Stress and Anger Management among Police Personnel through Indian Psychological Techniques

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ABSTRACT
The police fulfil an essential role in the society and since their job is demanding, it is also stressful. Constant and unmanaged stress potentially reduces the effectiveness and efficiency of the personnel. The stressed police officers pose a threat to themselves, their colleagues, offenders and/or to public safety and thus it is a matter of urgent concern for psychologists in particular and mental health researchers in general. There are endeavours to reduce, eliminate or modify stress and anger among police personnel using psychological techniques based on the western model. The present study is unique as it uses stress and anger management techniques based on Indian psychological models. The multidimensional psychological interventions used in this study were chosen on the basis of indigenous psychological viewpoints embedded in Yoga and meditational techniques. The volunteers were chosen from different ranks of police personnel, namely constables, head constables, as well as assistant sub-inspectors and inspectors, who were divided into different groups. However, only the control group was exposed to physical relaxation technique to reduce their stress level and anger. In order to assess the efficacy of these multidimensional psychological interventions, scores on stress and anger were taken prior to and after the intervention (pre-test and post-test design). A repeated measure analysis of variance was applied to compare the experimental and control groups. It was found that the multidimensional psychological interventions were significant in reducing job stress, anger-in, anger-out as they enhanced the anger-control of subjects. The study highlighted the role of stress and anger management techniques developed from Indian psychology theory.

Keywords: Stress and anger management, police personnel, and Indian psychological techniques
INTRODUCTION

Job stress is a universal phenomenon which is part of mankind’s work environment. It is widely viewed as a product of mismatch between the individual and his/her physical or social environment (Beehr & Newman, 1978; Harrison, 1978). The phenomenon of stress has been examined in several disciplines, i.e. psychology, physiology, anthropology, medicine and management. However, Selye was probably the first to use the term stress in Psycho-physiological context. Selye (1974) defined stress as a “non-specific response of the body to any demand made upon it”. It was reported that for every activity (task), there is an optimal level of stress that is required to perform that activity; both before and beyond this point, the level of stress is either too little or too great. This is most often illustrated using Yerkes and Dodson’s (1908) inverted “U” curve. When the level of stress exceeds the optimal level, it has the potential to be harmful and damaging to the individual. According to Thoits (1996), stress is experienced when people are faced with undesirable life demands that disrupt their ability to engage in everyday activities. Stress is presumed to arise when this appraisal produces the judgment that demands are about to tax or exceed the individual’s resources for dealing with them, thus threatening well being (Holroyal & Lazarus, 1992). According to Pestonjee (1987), stress occurs in a person when he/she is faced with demands that tax his/her adaptive resources.

The modern day, life style has created severe stress which is increasing every day. The police personnel are one of the most stressed groups of people in the society. In fact, stress has led to many problems in both personal and professional life. In today’s fast-paced world, police personnel are experiencing more stress at every stage of their life than ever before. Law enforcement tends to impose a higher degree of stress and a multiplicity of stress situation on the police personnel than other professions (Violanti & Marshall, 1983; Colwell, 1988; Raiser, 1974; Kroes, Margolis & Hurrell, 1974, 1976; Selye, 1978; Somodevilla, 1978; Reilly & DiAngelo, 1990; Horn, 1991; Violanti, 1992; Brown & Campbell, 1994). Although the presence of stress among policemen is always felt, it is not recognized as the major enemy (Mathur, 1994). Stress appears to be the inevitable price of a career in police force (Barry, 1978; Colwell, 1988), in which high incidences of stress related illness, mortality, divorce and suicide, as compared with other occupations, have been observed (Capland, 1984; Mayers, 1982). Social change, economic conditions, police organizations, total criminal justice system, the demands made on policeman’s time with their families all contribute towards high stress level (Grercik, 1975). In particular, insufficient time for the family has been the top ranking stressor (Kumar, 1995; Kroes et al., 1974), while work overload has been observed as the second highest ranking job related stressor (Mathur 1993). Meanwhile, the highest job stress related to structure and
climate, co-worker relationship and their managerial role has been observed among police personnel, whereby boredom and monotonous duties have been reported to be the stressful aspects for police officers (Alexander, 1991; Brown et al., 1996).

