

Utilization of Stress Coping Mechanisms among Police Officers in Langata Constituency, Nairobi County, Kenya

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ABSTRACT

Coping with stress in police work is a growing concern, given that officers routinely operate in environments characterized by intense demands, complexity, and constant pressure. The aim of this study was to explore the utilization of stress coping mechanisms among police officers in Langata Constituency, Nairobi County, Kenya. This study utilized descriptive survey design. Quantitative methods were employed to generate measurable data suitable for statistical analysis of stress levels and associated factors. A sample size of 126 police officers was drawn from the total police population in the constituency. Cluster sampling was used, with police stations serving as clusters, followed by simple random sampling to select individual respondents within each station using duty rosters. Data was collected using structured questionnaires. Descriptive statistics and correlation analyses were used to determine coping mechanisms and how they differ by the police officers' personal characteristics and demographic factors. The study found that police officers employ a variety of coping mechanisms to manage occupational stress, with speaking to someone being the most commonly used strategy, while taking a few days off work was the least utilized. Both positive and negative coping strategies were observed. The findings emphasize the importance of strengthening adaptive coping mechanisms through targeted psychosocial support, stress management training, and organizational interventions that are sensitive to officers' life situations and career stages.

Key words: Occupational Stress, Coping Mechanisms, Police Officers, Adaptive Coping

INTRODUCTION

Stress coping among police officers has become a critical concern due to the persistent exposure of officers to demanding, complex, and high-pressure work environments. Policing is globally recognized as an inherently stressful occupation, and when stress is inadequately managed, it can adversely affect officers' wellbeing, performance, and professional conduct. Stress arises when an individual's personal and organizational resources are insufficient to meet situational demands, resulting in psychological and physical strain (Rajeswari & Chalam, 2018). Long working hours, constant exposure to risk, organizational pressures, and personal stressors make police officers particularly vulnerable to fatigue, burnout, and health complications, including cardiovascular diseases (Adegoke, 2014; Jonyo, 2015; Raju et al., 2020).

Theoretical and empirical studies further demonstrate that ineffective coping with occupational stress can result in maladaptive behaviors and negative social outcomes. Min (2022) observed that the demanding nature of police duties necessitates effective coping strategies to mitigate adverse outcomes associated with occupational stress. Similarly, exposure to persistent negative stimuli without adequate coping support has been linked to aggression, substance misuse, and other dysfunctional behaviors (Bishopp & Boots, 2014; Bishopp et al., 2018). These findings underscore the importance of understanding how police officers cope with stress, as effective coping mechanisms play a critical role in promoting psychological resilience, emotional regulation, and healthy organizational functioning.

Occupational stress and coping are also dynamic phenomena influenced by changing job expectations, organizational reforms, and broader social contexts. Moreover, coping strategies are not uniform across settings, as geographical, socio-demographic, and operational variations shape stress experiences and responses. Consequently, there is no universal coping model applicable to all police officers, reinforcing the need for region-

specific studies. Scholars have emphasized the importance of examining the causes, effects, mitigation strategies, and risk management approaches to occupational stress, noting that effective coping mechanisms are often context- and environment-specific (Falloran et al., 2022).

Despite growing recognition of the adverse effects of occupational stress, there remains a paucity of empirical studies that provide practical data on coping mechanisms and intervention tools applicable within police organizations. This gap limits the development and implementation of evidence-based stress management programs. Addressing this deficiency requires systematic documentation of how police officers currently cope with stress and identification of effective strategies that can be strengthened through institutional support. Such evidence is essential for informing proactive interventions aimed at improving officers' wellbeing, enhancing working conditions, and promoting optimal service delivery.

Within the African context, and particularly in Kenya, occupational stress among police officers remains a significant yet inadequately addressed concern. Studies have consistently shown that officers in the Kenya National Police Service experience high levels of occupational stress (Jonyo, 2015; Momanyi, 2018; Nyaga, 2006; Ongoro & Oloko, 2015; Were et al., 2013), with evidence from Nakuru County indicating that over 70% of police officers experience work-related stress (Jonyo, 2015). Identified stressors include heavy workloads, prolonged working hours, frequent transfers, exposure to traumatic incidents, inadequate housing and medical cover, limited social support services, lack of work resources, unfair promotion practices, and negative public perceptions of the police. Although these stressors are well documented, existing studies reveal that stress management and coping support systems within the Kenya National Police Service are poorly developed, rarely implemented, and insufficiently studied, particularly at the constituency level. Consequently, there is limited empirical evidence on the extent and types of stress coping mechanisms utilized by police officers in specific contexts, thereby providing the impetus for the present inquiry on utilization of stress coping mechanisms among police officers in Langata Constituency, Nairobi County, Kenya.

