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MENTAL HEALTH AND ITS ASSOCIATED VARIABLES AMONG POLICE PERSONALS: WITH SPECIAL REFERENCE TO TIRUNELVELI CITY

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ABSTRACT

This study was intended to understand the concept of mental health and their impact on demographic variables of police personnel in police force. To collect requisite data for the present study, the researcher used the mental health inventory (MHI) (Tamil Version) Constructed by Dr. Jagdish and Dr. A. K. Srivastav Deptt. of Psychology, B.H.U. Varanasi. Mental health inventory (MHI) covers six dimensions of mental health are positive self-evaluation, perception of reality, integration of personality, autonomy, group oriented attitude and environmental mastery with selected demographic variables. Census sampling method was used and sample size is 300. Data were analysed using simple percentage analysis, independent sample t test and regression analysis to test the formulated hypotheses. Finally, suggestions and conclusion are given from the perspective of police personnel to progress their mental health.

KEYWORDS

mental health, police, demographic variables, job stress.

INTRODUCTION

So many factors are believed to be responsible for the arousal of mental ill health. Development of ill health is revealed through certain symptoms like the feelings of shame, guilt, rejection, isolation and tension etc. It makes the man perceive the world as dangerous and human beings as bad. The affected mental health makes a person get away from the feelings such as ability to love work and play, adequacy in interpersonal relationship, adaptation, adjustment and problem solving. All the above mentioned feelings affect the normal personality of an individual. As a result of this, an individual may adopt maladaptive behaviour.

According to W.H.O. mental health is an individual's state of well-being, when he or she realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully and is able to contribute to his or her community (WHO, 2003). Similarly, mental health also described as the ability to balance desires, feelings, ambitions and ideas in one's daily living. It may also be understood as the behavioural characteristics of a person (B. D. Bhatia, 1982)

Mental health is a term used describes how well the individual is adjusted to the demands and opportunities of life. It is very broad term which includes physical, mental, emotional and social aspects of adjustment. The idea of mental health is more complex and comprehensive. A sound mind in a sound body has been recognized as a social ideal for many centuries. Health generally means sound conditions, or well-being, or freedom from diseases. An individual is said to be physically healthy when his body is functioning well and he/she is free from pains and troubles.

The job of the police officer is one of the most stressful occupations in the world. Research has shown time and time again that police officer occupational stress is directly related to higher rates of heart disease, divorce, sick days taken, alcohol abuse, and major psychological illnesses such as Acute Stress Disorder, Post Traumatic Stress Disorder, Depression, and Anxiety Disorders. Currently, there are approximately 900,000 sworn officers in the United States, and the epidemic of stress disorders among police men and women has been so high that many departments have instituted mental health programs as preventative measures. These programs have been successful and have led to important outcomes, such as a decrease in the number of police officer suicides (from 300 in 1998 to 126 in 2012). In departments where mental health and wellness programs are absent, however, problems likely remain at a critical level.

Stress for police officers consists of an accumulation of exposure to horrific events witnessed and intervened upon while in the performance of their duties, but even a single event can bring on monumental stress. Debilitating stress can also occur from a hostile work environment within an officer's department. These events overwhelm normal intellectual controls, as well as psychological coping mechanisms.

Mental health and other physical health problems are different but additive on well-being. Individuals with both mental health and physical health problems are at particular risk. The physical problems are at particular risk. The physical problem can complicate mental health of individuals. In the context of importance of the subject, the present study has been undertaken to explore the status of mental health of police personnel in tirunelveli city and elicit suggestions to overcome the problems.

RELATED STUDIES

Dr. Terry Elsenberg followed Kroes in 1975 with exploratory research based on his experiences as a psychologist and police officer, placing 33 implied sources of stress into six categories: intra-organizational practices and characteristics; Inter-organizational practices and characteristics; criminal Justice system practices and characteristics; public practices and characteristics; police work itself; and the police officer. The intra - organizational practices and characteristics category contains features within an organization which may provoke or encourage stress development of stress such as poor supervision, absence or lack of career development opportunities, inadequate reward system, offensive policies, excessive paperwork, and poor equipment.

