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Stress Symptoms and Substance Use Among Police Officials in the Central Region of Limpopo Province, South Africa

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ABSTRACT The aim of the study was to investigate police work as a source of stress; the symptoms of stress; the mechanisms used by police officials to cope with high levels of stress and the effects of this stress in their personal and interpersonal spheres, with the aim of outlining any issue/s that may come to the fore that needs to be addressed in proactive programs by the South African Police Service. Simple random sampling was used to select participants for this study. Two hundred and forty eight (86.7%) were male and thirty eight (13.3%) were females. They came from the 19 police stations and 4 satellite police stations in the Central Region in Limpopo Province. Their ages ranged from 19 years to 59 years. A questionnaire was used to determine their demographic variables, symptoms of stress, sources of stress, their coping strategies and the extent to which they engaged in substance use/abuse. A t-test analysis showed that policemen have higher levels of stress than policewomen. A Linear Regression Analysis showed that the number of years of service contributes significantly to the level of stress ($13 = 0.44$, $t = 2.33$, $p < 0.05$). Frequency tables reflected that the greatest source of stress for police members came from the work sphere.16.1% of police officials worried a lot often or very often. 18.1% experienced headaches often or very often. Within the personal sphere, 13.9% suffered from depression and 13.5% were burdened with unresolved issues of the past. Within the interpersonal sphere, 12.2% felt that others used them as a doormat. 37.4% admitted to smoking. 11.4% used either dagga (marijuana), glue or cocaine and 54.8% admitted to drinking alcohol. To cope with stress, 27.9% maintained a sense of humour often or very often. There is a need for proactive programs in the Police Service as a sizeable number of police members are stressed and coping ineffectively.

INTRODUCTION

A Problem Statement

Research indicates that people within certain occupations, such as accountants, air traffic controllers, lawyers, physicians, psychiatrists, dentists and police officials experience a higher than average amount of stress (Calvert et al., 1999; Schaefer, 1983; Sewell, 1981). According to Finn (1997), police work is widely considered to be among the most stressful occupations. It is associated with high rates of divorce, alcoholism, suicide and other emotional and health problems. Colwell (1998) confirms this notion indicating that police work tends to impose a higher degree of stress and a multiplicity of stressful situations on the individual than do most other professions. He further claims that studies have shown that those in law enforcement experience a higher rate of suicide than the national norm in America. According to Schaefer (1983) law enforcement has traditionally been referred to as an occupation that leads to a variety of stress related maladies such as hypertension, cardiovascular irregularities, and gastrointestinal disorders. A literature study has revealed that people from all walks of life experience stress and must find ways to cope with some degree of stress. According to Standfest (1996), limited amounts of stress can have positive results. For example, the tension of competition drives participants to excel and often enhances their performance. However, other stressors inhibit performance and can cause health problems. Chronic stress if left unchecked, can tear at the very fabric of law enforcement. It can become a progressive disease which will slowly undermine the efficiency and potential of a police force Klein, 1989)

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Literature Review

Various articles and letters written to the editor of a South African Police magazine entitled "Servamus" were reviewed. These letters and articles furnish pointers to some of the sources of stress; the symptoms of stress; implications of stress for the South African Police Service as an organization; and its impact on the individual police official, his/her family, colleagues and social circle. These letters have been written by SA Police members themselves working in various parts of the country and sometimes by their spouses describing the problems partners and members experience and the ways in which their lives are being challenged. The information gathered from Servamus magazine, reflecting the sources of stress has been categorized as follows:

- stress arising as a result of political changes in the country and the SAPS, post 1994, that have to be accepted by police officials.
- stress, depression and guilt due to the traumatic nature of the work that they do and the fact that it sometimes involves killing or maiming a suspect
- the manner in which absenteeism is sometimes handled by managers in the service
- frustration with the system as a result of low salaries
- dissatisfaction with management

Police officials are generally never paid nearly what they should be (Geldenhuys, 2003). Levinson (1981) asserts that mental health workers and policemen who work under severe pressure in people-orientated jobs for long periods of time with little support and limited gains are among the prime victims of burnout.