LITERATURE REVIEW

Coping mechanisms are generally aimed at reducing the adverse physical and psychological effects of stressors (Paulsen, 2008). In policing, stress management approaches typically involve either preventing exposure to stressors or responding effectively to stress once it occurs (Bishopp et al., 2018; Webb & Smith, 1980). Proactive strategies focus on modifying officers' knowledge, skills, and attitudes toward stress and its consequences through training and education (Bishopp et al., 2018). Reactive strategies, on the other hand, are designed to help officers manage existing stress and alleviate its negative effects (Bishopp & Boots, 2014; Brown, 2016). Despite the inherent difficulty of eliminating certain stressors in police work, evidence suggests that a combination of proactive and reactive approaches can be effective in mitigating occupational stress (Paulsen, 2008).

Available literature identifies three broad categories of coping strategies commonly used by police officers: problem-focused coping, emotion-focused coping, and avoidance coping (Paulsen, 2008). Emotion-focused coping involves cognitive and behavioral efforts to reduce emotional distress and includes strategies such as seeking emotional support, acceptance, religious coping, positive reinterpretation, and controlled attention (Straub, 2002). Problem-focused coping entails directly addressing the source of stress by reducing its demands or increasing one's capacity to manage it, through activities such as problem identification, evaluation of alternatives, decision-making, and action (Paulsen, 2008; Straub, 2002). Avoidance coping, in contrast, involves efforts to evade confronting stressful experiences through distraction or disengagement. Although avoidance coping may provide short-term relief, its frequent use among police officers has been associated with less favorable long-term outcomes.

At the organizational level, the WHO (2007) proposes a stepwise approach to occupational stress prevention, beginning with stress identification, followed by evaluation of stressors, development of an action plan, implementation of interventions, and assessment of effectiveness. This cyclical process allows for continuous reappraisal and improvement, and is recommended as a foundation for comprehensive occupational stress management programs within organizations. Further, training represents a key proactive intervention in stress

management, as it prepares officers for the psychological and operational challenges they are likely to encounter in the course of duty (Paulsen, 2008). The World Health Organization (WHO, 2007) outlines essential principles for effective prevention of occupational stress, including recognition of stress as a legitimate workplace issue, normalization of stress as an occupational challenge, active involvement of employees in developing solutions, transparent organizational structures, and the use of diverse and integrated intervention approaches. These principles emphasize the importance of organizational commitment and participatory processes in stress prevention programs.

Empirical evidence from developed countries demonstrates substantial investment in stress coping and intervention programs for police officers. A comprehensive review of occupational stress interventions in the United States identified over 4,700 related publications, highlighting the extensive attention given to police wellbeing (Maglione et al., 2021). Interventions examined included resilience training, mindfulness programs, stress inoculation, biofeedback, mental health first aid, embedded mental health services, restoration programs, stress debriefing, post-deployment screening, reintegration initiatives, and family-centered support programs. These findings illustrate the range of coping mechanisms and institutional supports that can be leveraged to enhance police officers' capacity to manage occupational stress.

Inadequate coping strategies can result in maladaptive behaviors with serious personal and organizational consequences. In the absence of effective coping mechanisms, police officers may resort to alcohol and substance use to alleviate frustration (Momanyi, 2018), or adopt unhealthy eating behaviors that increase the risk of obesity and diabetes (Ogola et al., 2021). Workplace stress has also been linked to aggressive and unruly behavior, including extreme cases of violence within the police service (Oweke et al., 2014). These outcomes underscore the urgency of strengthening stress coping mechanisms and institutional support systems within police organizations to promote officer wellbeing and prevent adverse outcomes.

Socio-demographic characteristics are important determinants of how individuals experience and cope with occupational stress. These characteristics include age, sex, education level, household size, employment status, ethnicity, migration history, religion, and income level (Leibnitz Institute of Social Sciences, 2022). In policing, such characteristics interact with organizational and social pressures to shape officers' perceptions of stress and their coping responses. Kohan and Mazmanian (2003) observe that police officers often perceive social stressors as more adverse and emotionally taxing than organizational pressures. Within the police service, peer influence constitutes a critical social force, as shared work experiences promote mutual understanding and support. Peer support, therefore, functions as a protective mechanism, enabling officers to tolerate hostility, anger, and abuse encountered in the line of duty.