Police work often places officers in situations where reaction, speed, coordination and the capacity to make rapid decisions and accurate judgements under pressure is critical, and inefficient mental and emotional responses to stress can significantly impair these abilities (Arnsten, 1998). At the extreme level, stress can cause officers to lose balance and composure to the degree that they employ inappropriate or excessive force in dealing with subjects (Moore & Donohue, 1976). At the psychological level, the stress of police work may result in chronic negative emotions such as anger, anxiety or depression. Police officers operating under severe and chronic stress may well be at greater risk of error and over-reaction that can compromise their performance and public safety. The unrealistic expectations imposed by this occupational culture discourage officers from admitting feeling stressed and openly expressing negative emotions. Violanti (1992) reported that police officers are one of the most highly stressed populations. In more specific, they experience a variety of physical and psychological health consequences, including cardiac disorders, death at an early age, suicide, depression, alcoholism, as well as family and marital problems (Sarason et al., 1979; Territo & Vetter, 1981). Sarason et al. (1979) proposed two types of stressors that police officers experience, and these are those that engender anxiety and those that arouse anger and hostility. Anger-related stress is particularly important, and its negative effects are heightened because officers are prohibited by the decorum of their job from publicly expressing anger and hostility (Pate & Spielberger, 1979). Abernathy (1995) has written that these unusually stringent demands for self-control represent an additional stressor for police.

When the amount of pressure becomes too great, individuals may begin to show breakdown of physical or psychological system that does not only impede their work capability but also results in physical and/or mental illness. Police officers typically suffer a variety of physiological, psychological and behavioural stress effects. Anger has also been found to have negative impacts on emotional as well as the physical well-being of the people (Carmody et al., 1989; Engenbretson et al., 1989; Gosh & Sharma, 1998; Mood et al., 1990; Sharma et al., 1996). Friedman (1992), Mearns and Mauch (1998), as well as Miller et al. (1996) observed that anger and hostility predispose people to serious health problems. Mearns and Mauch (1998) also observed that police officers who reported more anger also reported more distress.

In the present study, the objective was to follow a holistic approach to mental health, which takes into consideration the physical (environment), social, mental and spiritual dimensions of individuals. There is an emphasis given on the fourth dimension,
i.e. spiritual well-being, as it has been the major goal of indigenous techniques such as Yoga. The policeman’s work environment is highly prone to various kinds of stressors - physical, social and mental. A broader view of stress is that it is not just the traumatic stressful events that effect them, but also the many events of daily life that elevate activities of physiological system to cause some measures of wear and tear. This is known as the wear and tear “allostatic load”. However, individual habits such as diet, exercise, substance abuses, and developmental experiences also set life-long patterns of behaviour and physiological reactivity. Hormones associated with stress and allostatic load protect the body in the short run and promote adaptation, but in the long run, allostatic load causes changes in the body that lead to disease.

Moreover, it would be more appropriate to use the contemporary concept and allostatic load (Sterling & Eyer, 1988) in this case. These people undergo various kinds of wear and tear of the body in their highly stressful working conditions. In turn, mental health or well-being is defined on the basis of these three components - physical, social and mental. This dimension involves those interventions which positively contribute to the well-being of policemen. The various techniques used to alleviate stress and anger take only negative aspects of the mental health, i.e. smoking and/or moderate amount of drinking, heavy smoking and drinking, use of sedatives, tranquillizers, shopping and other ways of spending money, along with consuming more food, and complaining to others, etc. Meanwhile, the techniques explored in the present study are effective in coping with stress and anger, as well as in enhancing the positive aspects of their mental health.

METHOD

Design

A three factor mixed design 4x2x2x (AxBxCx), with repeated measure on the third factor trials (C), has been used in this study. In this design, factor A consisted of four different ranks of police personnel taken from the ranks of police of Constables (A1), Head Constables (A2), Assistant Sub Inspectors (A3) and Inspectors (A4). Factor B type of intervention consisted of two levels, namely, multidimensional intervention (B1) and only relaxation intervention (B2). The group receiving only relaxation intervention was regarded as control group. Factor C (trials of assessment) consisted of two levels (C1-pre intervention trials and C2-post intervention trials), which were taken immediately after the completion of each intervention.