According to Roosendaal (2002), financial problems are one of the main contributing factors towards suicide among police in South Africa. The price of fuel and food has skyrocketed and police salaries are just not keeping up. Sewell (1981) confirms that police officials receive poor salaries. Salary increases, have not been sufficient because there are other increases as well such as medical aids, pension contributions and taxes. " Benefits such as subsidized vehicles and cell phones are not allotted to officials with lower ranks or middle management and it seems as if these people live from hand to mouth. The perception exists that Top Management and officials in the higher echelons feather their own nests, while officials at grassroots and middle management have to contend with pressure from all sides (Roosendaal, 2002).

Van Zyl (2003) asserts that as a result of a low salary, many employees in government departments are moonlighting in order to generate an additional income. This is a very real cause of absenteeism.

According to Van Zyl (2003), once employees have been disadvantaged via restructuring, a promotional process or any other such occurrence, and the injustice is not rectified at a later stage, they may develop a permanent feeling of being the victim of the processes and procedures within the organization. Finn (1997) said that the most common sources of police officer stress involve the policies and procedures of law enforcement agencies themselves. Van Zyl (2003) asserts that we cannot make victims of people and then expect them to be loyal, trustworthy workers. They are the very people who must carry the organization to the higher ground of operational and financial success.

Denying officials the opportunity for growth and development also result in absenteeism. Van Zyl (2003) asserts that Affirmative Action is a case in point where it has caused blocked ambition and a divided country. Restructuring and right-sizing also causes absenteeism where the goals and objectives of management are met 100% but not those of the workforce. The problem is not usually discerned significant until a police official mentally collapses or department morale plummets (Bratz, 1986).

According to Hart and Waring (1995), organizational experiences rather than operational experiences are more important in determining psychological well being. Sewell (1981) asserts that although law enforcement may not be the most physically dangerous profession in the world, it is by far the most emotionally dangerous occupation due to poor administration and supervision and inadequate salary, amongst others. Band and Manuelle (1987) as cited in Hart and Waring (1995) assert that a growing body of evidence suggests that the main source of psychological distress among the police is police organizations.

According to Van Zyl (2003), 90% of blame for unacceptable levels of absenteeism can be attributed to management. He asserts that absenteeism results in loss of productivity, lower

morale as a result of higher work loads, hiring of temporary staff, possible payment of over-time and additional administrative costs. When members are absent, steps taken by some managers in the past served to increase the stress of the official. They forced employees to produce a medical certificate for each and every period of absence. Employees were instructed to physically report fit for duty at their places of work, even on their official days of rest. Management checked up on employees at their places of residence to ensure that they were indeed sick and at home. They cancelled official days of rest and refused members permission to leave their places of residence during sick leave.

Reasons cited for absenteeism, according to Van Zyl (2003) are personal reasons, job-related reasons and company-related reasons. Hence, invariably if people are dissatisfied with any aspect of work, it could result in absenteeism. Tang and Hammontree (1992), claim that high levels of police stress and life stress are significantly related to illness and absenteeism and police work is stressful. In a study conducted by Calvert et al (1999) the association between occupation and ischemic heart disease among 16 – 60 year old males were examined. Among blue collar workers, the highest proportionate mortality ration (PMR) for ischemic heart disease mortality were found in sheriffs, correctional institution officers, policemen, fire-fighters and machine operators. It probably won't be the bullet that will strike down an officer but the effect of chronic stress (Klein, 1989).

Finn (1997) asserts that law enforcement is associated with high rates of divorce, alcoholism, suicide and other emotional problems. He further states that high levels of stress affect both the official and the organization. The cumulative affects of stress can lead to:

- impaired performance and reduced productivity
- reduced morale
- public relations problems
- labour management friction
- civil suits stemming from stress-related shortcomings in personnel performance
- tardiness and absenteeism
- decreased turnover due to leaves of absence and early retirements because of stress-related problems and disabilities.
- added expenses of training and hiring new recruits, as well as paying overtime, when one is left short-staffed.

Geldenhuys (2003) asserts that police work is not a job but a calling. A police official faces physical dangers on a daily basis and stress for which he or she is not trained to deal with. Also, Geldenhuys (2003) mentions high divorce rates, high rates of physical illness, high rates of suicide and the many police officials turning to alcohol to try to get rid of memories and problems. He also assets that the police official has to face scrutiny from the community and his/her own peers on a daily basis. According to Bratz (1986), stress could be attributed to the conflicting nature of a police official's work. He is saviour, helper and at times referee and then as an enforcer, he becomes the root of many problems when he makes an arrest or uses deadly force. He/she also has to carry the load for others and won't have much time or energy to save for his/her own family problems.