Pienaar and Rothmann conducted a study on South African Police Service in 2006. They found that 2145 police officers had a noteworthy impact on the occurrence of occupational stress in the SAPS. All the different groups experienced higher levels of stress due to lack of support, salary, promotion and recognition as compared to other occupational stressors. While considering rank in police department it was reported to have also impacted significantly on the experience of occupational stress in the police.

Constables experienced stress less frequently because of job demands, crime-related stressors and lack of support in comparison to other ranked police officers. A survey research conducted by Buker and Wiecko (2007) on civilian officers, police officers, and mid-level supervisors around 811 respondents working for the Turkish National Police Organization in which they founded the organizational factors are the most stressful as compared to other stressors.

A study carried out by Gul (2008) examined the stressors in policing and law enforcement officers' depression on their profession. He also found that officers on duty of violent arrests feel more negative and depressed about their work. In addition to that officers who attended a police funeral were more likely to feel negative and depressed about their profession.

A study conducted by Martin Gachter and his team in 2009 on "Gender Variation of Physiological and Psychological Stress among Police Officers" with main objective is to analyze the effect of gender on reported and perceived level of stress through examination of both the physiological and physiological indicators. Data were taken for analysis from the study "SHIELD" (Study to Help, Identify, Evaluate and Limit department Stress)

Gerrshon (1999) in Baltimore, Maryland. Several indices were constructed to measure different aspects and outcomes of stress for the purpose of study. Initially, t-test was ran to control whether the mean level of perceived stress levels differ significantly between males and females. After then regression was ran to explore the partial effects rather than just the raw effects. A large set of explanatory variables were taken. There was no significant difference were found between males and females concerning physiological stress but the observation shows that female officers have higher level of physical stress (covering also somatisation and

overall health). Furthermore, stress mitigation factors overall like social capital, and perceptions of fairness (Individual) are affecting the male officers but not helps in reducing physical stress among female officers. For both gender groups, only work-life balance and home stability show the tendency to be statistically significant. The requirement of implication of important policy for stress-reducing programs among female police officers with the aim of reducing gender gaps leads to the conclusion of research. For the police officers to find a sane difference between their tasks, both at home and the job such program should focus on overcoming stereotype about job profiles and on allowing a reasonable work-life balance. And this also leads to an environment in which female officers work have significantly hindered their stress coping abilities.

The study conducted with The Campbell Collaboration by George T. Patterson and team on "The Effects of Stress Management intervention among Police Officers and Recruits"(2012) with the objective to identify, recover, assess and produce the available facts about effects of stress management involvement offered to veteran police officers and recruits. The research arrives with conclusion that stress management interventions had no significant effect on psychological, behavioural or physiological outcomes. The 12 primary studies examined psychological stress outcomes with stress can be contribute to negative psychological and physiological outcomes. To support the efficacy of stress management interventions for police officers or recruits, the result does not provide evidence.

STATEMENT OF THE PROBLEM

Many research studies have shown that when people receive appropriate mental health care, their use of medical services declines. Other studies shown that people with untreated mental health problems visit a medical doctor twice as often as people who receive mental health care. Excessive anxiety and stress can contribute to physical problems such as heart disease, ulcers and colitis. Anxiety and stress can also reduce the strength of the immune system, making people more vulnerable to conditions ranging from the common cold to cancer. Smoking, excessive alcohol or drug use, poor eating habits and reckless behaviour can result in severe physical problems and the need for medical services. This study has been undertaken in order to find out the opinion of police officers about their quality of work life in the organization. Also it helps to understand the impact of demographic factors on mental health.

NEED OF THE STUDY

Mental health strengthens and supports our ability to have healthy relationships, make good life choices, maintain physical and well-being, handle the natural ups and downs of life and helps to discover and grow towards our potential. Mental health also associated with higher productivity, better performance, more consistent work attendance and fewer workplace accidents.