Multidimensional Intervention

Multidimensional intervention was prepared for the purpose of the present study. It comprised of 3 sessions of one hour each with at least one day gap between each session for homework assignments. Since emotional states are often expressed in terms of bodily reactions, phase-I consisted of the stress management session including relaxation training plan; phase-II self management
and mood management techniques and phase-III was the rehearsal of all the phases before a formal termination of this particular multidimensional programme. The police personnel were also asked to apply the coping skill they had learned in an imaginary situation during meditation stage of relaxation training plan. The relaxation training programme, which formed the first phase of multidimensional strategy, was also given to the control group for one day in the same way as it was done in the 1st phase of multidimensional intervention, so that they would not feel left out.

Sample

Only volunteer police personnel were selected for the present study. A notice was circulated in the various police stations to inform them about the upcoming stress management workshop. Those interested in attending the workshop were requested to give their names to the researcher on the date mentioned in the notice. Out of these volunteers, 20 officers from each of the following ranks (constables, head constables, assistant sub-inspectors and inspectors) were selected and 10 police personnel from each of the four ranks were assigned randomly to each of the two treatment conditions.

Tools

**Police Stress Questionnaire:** The scale was developed by Ranta (2004) for the purpose of the present study. A pilot study was conducted to identify the type of stressful events that police personnel experience on their job. A sample of 280 police personnel from different categories were asked to list the most stressful events they had experienced at work. The questionnaire originally included 90 items, which was rated by 10 senior police officers. Finally, a 45 items questionnaire was developed to assess job related stressor for police personnel.

**Hindi Version of Anger Expression AX/EX Scale:** For the purpose of facilitating cross-cultural research and to build on the scale for measuring anger in, anger out and anger control, the three sub scales of the English Anger Expression scale were translated into Hindi by Krishna (1988), following the procedure outlined by Spielberger and Sharma (1976).

The AX-Scale comprises of 24 items. The range of possible AX/EX (i.e. total anger expression) scores varies from 0 to 72 and the range of possible score for three the sub-scale varies from the minimum of 8 to the maximum of 32. The alpha reliability of Hindi scale in respect to total AX, AX/in, AX/out, AX/Con is 0.89, 0.88, 0.62, 0.82 respectively for the females and 0.96, 0.92, 0.92 and 0.82 respectively for the males.

**Procedure**

Police personnel were called in a small group for the workshop. Before starting the workshop, they were asked to report their level of job stress and anger on the Police Stress Questionnaire and Hindi Version of Anger Expression Scale. Then, they were exposed to the Multidimensional intervention that included strategies for
dealing with stress and anger, along with group discussions and brief home assignments. Before the commencement of the next phase, the intervention of previous phase was rehearsed. After the completion of all phases, both the questionnaires were given out again. During each phase, effort was made to make sure that the police personnel were clear about the procedures to be able to apply the strategies on their own. The relaxation training programme was given to control group for one day, and the pre-post measures on dependent variables were taken, prior to and after the intervention.

RESULTS

The $t$-test performed on the pre-treatment scores of the two intervention groups on all the dependent variables revealed no significant between-group differences among the police personnel of different ranks prior to the treatment. For the purpose of the present study, the scores were analyzed by 4X2X2 ANOVA (four ranks of police X two type of intervention X two assessment trials) with repeated measure on one factor. All the post-hoc comparisons among means were made by Newman Keul’s Multiple Range Test (Bruning & Kintz, 1987).

Job Stress Scores

With regard to between the group difference, the main effect of treatment turned out to be significant (df=1/72, $F = 8.046$, $p<.001$). Post-hoc comparison reveals the efficacy of multidimensional intervention (mean=79.92) over relaxation intervention (mean=98.15) to be significant ($p<.01$) levels, which is independent of the ranks of police personnel.