Geldenhuys (2003) assets that Hollywood glamorizes police work, making the police official to be seen as a hero - a tough character with no fear and who can experience trauma and violence without suffering any ill effects. No mention is made in the movies of the sleepless nights and the haunting revelations the police official has to deal with. According to Corelli (1994), police officials have this superman mentality, this macho image they feel they have to protect, which is part of the culture itself.

"…Police work is an emotionally and physically dangerous job" (Geldenhuys, 2003). The reasons for this are the ever-present danger of physical violence, potential sudden death and exposure to HIV/AIDS. They also have to make critical life and death decisions within seconds, have to face the danger rather than escape, are the peacemaker and arbitrator. They have to face the effects of murder, violence, accidents and disasters by viewing and handling dead, mangled bodied. He/she witnesses children dying, people being beaten almost to death, burglaries, thefts and domestic violence. This could mould and manipulate an official into apathy and detachment (Bratz, 1986). According to Colwell (1988) the official is then expected to accomplish a mood swing to loving husband or wife, understanding parent, school supporter and community volunteer.

According to Roosendaal (2002), two police officials pleaded in the High court in Pretoria to be allowed to retire from the SAPS on medical grounds. Both had been diagnosed by psychia-

trists as suffering from Post Traumatic Stress Disorder. Some of the working conditions that they claimed contributed to their medical condition were " bodily remains strewn across the road after a minibus accident and the burst open, decomposed corpse of a woman who had been stabbed with a hunting knife.

Police stress has serious ramifications for the organization, the family and peers.

Geldenhuys (2003) claims that police do not receive the praise, glory and appreciation that they deserve. Roosendaal (2002) concurs, saying that a police official has one of the most thankless jobs. To some SAPS officials, respect and appreciation for their work is just a dream.

According to Roberts and Levison (2001), findings suggest that officers took their job stress home and it influenced their interactions with their wives. These influences of job stress were found regardless of couples' marital satisfaction, the husband's work shift and the couple's parenthood status. They further claim that job stress is far more toxic for marital interaction than is physical exhaustion. A husband's job stress produces a physiological and affective climate in which both spouses show many of the signs associated with future marital dissolution and distress like heightened cardiovascular arousal, increased negative affect, decreased positive affect and more emotional distance and disconnectedness. Even with those who attempt to leave their stress at work or keep their lingering stress to themselves, stress is likely to have a pernicious effect on the emotional balance of marital interactions.

According to Geldenhuys (2003) most police officials who have to kill a suspect in the line of duty experience a great deal of conflicting emotions like guilt even if they were completely justified in using violence. They experience a great deal of mental trauma and depression due to the fact that they have actually taken the life of another human being. Although the person shot was a criminal, somewhere out there is a family who has lost a loved one. There is nothing glamorous about killing another human being. This can have devastating consequences that erode the emotional well being of any person, even that of a seasoned police official.

According to Geldenhuys (2003), police officials are trained to hide their emotions, right from day one at the Police Training College. They see emotions as getting in the way of the job they are performing. Emotions are suppressed daily for years. The stress takes it toll either quickly or slowly and police officials experience Post-Traumatic Stress Disorders (PTSD). Every time a police official is called to a crime scene, the adrenalin pumps. Police are aware that their lives are in danger. Also, they work an average of 10 hours a day during which time they attend to cases like housebreaking, domestic violence, armed robbery, rape, hit and run, murder or suicide. After the night shift, the chances are good that they must be in court the next day to testify about a case that took place weeks, months or even years ago. Should there be any time left to rest, they try to rest for a while before the sun sets and they have to report on duty for the night shift again. According to Dudek and Makowska (2001), police also feel that they have little personal control at their workplaces. This is also a factor that leads to stress.

- MaClean (cited in Corelli, 1994) asserts that alcohol abuse among policemen is more than the norm. It is probably double that of a large corporation in Canada. The reasons he cites for alcohol abuse are:
- being ostracized by the rest of society because of the type of work that they do
- their superman mentality
- the macho image that they feel they have to protect and to handle the pressures of the job, they engage in their favourite pastime which is drinking.