Gender differences further influence stress experiences and coping mechanisms among police officers. Research indicates that male and female officers often respond differently to similar stressors. Male officers are more likely to employ problem-focused coping strategies aimed at addressing or overcoming stressors directly, whereas female officers tend to rely more on emotion-focused strategies that seek to regulate emotional responses to stress (Straub, 2002). Although both approaches are considered effective, the literature recommends a combined use of problem-focused and emotion-focused coping strategies for optimal stress management.

Ethnicity and cultural background have also been shown to play a significant role in occupational stress and coping among law enforcement officers. Pienaar and Rothmann (2006) emphasize that race and culture influence not only the type and context of stressors experienced, but also the availability and preference for specific coping mechanisms. Evidence from the United States indicates that police officers who experience racial or ethnic discrimination report heightened levels of occupational stress (Morash et al., 2006). Cultural values and norms, including reliance on religion, social support, and self-reliance, shape how stress is interpreted and managed. Consequently, officers from marginalized ethnic or cultural groups may face compounded stressors and limited access to effective coping resources compared to those from more socially advantaged groups.

RESEARCH METHODOLOGY

This study utilized descriptive survey design. Quantitative methods were employed to generate measurable data suitable for statistical analysis of stress levels and associated factors. The target population comprised police

officers stationed within Lang'ata Constituency, with the sampling frame obtained from the National Police Service. Lang'ata Constituency, the largest and most populous constituency in Nairobi County, has diverse socio-economic characteristics and five police stations serving a large civilian population. A scientifically determined sample size of 126 police officers was drawn from the total police population in the constituency, with allowances made for potential attrition. Proportional allocation ensured representation from all police stations, as well as adequate distribution across gender and ranks.

Cluster sampling was used, with police stations serving as clusters, followed by simple random sampling to select individual respondents within each station using duty rosters. Data was collected using structured questionnaires. Trained research assistants administered the instruments under the researcher's supervision, with multiple visits made to police stations to ensure full participation.

Data analysis involved cleaning, coding, and entry into SPSS for statistical analysis. Descriptive statistics and correlation analyses were used to determine coping mechanisms and how they differ by the police officers' personal characteristics and demographic factors. Ethical approval was obtained from relevant authorities, informed consent was secured from all participants, and strict confidentiality, data security, and non-victimization measures were upheld throughout the research process to ensure ethical and scientific integrity.

RESULTS

Stress coping mechanisms of the respondents was measured by evaluating the activities they undertake to handle the effects of occupational stress whenever they are manifested in their lives. Table 1 presents the

Table 1 Ranking Of Stress Coping Mechanisms

Item	Stress coping mechanisms	N	Mean	Std. Dev.	Nature of mechanism	Rank
1.	I undertake physical exercise	84	2.13	0.61	Positive	4
2.	I spend time with friends and family	84	1.67	0.97	Positive	7
3.	I speak to someone e.g. friend, spouse, confidante	84	2.45	0.81	Positive	1
4.	I move on as if nothing had happened	84	1.76	0.28	Negative	6
5.	I keep my feelings to myself	84	2.33	1.25	Negative	2
6.	I create an action plan and adhere to it.	84	2.29	0.78	Positive	3
7.	I undertake a hobby e.g. social media, games, reading, watching TV, etc.	84	1.45	0.72	Positive	8
8.	I take a few days from work	84	1.11	0.74	Positive	10
9.	By eating, drinking, smoking, taking drugs or medication, and other activities, I try to improve my mood.	84	1.86	1.21	Negative	5
10.	I spend time on religious activities e.g. praying, reading scripture, singing, etc.	84	1.25	0.82	Positive	9

The top 10 mechanisms for coping with occupational stress were ranked as evaluated on Table 1. The top ranked stress coping mechanism was '*I speak to a someone e.g. friend, spouse or confidante*' with a mean of 2.45 and a standard deviation of 0.81 while the last was '*I take a few days from work*' with a mean of 1.11 and a standard deviation of 0.74.

The utilization of different coping mechanisms (positive or negative) based on the socio-demographic factors was compared using ANOVA, as shown in Table 2.