Fig.1: Interaction of assessment trial X treatment in job stress
TABLE 1
Mean Stress Scores under Two Treatment and Two Assessment Trials

<table>
<thead>
<tr>
<th>Trials</th>
<th>Pre Treatment</th>
<th>Post Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multidimensional Intervention</td>
<td>97.27</td>
<td>95.02</td>
</tr>
<tr>
<td>Relaxation Intervention</td>
<td>79.92</td>
<td>98.15</td>
</tr>
</tbody>
</table>

With regard to within group changes the main effect of trials turned out to be significant (df=1/72, F=38.436, p<.001), and this was further qualified with a significant trial X treatment interaction (df=1/72, F=79.630, p<.001). Perusal of Table 1 and Fig.1 reveal that at the pre-treatment trial, multidimensional intervention (MI) group, as well as only relaxation intervention (RI) group do not differ significantly from each other. On the job stress, the scores of multidimensional intervention group were significantly lower (p<.01) than their only relaxation counterparts. On the contrary, non-significant increase in job stress scores is evident for relaxation intervention group.

Anger Scores

The scores of the three aspects of anger were separately analyzed. With regard to between group differences, neither of the main effect of rank and treatment, nor their interaction with each other turned out to be significant for anger control, anger out as well as anger in.

TABLE 2
Mean Anger-control Scores under Two Treatment Conditions and Two Assessment Trials

<table>
<thead>
<tr>
<th>Trials</th>
<th>Pre Treatment</th>
<th>Post Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multidimensional Intervention</td>
<td>24.97</td>
<td>25.80</td>
</tr>
<tr>
<td>Relaxation Intervention</td>
<td>29.27</td>
<td>26.35</td>
</tr>
</tbody>
</table>

As for within group change on anger-control, the main effect of trials turned out to be significant (df=1/72, F=36.98, p<.001). This was further qualified with a significant, trials X treatment (TR X T) interaction (df=1/72, F=22.107, P<.001). The perusal of Table 2 and Fig.2 reveals

Fig.2: Interaction of assessment trial X two treatment (TR X T) in anger-control scores
that the prior to the treatment anger-control scores of multidimensional intervention as well as only relaxation intervention group were not significantly different from each other. At post-treatment level, the mean anger-control scores of multidimensional intervention group are significantly higher ($p<.01$) than their counterparts under relaxation intervention.

For the within group changes for anger-out, only trials X treatment (TR X T) interaction turned out to be significant ($df=1/72, F=7.811, p<.001$).

TABLE 3
Mean Anger-out Scores under Treatment and Assessment Trials

<table>
<thead>
<tr>
<th>Trials</th>
<th>Pre Treatment</th>
<th>Post Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multidimensional Intervention</td>
<td>14.37</td>
<td>13.95</td>
</tr>
<tr>
<td>Relaxation Intervention</td>
<td>13.22</td>
<td>14.75</td>
</tr>
</tbody>
</table>

The perusal of Table 3 and Fig.3 revealed that while at pre treatment trial, the anger-out scores of police personnel under multidimensional intervention and relaxation intervention did not differ significantly from each other. At post-treatment trial, the anger-out scores of police personnel under multidimensional intervention are significantly lower than their counterparts under relaxation intervention.

Further, with regard to within group changes on anger-in, the significant main effect of trials (TR) ($df=1/72, F=4.186, p<.05$) revealed significant pre- (mean=14.83) to post (mean=13.82) trial reduction in anger-in scores, regardless of the types of intervention or ranks of police personnel.

DISCUSSION

For police personnel, the inability to effectively manage stress has its most dangerous consequences during the line of duty. Although the police force receives ample training in the theoretical knowledge and technical skills required to perform their jobs and take effective action in an
emergency situation, most receive little if any training in self-management skills needed to help them quickly regain psychological and physiological equilibrium after the intense challenges of their work. Similarly, they are generally not provided with the tools to help them manage the emotions they may process internally long after involvement in a traumatic incident. The unusually stringent demand for self-control, compounded by the unavailability of effective strategies for inner self-management, has become an added stressor in its own right for police personnel (Abernathy, 1995; Ganster et al., 1996). In order to help officers remain more balanced during and after the acute stresses of their jobs, and enhance their ability to manage and seek real solutions to the chronic stress related to organizational and family issues, a multidimensional intervention was prepared and used in the present study. The efficacy of the multidimensional intervention as a coping strategy for the management of job related stress is clearly evident for police personnel of all ranks in the present study. In the present study, a significant enhancement in the anger-control scores of police personnel from pre- to post-trials clearly highlights the efficacy of multidimensional intervention in this regard. This shows that they have been able to use this intervention effectively. This happened because the need was there. While at pre-treatment levels, their scores were already towards the higher side of the range of scores, the significant enhancement in the scores even after the intervention seemed to support the contention that perhaps their occupational culture discouraged the officers from admitting to the feeling of stress and openly expressing their negative emotions. Pate and Spielberger (1979) pointed out that officers are prohibited by the decorum of their job from publicly expressing anger and hostility.