1. This study helps the officers to convey their feelings and various factors to enrich their mental health.
2. Secondly, this study helps the department to evaluate their employee’s mental health
3. It also helps to evaluate their present mental state, physical health problem and Job stress level of police officers regarding their job.
4. It will also help to understand how good their mental health helps the employees to work more effectively in their job.
5. This study helps to understand the importance of demographic variables also the relationship between demographic variables and mental health.

RESEARCH OBJECTIVES

BROAD OBJECTIVE

- Mental Health and Its Associated Variables among police personals: With Special Reference to Tirunelveli city.

SPECIFIC OBJECTIVES

- Determining the variables that affect the mental health of employees.
- Determining which factors plays the most significant role on mental health.
- Establishing hypothesis on the basis of the research work.
- Drawing a qualitative and quantitative conclusion on the basis of the survey.

HYPHOTHESIS DEVELOPMENT

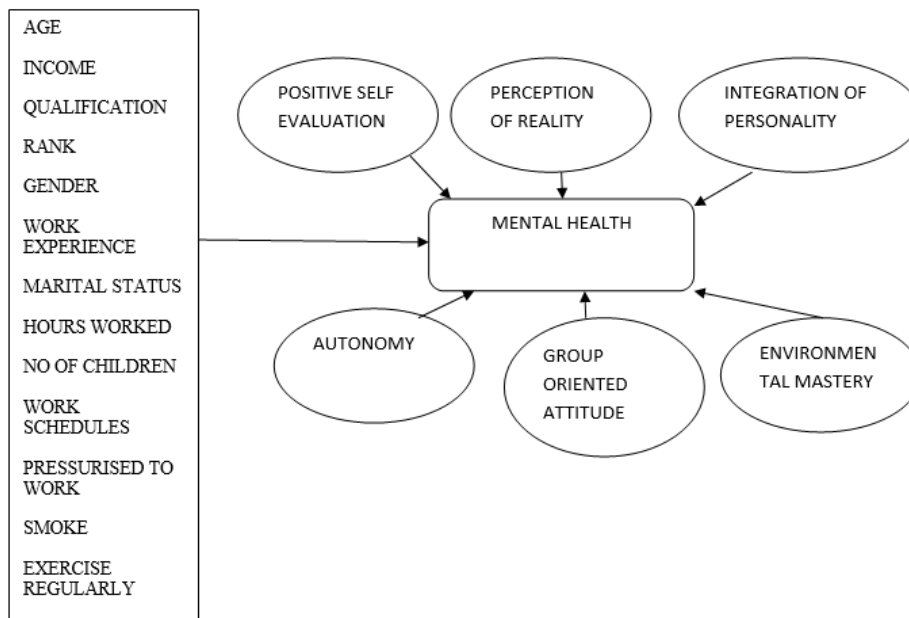
Based on research objectives following hypotheses have been developed for the study.

- H 1= there is no significant difference in the degree of influence of demographic variables, viz., gender, age, marital status, education, experience, income, hrs worked, no of children, work scheduled, pressurised to work and rank with mental health.

CONCEPTUAL FRAMEWORK

A conceptual framework has been developed that is one of the relative construct of this study.

FIG. 1



MENTAL HEALTH INVENTORY

Mental health inventory (MHI) developed by Jagdish and Srivastav (1983) was utilized to access positive aspects of mental health. This test can be used as a group or an individual test, for ages 15 and above, no time and age limit is enforced in the testing. Each items from 1 to 56 given in the test booklet to be rated on 4 point rating scale. It covers the following 6 dimensions of sound mental health:

- Positive Self-Evaluation (PSE) – self-confidence, self-acceptance, self-identity, realization of one’s capabilities.
- Perception of Reality (PR) – related to absence of excessive fantasy, ability to face and accept realities of life.
- Integration of Personality (IP) – indicates balance of psychological forces in the individual, includes emotional maturity, ability to concentrate at work and interest in several activities.
- Autonomy (AUT) – the actions of people are independent rather than dependant on other persons.
- Group Oriented Attitudes (GOA) – ability to work with others and ability to find recreation.
- Environment Mastery (EM) – Efficiency in meeting situational demands.

