported to TU-ISERC within 72 hours
5. Clearance for export of biological specimens must be obtained from relevant institutions.
6. Submission of a request for renewal of approval at least 60 days prior to expiry of the approval period. Attach a comprehensive progress report to support the renewal.
7. Submission of an executive summary report within 90 days upon completion of the study to TU-ISERC.

Prior to commencing your study, you will be expected to obtain a research license from National Commission for Science, Technology and Innovation (NACOSTI) <https://research-portal.nacosti.go.ke> and also obtain other clearances needed.

Yours sincerely

**Dr. Daniel M. Kitonga (Ph.D., MBA)**  
Chair, TU - ISERC





# TANGAZA UNIVERSITY

*Teaching Minds / Touching Hearts / Transforming Lives*

**OFFICE OF THE CHAIRMAN  
TANGAZA UNIVERSITY  
INSTITUTIONAL SCIENTIFIC AND ETHICS REVIEW COMMITTEE**

E-mail: [iserc@tangaza.ac.ke](mailto:iserc@tangaza.ac.ke) Website: [www.tangaza.ac.ke](http://www.tangaza.ac.ke)

**OUR Ref:** TU/ISERC2025/01/00096

**Date:** 15<sup>th</sup> June 2025

The Commission Secretary,  
National Commission for Science, Technology and Innovation  
P.O. Box 30623,  
Nairobi – Kenya.

Dear Sir/Madam,

**Re: Recommendation for Research Permit – Eddah Muthoni Kabiru**

This is to confirm that **Eddah Muthoni Kabiru** is a PI in a researcher protocol which was submitted to TU-ISERC for review. The protocol was reviewed and approved for research permit.

Eddah wishes to carry out research under the title "*Relationship between Occupational Stress and Psychological Wellbeing of Police Officers in Mbeere South Sub-County, Embu County, Kenya*".

I strongly recommend **Eddah Muthoni Kabiru** to the Kenya National Commission for Science, Technology and Innovation (NACOSTI) for the issuance of a research permit. The permit will enable her to proceed to data collection for her study. Thanking you in advance for your cooperation.

Yours sincerely,

**Dr. Daniel M. Kitonga (Ph.D., MBA)**  
Chairperson, TU-ISERC



**Appendix VIII: Kenya Police Service Authorization Letter**

**KENYA POLICE SERVICE**

TELEGRAMS: "POLICE".....

Telephone: 068-2230044/068-2230047

E-mail: cpc.embu@gmail.com



COUNTY POLICE HEADQUARTERS,

EMBU COUNTY,

P. O. BOX 28-60100,

**EMBU.**

25<sup>th</sup> June, 2025

Eddah Muthoni Kabiru,  
P. O. Box 247-00605,  
Uthiru, Kenya.

Dear Eddah,

**SUBJECT: APPROVAL TO CONDUCT RESEARCH, EMBU COUNTY**


This letter acknowledges that I have received and reviewed a request by Eddah Kabiru to conduct a research project titled, "Relationship Between Occupational Stress and Psychological Well-being of Police Officers Mbeere South, Embu County."


This letter is to formally grant permission to Eddah Kabiru to conduct the above referenced research. The research involves data to be collected through administering questionnaires, focused group discussions and interview guides.

If we have any concerns or require additional information, we will contact the researcher or Tangaza University, research and ethics review board.

JOHNSTONE KUIYAKI  
FOR: COUNTY POLICE COMMANDER  
EMBU.


# Appendix IX: Research Permit

  
**REPUBLIC OF KENYA**

  
**NATIONAL COMMISSION FOR  
SCIENCE, TECHNOLOGY & INNOVATION**

Ref No: **461656** Date of Issue: **14/July/2025**


**RESEARCH LICENSE**




**This is to Certify that Ms. EDDAH MUTHONI KABIRU of Tangaza University , has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Embu on the topic: Relationship between Occupational Stress and Psychological Wellbeing of Police Officers in Mbeere South Sub-County, Embu County, Kenya for the period ending : 14/July/2026.**

License No: **NACOSTI/P/25/4176639**

**461656**  
Applicant Identification Number

  
Ag. Director General  
**NATIONAL COMMISSION FOR  
SCIENCE, TECHNOLOGY &  
INNOVATION**

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**See overleaf for conditions**

**THE SCIENCE, TECHNOLOGY AND INNOVATION ACT, 2013 (Rev. 2014)**  
Legal Notice No. 108: The Science, Technology and Innovation (Research Licensing) Regulations, 2014

**The National Commission for Science, Technology and Innovation**, hereafter referred to as the Commission, was established under the Science, Technology and Innovation Act 2013 (Revised 2014) herein after referred to as the Act. The objective of the Commission shall be to regulate and assure quality in the science, technology and innovation sector and advise the Government in matters related thereto.

**CONDITIONS OF THE RESEARCH LICENSE**

1. The License is granted subject to provisions of the Constitution of Kenya, the Science, Technology and Innovation Act, and other relevant laws, policies and regulations. Accordingly, the licensee shall adhere to such procedures, standards, code of ethics and guidelines as may be prescribed by regulations made under the Act, or prescribed by provisions of International treaties of which Kenya is a signatory to.
2. The research and its related activities as well as outcomes shall be beneficial to the country and shall not in any way;
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  - ii. Adversely affect the lives of Kenyans
  - iii. Be in contravention of Kenya's international obligations including Biological Weapons Convention (BWC), Comprehensive Nuclear-Test-Ban Treaty Organization (CTBTO), Chemical, Biological, Radiological and Nuclear (CBRN).
  - iv. Result in exploitation of intellectual property rights of communities in Kenya
  - v. Adversely affect the environment
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  - vii. Endanger public safety and national cohesion
  - viii. Plagiarize someone else's work
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4. Neither the license nor any rights thereunder are transferable.
5. The Commission reserves the right to cancel the research at any time during the research period if in the opinion of the Commission the research is not implemented in conformity with the provisions of the Act or any other written law.
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9. The Commission may monitor and evaluate the licensed research project for the purpose of assessing and evaluating compliance with the conditions of the License.
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11. The Commission reserves the right to modify the conditions of the License including cancellation without prior notice.
12. Research, findings and information regarding research systems shall be stored or disseminated, utilized or applied in such a manner as may be prescribed by the Commission from time to time.
13. The Licensee shall disclose to the Commission, the relevant Institutional Scientific and Ethical Review Committee, and the relevant national agencies any inventions and discoveries that are of National strategic importance.
14. The Commission shall have powers to acquire from any person the right in, or to, any scientific innovation, invention or patent of strategic importance to the country.
15. Relevant Institutional Scientific and Ethical Review Committee shall monitor and evaluate the research periodically, and make a report of its findings to the Commission for necessary action.

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