Table 2 Utilization of Coping Mechanisms Based on Gender And Age

Socio demographic variables			Positive coping	Negative coping
Gender	Males	Mean	16.14	6.60
		N	58	58
		Std. Deviation	6.01	3.48
	Females	Mean	14.85	7.00
		N	26	26
		Std. Deviation	6.70	4.45
	Total	Mean	15.74	6.73
		N	84	84
		Std. Deviation	6.22	3.79
	ANOVA (p)	6	.382	.660
Age categories in years	20-30	Mean	15.03	7.07
		N	30	30
		Std. Deviation	5.68	4.06
	31-40	Mean	15.85	6.09
		N	33	33
		Std. Deviation	6.34	3.88
	41-50	Mean	17.75	6.19
		N	16	16
		Std. Deviation	7.46	2.71
	51-60	Mean	12.80	10.60
		N	5	5
		Std. Deviation	2.86	2.41
	Total	Mean	15.74	6.73
		N	84	84
		Std. Deviation	6.22	3.79
	ANOVA (p)		.369	.079

Table 2 shows the comparisons of utilization of positive and negative coping mechanisms based on gender and age of the respondents. The findings of the ANOVA p-value suggest that there was no statistically significant difference in the use of positive coping mechanisms based on gender ($p=.382$) or age categories ($p=.369$). On the same line, there was no statistically significant difference in the use of negative coping mechanisms based on gender ($p=.660$) or age categories ($p=.079$). This means that the officers regardless of the age or gender used almost the same forms of coping mechanisms.

Table 3 Utilization of Coping Mechanisms Based on Education Level and Marital Status

Socio demographic variables			Positive coping	Negative coping
Education level	Masters	Mean	15.25	8.50
		N	4	4
		Std. Deviation	9.71	4.20
	Bachelors	Mean	16.95	5.47
		N	19	19
		Std. Deviation	4.82	3.70
	Higher Diploma	Mean	17.40	8.80
		N	5	5

	Ordinary Diploma	Std. Deviation	8.11	6.30
		Mean	15.80	8.05
		N	20	20
		Std. Deviation	7.46	4.06
	Secondary school	Mean	14.86	5.94
		N	35	35
		Std. Deviation	5.74	2.69
	Other	Mean	16.00	14.00
		N	1	1
		Std. Deviation	.	.
	Total	Mean	15.74	6.73
		N	84	84
		Std. Deviation	6.22	3.79
		ANOVA (p)	.883	.029
Marital status	Married	Mean	14.93	6.56
		N	54	54
		Std. Deviation	5.61	3.71
	Single	Mean	15.18	7.23
		N	22	22
		Std. Deviation	6.31	3.89
	Separated	Mean	26.00	4.25
		N	4	4
		Std. Deviation	6.27	2.63
	Divorced	Mean	18.00	6.00
		N	2	2
		Std. Deviation	2.83	5.66
	Widowed	Mean	21.00	11.50
		N	2	2
		Std. Deviation	7.07	3.54
	Total	Mean	15.74	6.73
		N	84	84
		Std. Deviation	6.22	3.79
		ANOVA (p)	.006	.245

Table 3 shows the comparisons of utilization of positive and negative coping mechanisms based on marital status and education level of the respondents. The findings of the ANOVA p-value suggest that there was no statistically significant difference in the use of positive coping mechanisms based on education level ($p=.883$) but a statistically significant difference was noted based on the marital status ($p=.006$). As for the negative coping

mechanisms, there was a statistically significant difference in the use of negative coping mechanisms based on education level ($p=.029$) but based on the marital status, the use of negative coping mechanisms did not show statistically significant differences ($p=.245$). This means that the officers based on their marital statuses varied in the use of positive coping mechanisms, where higher means implying more use of positive coping mechanisms were among those who were separated ($M=26$, $sd=6.27$), followed by the widowed ($M=21.00$, $sd=7.07$). The use of negative coping mechanisms also varied based on the education levels.

Table 4 Utilization of Coping Mechanisms Based on Designation and Years of Experience

Socio demographic variables			Positive coping	Negative coping
Designation	Chief Inspector	Mean	27.00	8.00
		N	1	1
		Std. Deviation	.	.
	Inspector	Mean	13.10	8.00
		N	11	11
		Std. Deviation	4.72	3.55
	Senior Sergeant	Mean	16.00	14.00
		N	1	1
		Std. Deviation	.	.
Years of experience	Sergeant	Mean	16.80	4.60
		N	5	5
		Std. Deviation	6.18	2.07
	Corporal	Mean	16.08	6.08
		N	13	13
		Std. Deviation	6.87	2.84
	Police constable	Mean	15.89	6.66
		N	53	53
		Std. Deviation	6.29	4.04
	Total	Mean	15.74	6.73
		N	84	84
		Std. Deviation	6.22	3.79
		ANOVA (p)	.365	.219
	< 5 years	Mean	17.31	8.85
		N	13	13
		Std. Deviation	6.50	3.51
	6-15years	Mean	14.57	6.33
		N	46	46
		Std. Deviation	6.04	3.87
	16-25years	Mean	19.87	5.20