RESEARCH GAP

From the literatures reviewed, the researcher identified the following gaps;

- ❖ Even though there are enormous studies conducted in Mental health, still it is new to the police sector. Studies are fewer in India.
- ❖ Especially no studies conducted among police in Tirunelveli City.
- ❖ Most of the researchers analysed only female police officer’s stress. But the present study aims to identify both (male & female) police personnel’s mental health.

RESEARCH METHODOLOGY

The type of research used in this article is of descriptive nature. Through this descriptive research, the article sought to determine the answers why, what, where and how questions of the existing employees in police sector and expectations. It also involves collecting information that explains people’s beliefs, knowledge, attitude and behaviour (Fink 1995, Sommer & sommer 1996). Primary data was collected through structured questionnaire and personnel interview with the employees.

A total of 50 sample size considered to be the adequate for my study. Each and every response is checked thoroughly for incomplete and missing response. The questionnaire has two parts in were the first part contains demographic information. Table 1 gives a proper summary of this sort of information. In the second part, the questionnaire to construct the six dependent variables along with an independent variables in the study.

Construct validity of the inventory in determined by finding coefficient of correction between scores on mental health inventory and general health questionnaire (gold berg, 1978) it was found to be 54. The test is scored with the help of manual, 4 alternative responses have been given to each statement i.e. always often, rarely ad never. 4 scores to always, 3 scores too often, 2 scores to rarely and 1 scores to never, marked responses are to be assigned for true keyed (positive) statements whereas 1, 2, 3 and 4 scores for always, ‘often’ rarely and never respectively in case of false keyed (negative) statements.

Scoring of the data was under taken manually with the help of stencils. Statistical Analysis of data, means S.D., test of significance correlation and regression between the factors have been computerized and scores are analyzed with the help of Statistical Package of Social Science (SPSS) Software on its relevant basis respectively. The questionnaire was outlined in English and Tamil and also understandable. Reliability analysis was done to identify the reliability of my study. Beside this, regression analysis, hypothesis testing was done for a proper justification and to draw an appropriate recommendation in the study.

DATA ANALYSIS AND FINDINGS

A) DEMOGRAPHIC DATA ANALYSIS

From the below table it is inferred that most of the respondents in the survey were male (78%) were (22%) were female. It is found that most of the respondents (32 %) falls under the age of 31- 40 and a few of the respondents are 41-50 years old. It is established that most of the respondents (82%) are married. It is found that maximum numbers of the respondents are earning above Rs 40,000 (30%) as their monthly income and minimum numbers of respondents are earning less than 20,000-30,000 (10%) as their income. It is stated that most of the respondents have 15+ yrs (30.6%) work experience and minimum of 7-15 yrs. This table shows that they don’t have any define working hours (78%) and (52%) respondents stated that they are working in rotating shifts. It is found that most of the respondents are Graduate (42%). It is stated that most of the respondents are accepted that they are pressurised to do extra work (74%). From the rank categories, there were (52%) who were working as constables. It is also assured that most of the respondents have one child (47%). (72%) of the respondents assured that they are not regular in daily workout. (92%) of respondents falls under non smoke.