According to Corelli (1994), to handle the pressures of the job, the guys join together and the favourite pastime is drinking. It is the odd policemen who doesn't drink. According to Corelli (1994) police officers take alcohol to forget the things they've seen. Policemen do drink on duty and it's actually easier for plainclothes policemen to drink on duty than uniformed policemen. However, the policeman who develops a drinking problem is rejected by his colleagues for his weakness and likes in fear of his commander. Sometimes if a police official has nowhere to turn to, he will commit suicide. According to Violanti (1999) alcohol abuse among police officers in the US is about double that of the general population where 1 in 10 adults abuses alcohol, as stated by Maclean (1994). Excessive use can impair an individual's ability to function properly at home and at work. This can prove particularly dangerous for officials. According to Skender

(1997), owing to the health and safety hazards posed by drug abuse in both the workplace and the wider community, drug-abuse testing programmes were implemented for police officials in Croatia. According to MaClean (cited in Corelli, 1997), binge drinking is a release from the high experienced by working 10 – 12 hour shifts, and witnessing trauma.

Based on the literature review, it is expected that the results of the survey will confirm that police officials are indeed stressed and are coping ineffectively; that there is a positive correlation between stress and work; stress and alcohol/ substance/cigarette use or abuse and stress and personal and interpersonal relationships.

Purpose of the study

To investigate police work as a source of stress; the symptoms of stress; the mechanisms used by police officials to cope with high levels of stress and the carry over of this stress into the personal and interpersonal spheres. The aim of this survey is to decide whether proactive programs are indeed necessary, and if so, to outline the issues that need to be addressed by the SAPS.

BACKGROUND INFORMATION ABOUT THE AREA OF STUDY

The Limpopo Province of South Africa (formerly known as the Northern Province) has a population of 5.4 million inhabitants. Among them 97.1% are blacks, 0.1% are Coloureds, 0.1% are Indians/ Asians and 2.7% are whites. 45.7% are males and 54.3% are females. Many of the inhabitants live under poor economic and medical conditions (Health Systems Trust and Department of Health, 1997; Statistics South Africa, 2000). The Province is also predominantly rural, unlike many other areas/provinces, where similar studies have been conducted in South Africa. The SAPS has divided the Province into 4 regions. They are the Far North, Bushveld, Central and the Lowveld Regions. The region that this study was conducted in was the Central Region.

In this area there are 19 police stations and 4 satellite police stations. No previous study of the nature of this one had been conducted in the Central Area. This study will therefore be a first in this geographical location and will contribute to the wider existing knowledge of police stress.

METHODS

Participants: There were 286 participants in this study. Two hundred and forty eight (86.7%) were males and 38 (13.3%) were females. Two hundred and sixty eight (93.7%) were black; 15 (5.2%) were white; 1 (0.3%) was Indian/Asian and 2 (0.7%) were coloured. One hundred and sixty three (57%) were between the ages of 33 and 43. In total, their ages ranged from 19 years to 59 years. Participants' levels of school education ranged from less than Grade 10 to Grade 12. Thirty five (12.2%) had less than Grade 10; 54 (18.9%) had Grade 10 and 11 and 195 (68.2%) had Grade 12. Two hundred and twenty five (78.7%) were Christians. Participants came from various ethnic backgrounds. Two hundred and twenty nine (80.1%) were Northern Sotho-speaking; 18 (6.3%) were Southern Sotho-speaking; 10 (3.5%) were Tsonga-speaking; 4 (1.4%) were Venda-speaking; 1 (0.3%) was Zulu/Xhosa-speaking and 21 (7.3%) came from other ethnic backgrounds. Fifty four (18.9%) lived in urban areas; 77 (26.9%) lived in townships/semi-urban areas and 152 (53.1%) lived in rural areas/villages. Most of the members i.e. 125 (43.7%) worked in police stations in rural/ village settings; 89 (31.1%) in semi-urban/ township settings and 69 (24.1%) in urban/city settings. They worked in different Units in the Service. One hundred and three (36.3%) worked at the Community Service Centre; 73 (25.7%) were detectives; 61 (21.5%) were involved in crime prevention; 16 (5.6%) were from Support Services; 10 (3.5%) were from CIAC; 8 (2.8%) were from HRM; 7 (2.5%) were Court Orderlies; 5 (1.8%) were station commissioners. Their ranks in the Service varied but 192 (67.1%) were inspectors; followed by 39 (13.6%) being sergeants; 28 (9.8%) being captains; 22 (7.7%) being constables and 5 (1.7%) being superintendents. Two hundred and fourteen (79.6%) had between 2 and 5 dependents to support. The number of years that the police officials had worked in the Service ranged from 1 to 32. Most members, i.e. 181 (63.1%) had between 9 and 18 years of experience.