		N	15	15
		Std. Deviation	5.85	3.32
> 26 years		Mean	12.90	8.10
		N	10	10
		Std. Deviation	4.09	3.25
Total		Mean	15.74	6.73
		N	84	84
		Std. Deviation	6.22	3.79
		ANOVA (p)	.009*	.036*

DISCUSSIONS

The findings show that police officers predominantly relied on emotion and problem-focused coping, with speaking to a friend, spouse, or confidante ranking highest, followed by keeping feelings to oneself and creating an action plan. This pattern suggests a coexistence of both adaptive (social support seeking, planning) and maladaptive (emotional suppression, substance-related coping) mechanisms. The prominence of social support as a coping strategy agrees with stress and coping literature, which consistently identifies social support as a key buffer against occupational stress, particularly in high-risk professions such as policing (Straub, 2002). However, the high ranking of “keeping my feelings to myself” indicates continued reliance on avoidance or suppression, which literature links to poorer mental health outcomes among police officers (Acquadro-Maran et al., 2015). The relatively low use of leave-taking and religious coping may reflect organizational and cultural constraints within police work that limit time-off or frame spirituality as a private rather than primary coping resource.

With respect to gender and age, the ANOVA results indicate no statistically significant differences in the utilization of either positive or negative coping mechanisms. This finding contradicts several prior studies that report gender- and age-based differences in coping, particularly higher vulnerability and maladaptive coping among female and younger officers (Vivek et al., 2019; He et al., 2005). While earlier research suggests that female officers experience higher stress due to societal expectations, workplace discrimination, and role conflict (Paulsen, 2008), the current findings imply that once stress is experienced, male and female officers, as well as officers across age categories, tend to adopt similar coping approaches. This may be explained by shared organizational culture and training within the police service, which could standardize coping responses regardless of age or gender, even though stress exposure and outcomes may still differ.

In contrast, the study found statistically significant differences in coping mechanisms based on marital status, education level, and years of experience, which largely aligns with extant literature. Officers who were separated or widowed reported higher use of positive coping mechanisms, supporting the notion that major life transitions may prompt individuals to consciously adopt adaptive coping strategies to maintain psychological stability (Straub, 2002). The significant variation in negative coping by education level is also consistent with prior research suggesting that education enhances awareness of stress and access to healthier coping alternatives, while lower education levels may be associated with maladaptive coping behaviors (Vivek et al., 2019). Additionally, the significant differences observed across years of experience support the notion that prolonged exposure to occupational stress enables officers to develop more effective coping strategies over time (Straub, 2002).

CONCLUSIONS AND RECOMMENDATIONS

This study has revealed that police officers rely on a combination of positive and negative coping mechanisms to manage occupational stress, with interpersonal support and problem-focused strategies emerging as the most commonly used approaches, while maladaptive strategies such as emotional suppression and substance-related coping remain prevalent. The absence of significant differences in coping based on gender and age suggests a relatively uniform coping culture within the police service, despite variations in stress vulnerability across these

groups. However, significant differences associated with marital status, education level, and years of experience highlight the influence of personal circumstances, educational exposure, and accumulated professional experience on how officers cope with stress. In sum, the findings emphasize the importance of strengthening adaptive coping mechanisms through targeted psychosocial support, stress management training, and organizational interventions that are sensitive to officers' life situations and career stages.

The National Police Service should formulate and strengthen policies that institutionalize occupational stress management as a core component of police welfare. This includes integrating mandatory mental health and stress-coping programs into police policy frameworks, ensuring equitable access across ranks, genders, and career stages. Policies should promote supportive work environments by normalizing help-seeking behavior, protecting confidentiality in counseling services, and discouraging punitive or stigmatizing responses to psychological distress. Additionally, policy provisions should address work-life balance through clear guidelines on leave utilization, flexible duty schedules where feasible, and family-supportive policies that recognize the influence of marital and family circumstances on coping with occupational stress.

At the operational level, various police organizations should establish regular training focused on stress management that promotes adaptive coping techniques such as seeking social support, effective problem-solving, and maintaining healthy lifestyle habits, while actively discouraging harmful behaviors like emotional suppression and substance abuse. Peer support initiatives, mentorship programs, and structured debriefing sessions should be enhanced to capitalize on the highly valued interpersonal coping strategies highlighted in the research. Specific attention should be dedicated to officers facing critical career phases or life changes by offering specialized counseling and interventions aimed at building resilience. Additionally, supervisors should receive training to identify early indicators of stress and to cultivate a supportive environment that encourages officers to utilize available psychosocial support services without worries about stigma or adverse effects on their careers.

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