TABLE 1: DEMOGRAPHIC PROFILE OF RESPONDENT

S.NO	DEMOGRAPHIC VARIABLES	FREQUENCY	PERCENTAGE
1.	GENDER		
	Male	39	78.0
	Female	11	22.0
	Total	50	100
2.	RANK		
	Constables	26	52.0
	Head Constables	14	28.0
	Sub-Inspector	8	16.0
	Additional Superintend	2	4.0
	Total	50	100
3.	WORK EXPERIENCE		
	Below 4 yrs	9	18.1
	4-7 yrs	10	22.6
	7-15 yrs	12	28.7
	15+ yrs	19	30.6
	Total	50	100
4.	MONTHLY INCOME		
	Below 10,000	8	16.0
	10,000-20,000	12	24.0
	20,000-30,000	5	10.0
	30,000-40,000	10	20.0
	Above 40,000	15	30.0
	Total	50	100
5.	ACADEMIC QUALIFICATION		
	Post Graduate	2	4.0
	Graduate	21	42.0
	Diploma	7	14.0
	HSC	10	20.0
	SSLC & Below	10	20.0
	Total	50	100
6.	AGE		
	20-25	8	16.0
	26-30	12	24.0
	31-40	16	32.0
	41-50	7	14.0
	50+	7	14.0
	Total	50	100
7.	MARTIAL STATUS		
	Married	41	82.0
	Single	7	14.0
	Divorced/widowed	2	4.0
	Total	50	100
8. NO OF CHILDREN			
	No children	9	18.0
	One	23	46.0
	Two	18	36.0
	Total	50	100
9.	HOURS OF WORK		
	8hrs	2	4.0
	9hrs	3	6.0
	10hrs	1	2.0
	10+hrs	2	4.0
	NO definite time	39	78.0
	Total	50	100
10.	WORK SCHEDULE		
	Day shift	8	16.0
	Split shift	1	2.0
	Irregular shift	15	30.0
	Rotating shift	26	52.0
	Total	50	100
11.	PRESSURED TO WORK		
	Yes	37	74.0
	No	13	26.0
	Total	50	100
12. Smoke			
	Yes	4	8.0
	No	46	92.0
	Total	50	100
13. exercise regularly			
	Yes	14	28.0
	No	36	72.0
	Total	50	100

Source: Field Study (2015)

B) SECONDARY DATA ANALYSIS

A reliability analysis is commonly used to identify the internal consistency of the variables. However, cronbach’s alpha is commonly used to test the reliability and the range of alpha coefficient value is in between 0 to 1. The higher value indicates the higher reliability (Hair, et al., 1992). A value more than .70 is significantly good measure for sufficient scale of reliability (Cronbach 1951, Nunnally 1987). According to the cronbach’s alpha test the value of alpha in this study is 0.911 which is higher than the minimum acceptable value. Therefore 91.10% of data are reliable in this study. The reliable analysis has been done for dependent variables.

RELIABILITY OF THE INVENTORY

The reliability of the inventory was determined by ‘split half methods using odd even procedure. The table showing reliability co efficient of mental health variables are.

TABLE 2: RELIABILITY TEST

Sr. No.	FACTORS OF MENTAL HEALTH	RELIABILITY INDEX
1	Positive self-evaluation	.75
2	Perception of reality	.71
3	Integration of personality	.72
4	Autonomy	.72
5	Group oriented attitude	.74
6	Environmental mastery	.73

i) HYPOTHESIS TESTING

To conduct the hypothesis test a regression analysis has been done and eleven factors which have effect in demographic factors are considered. However, details of the influence of independent variable over dependent variable have been shown in table 6.

According to the analysis, the significant value for the hypothesis is 0.036, which is less than level of significance 0.05. So null hypothesis is rejected and it is concluded like there is an impact on age and mental health. Rank affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .042, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of rank on mental health. Work experience affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .046, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of work experience on mental health. Monthly income affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .035, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of monthly income on mental health. Educational qualification affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .075, which is equal to level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of educational qualification on mental health. Age affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .022, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of age on mental health. Marital status affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .039, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of marital status on mental health. No of children affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .022, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of no of children on mental health. Hours of work affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .007, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of hours of work on mental health. Work scheduled affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .040, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of work scheduled on mental health. Pressurized to work affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .001, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of pressurized to work on mental health. Exercise regular affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .041, which is less than level of significant value 0.05. So null hypothesis is rejected and hence it is concluded like that there is impact on mental health. Smoking affects the mental health of the employees. According to the analysis, the significant value for the hypothesis is .031, which is less than level of significant value 0.05. So null hypothesis is rejected and it is concluded like there is an impact of smoking on mental health.

ii) REGRESSION ANALYSIS

From the regression analysis (table 4), the R square tells the goodness of fit and the degree of association between the dependent and independent variables. In this case, R square value is .440 and it shows a good fitness. The value of F (2.118) depicts the significance of R square, which further means that regression as a whole is significant expects exercise regularly. Hence the hypothesis is rejected, which means that there is significant difference in the degree of influence of demographic variables on mental health of police.