Sampling: Simple random sampling was used to get the sample. All 19 police stations and 4 satellite stations were included in the study. 20% of official were selected from each unit at each station. We tried as far as possible for the sample from each unit to include officials from the different ranks i.e., constables, sergeants, inspectors, captains and superintendents. However, not all

units had constables, captains and superintendents. The most common ranks interviewed by far were those of sergeant and inspectors. Where possible we included females, bearing in mind that there were fewer females than males at these police stations. A total of 286 questionnaires were distributed.

Instrument: A questionnaire was put together by the researchers that comprised 5 sections. Section A covered demographic details of the participants. There were 13 items including age, gender, highest school grade passed; religion; race; ethnicity; place of residence (urban, semi urban or rural); whether parents were married/ never married / divorced / separated/ deceased; the number of dependents; name of the police station, rank in the police, component in the police and the number of years they had completed in the service.

Section B was an instrument that measured the symptoms of stress Symptoms of Stress Questionnaire (Smith & Venter, 1996). The main areas covered were mental symptoms, physical symptoms and other symptoms including increased smoking, alcohol intake and medication. The participants had to decide to what degree they considered the nature and extend of their symptoms of stress on a 5 very often. There were 12 mental symptoms items, 13 physical symptoms and 3 other symptoms concerning smoking, alcohol and medication. The Cronbach's alpha for this section of the questionnaire in this study is 0.93.

In Section C was the sources of stress were determined the Sources of Stress Questionnaire (Smith & Venter, 1996). The sources of stress covered were the personal sphere (12 items); interpersonal sphere (5 items); work sphere (10 items) and recreational sphere (9 items). The participants had to decide to what degree they considered themselves stressed on a 5 – point Lickert scale. The Cronbach's alpha for this section of the questionnaire in this study is 0.92.

Section D assessed coping. The Coping Strategies Questionnaire (Miller, 1988) was used. Participants had to decide to what extent they considered themselves to be coping with stressful events on a 5 – point Lickert scale. The items included maintaining a sense of humour, meditating, getting a message, exercising regularly, eating more sensibly, and limiting their intake. The Cronbach's alpha for this section of the questionnaire in this study is 0.90.

In section E, the extent to which police officials engaged in alcohol, drugs and cigarette smoking was assessed using a questionnaire developed by Madu and Matla (2003). They had to indicate the number of cigarettes they smoked in a day; how often they smoked; drank alcohol and took drugs in the past 3 months. In addition, they had to indicate how old they were when they first stated smoking, drinking alcohol and taking drugs; which drugs and which alcoholic drinks they took and whether they were ever drunk after drinking alcohol or had become increasingly irritable. This measure included " yes" and "no" categories and multiple choice answers.

Procedure: A motivation to conduct this study was presented to the Heads of Psychological Service and Helping Professions, the Director of Helping Professions, the Assistant Commissioner of Human Resources Management and the Provincial Commissioner. They also approved of this study being conducted. A letter was drawn up and sent to the station commissioners of the 19 police stations and 4 satellite stations indicating that this study was going to be conducted, its nature and purpose and the fact that it had been approved by the Provincial Commissioner. Also mentioned were the dates and times when I would arrive at the station, an estimate of how long it will take the police official to complete the questionnaire and the fact that I required 20% of officials from each unit to be present and that the sample should include males, females and officials representing the different ranks. There were invited to contact me should they experience any difficulty arranging the sample and a venue at their police stations.

Before the final version of the questionnaire was adopted, an informal pilot study was conducted amongst some members in the Central Area Offices. The aim was to establish whether the questionnaire was easily understandable.