Anger directed outward, expressed in physical acts such as assaulting other individuals, or in the form of criticism, insult, verbal threats or the extreme use of profanity are not uncommon among police personnel. Anger out generally involves both the experience of state of anger and manifestation of aggressive behaviour. Pre-to post-treatment reduction in the anger-out scores of police personnel also highlight the efficacy of multidimensional intervention for the present sample. However, the lack of support evidenced in this regard highlights the need for much further research.

In research on anger expression, Averill (1982), Funkenstein, King and Drolette (1954), and Tavris (1982) state that individuals are typically classified as “anger-in” if they tend to suppress their anger or direct it inward toward the ego or self. This process results in the feelings of guilt and depression (Alexander & French, 1948). However, significant pre- to post-treatment reduction of anger-in score of the present sample is independent of the type of intervention. Thus, it appears that just anything to relax them can effectively reduce anger-in scores.

Many of us are taught not to express or show our anger (Pate & Spielberger, 1979). Mearn and Mauch (1998) observed
that officers are prohibited from expressing anger-in and hostility. Unexpressed anger often leaves us feeling frustrated and unable to express how we feel inside. The danger in this type of response is that if a person is not allowed outward expression, the feeling of anger can turn inward on the person. Anger turned inward may cause hypertension, high blood pressure, and depression or attempts toward suicide and alcoholism. These symptoms are highly apparent among police officers (Curran, Finlay, & McGarry, 1988; Davidson, 1979; Hurrel, 1977; Labovitz & Hagedorn, 1971; Lester, 1983; Richard and Fells, 1975; Schwartz and Schwartz, 1975).

However, since none of the earliest studies using stress management programmes with police personnel has included anger as a variable of concern, the present finding stands on its own merit and points out that future research in the area is needed.

Hence, as expected, relaxation intervention did not turn out to be effective in the reduction of job stress for any of the police personnel under any rank. In the present study, the relaxation technique was given only for about an hour and no further follow-up was given on this intervention. In many similar studies when relaxation technique was used singly or for a short period of time, it failed to show its efficacy (Sud & Prabha, 1996; Ranta, 2004). Thus, while selecting this intervention, no results were expected. The intervention was given to the group of police officers who were used as the control group so that they would not feel left out in the workshop. The lack of efficacy of the relaxation training procedure supports the proposal by Goldfried and Trier (1974), in which learning and transfer of relaxation as general coping skills perhaps take greater time (see also Synder & Deffenbacher, 1976; Sud & Prabha, 1995, 1997). Thus, with regard to relaxation intervention, the result of the present study was rather not unexpected.

CONCLUSION
The stress management programmes have been implemented successfully by police organizations in the west (Axelberd & Velle, 1978; Swanson & Territo, 1983; Wagner, 1981). In India, Pandya (1982) has been conducting workshops for the special branch of the Mumbai police for the last eight years (Hindustan Times, 26 November 1996). Nonetheless, these singular efforts need to be replicated all over India. The findings of the present study are encouraging indications to pursue this line of research. Keeping in view the Indian ethos, psychologists need to explore the scope of indigenous techniques to (a) alleviate the wear and tear of body and mind, (b) enhance the well-being of individuals. Both these aspects are important, whether we take management view, or the remedial measures. The multidimensional intervention developed by the present investigator, though arbitrarily chosen, significantly reduced the job related stress among the police force subjects. In addition, these techniques also enhanced the general coping behaviour of the police force subjects. Thus, these two significant findings need further replication studies to
verify and standardize them. There is need to choose these groups of interventions, following some theoretical basis for two reasons; first, how they are associated with each other, and second, how they contribute in affecting change in the subjects.

REFERENCES


Hindustan Times, 26 November, 1996.


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