Considering the Beta value (table 6), it is clear that the age explains the maximum proportion of variation for mental health, followed by monthly income and work experience. The ‘t’ value and the significance level indicate that age, gender, rank, experience, qualification, income, hours works, pressurized to work, smoking and exercise regularly significantly contribute to the mental health.

TABLE 3: VARIABLES ENTERED/REMOVED

Model	Variables Entered	Variables Removed	Method
1	smoke, rank, hours of work, marital status, gender, usual work schedule, exercise regularly, monthly income, academic qualification, no of children, pressurized to work extra, age, work experience	.	Enter

- a. Dependent Variable: Mental health
- b. All requested variables entered.

TABLE 4: MODEL SUMMARY

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.664 ^a	.440	.232	.26289

- a. Predictors: (Constant), smoke, rank, hours of work, marital status, gender, usual work schedule, exercise regularly, monthly income, academic qualification, no of children, pressurized to work extra, age, work experience

TABLE 5- ANOVA^a

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1.902	13	.146	2.118	.039 ^b
	Residual	2.419	35	.069		
	Total	4.321	48			

- a. Dependent Variable: Mental health
- b. Predictors: (Constant), smoke, rank, hours of work, marital status, gender, usual work schedule, exercise regularly, monthly income, academic qualification, no of children, pressurized to work extra, age, work experience

TABLE 6: COEFFICIENTS^a

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1 (Constant)	1.400	.643		2.179	.036
gender	.082	.113	.111	.722	.005
rank	-.097	.046	-.372	-2.111	.042
work experience	.133	.070	.546	1.897	.046
monthly income	.007	.036	.037	.209	.035
academic qualification	.052	.038	.222	1.385	.075
age	-.051	.063	-.217	-.812	.022
marital status	-.088	.081	-.174	-1.076	.039
no of children	.036	.045	.134	.812	.022
hours of work	.057	.045	.216	1.287	.007
usual work schedule	.031	.028	.187	1.120	.040
pressurised to work extra	.063	.119	.094	.527	.001
exercise regularly	-.217	.102	-.329	-2.121	.041
smoke	.325	.174	.299	1.863	.031

a. Dependent Variable: Mental health

RESULTS AND DISCUSSION

This research study is tried to examine the factors that have an impact on mental health of employees of police sector in Tirunelveli city. The six factors are. Positive self evaluation, perception of reality, integration of personality, autonomy, group oriented attitude and environmental mastery the outcome of the research indicates that six out of thirteen demographic factors (gender, age, income, education, experience, rank, marital status, no of children, hours of worked, work scheduled and pressurized to work, smoking and exercise regularly) have significant influence on mental health. From the finding, it can be recommended that good mental health is such a critical concept that might be disturbed due to dissatisfaction of mind set.

The present study had been undertaken in order to know the relationship and differences between demographic variables with mental health of police. Mental health is a condition of psychological maturity - a relatively constant and enduring function of personality. It is a condition of personal and social functioning with maximum effectiveness and satisfaction. Mental health includes positive feelings and attitudes towards the self and others. A person who successfully adjusts with his own self and also with the society is said to be well adjusted whereas if a person fails to adjust with himself, with his family and with the norms of his society, is called disturbed and having ill health. According to research, more police officers than ever before are suffering from mental health problems due to stress caused by dwindling numbers on the frontline. Officers feared disclosing having mental health problems due to factors including fear of the reaction they would receive from supervisors and colleagues, fearing the stigma around mental health and the impact on their careers if they are seen as not being able to cope. Officers reported feeling they were 'letting the team down' if they took time off for stress. Managers reported a lack of ability to spot early signs of distress, anxiety and depression, especially the effect of non-work stressors and a lack of training on dealing with mental health issues due to cost and time. The long terms effects of mental health on people can be devastating so it is vital that issues can be identified early and that officers know they will be supported and helped. There are far too many people suffering.

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