The questionnaires were taken to the relevant police stations and satellite stations by the Area psychologist (researcher) and the Area psychometrist on the appointed day. We arrived a few minutes early, so that the station commissioners could get together the participants and send them to us. The participants sat around a table or individually at desks in a room at the police stations. Before administration, the members were informed of the purpose of the research and were allowed to ask questions. Confidentiality and anonymity were explained by the psychologist.

Those who were not comfortable participating were excused and replaced by willing participants. The psychometrist started administration by explaining the instructions for completion. The first part of the questionnaire, which was about the participants demographic characteristics, was done in the group item by item with the psychometrist reading aloud all questions.

From the second part of the questionnaire onward, participants were encouraged to work individually, quietly, honestly, and as quickly as they could. Participants were encouraged to direct questions, if any, to the psychologist or psychometrist if they encountered any problems.

Questionnaires were collected as soon as the participants had completed filling them in. It took the police officials an average 20 minutes to complete the questionnaires. In view of the fact that the questionnaire sometimes aroused questions and a interest about the topic of study, participants were given time to talk about their experiences. They were further referred to the researcher or a private psychologist for therapy, if necessary. The collecting of data began in November 2002 and was completed in January 2003.

Statistical Analysis: The Statistical Package for Social Sciences (SPSS) was used in analysing data with the use of frequencies and the T-Test.

RESULTS

Frequency and Valid Percentages

11.2% are often or very often anxious. 16.1% worry a lot often or very often. 11.9% are often or very often irritable. 9.7% are often or very often easily frustrated. 11.1% have aggressive outbursts often or very often. 6.8% have poor concentration often or very often. 10.4% experience forgetfulness often or very often. 14.4% are depressed often or very often. 12.3% are often or very often poorly motivated. 13.6% often or very often want to be alone always. 6.5% have poor self esteem often or very often. 7.2% feel out of control often or very often.

18.1% experienced headaches often or very often. 6.8% experienced spastic colon often or very often. 5.3% had indigestion often or very often. 8.9% suffered from ulcers often or very often. 6.4% experienced hypertension often or very often. 3.9% had palpitations often or very often. 4.4% experienced hyperventilation often or very often. 2.1% had asthma often or very often. 5.3% had stiff, sore muscles often or very often. 12.8% had trouble sleeping often or very often. 10.4% experienced a change in appetite often or very often. 10.4% experienced a change in sexual drive often or very often. 5% had decreased immunity.

11.1% experienced an increase in smoking often or very often. 11% experienced an increase in alcohol intake often or very often and 7.5% increased their medication intake often or very often.

A t-test analysis shows that policemen have higher levels of work-related stress (mean = 23.61, SD = 8,93) than policewomen (mean = 18,79, SD = 6,56) ($t = 3{,}192$, $df = 277$, $p < 0{,}05$). A Linear Regression Analysis (Method = Stepwise) also shows that number of years of service contributes significantly to the level of stress ($13 = 0{,}441$ $t = 2{,}33$, $p < 0{,}05$). However, it contributes only 2% of the variability in stress level (A ….. = 0,02). Other demographic variables like age, level of education, gender, religion, race, ethnicity, place of residence, number of dependents, place of work and rank

Table 1: Mental symptoms of stress

Item	*Not At All*		*Slightly*		*Moderately*		*Often*		*Very Often*	
	N	*%*	*N*	*%*	*N*	*%*	*N*	*%*	*N*	*%*
Anxious	112	(40.1%)	88	(31.5%)	48	(17.2%)	18	(6.5%)	13	(4.7%)
Worry A Lot	90	(32.1%)	95	(33.9%)	50	(17.9%)	24	(8.6%)	21	(7.5%)
Irritability	113	(40.6%)	86	(30.9%)	46	(16.5%)	28	(10.1%)	5	(1.8%)
Easily Frustrated	152	(54.5%)	65	(23.3%)	35	(12.2%)	21	(7.5%)	6	(2.2%)
Aggressive Outbursts	144	(51.6%)	65	(23.3%)	39	(14%)	21	(7.5%)	10	(3.6%)
Poor Concentration	152	(54.3%)	72	(25.7%)	37	(13.2%)	11	(3.9%)	8	(2.9%)
Forgetfulness	122	(43.7%)	102	(36.6%)	26	(9.3%)	15	(5.4%)	14	(5%)
Depression	133	(47.7%)	67	(24%)	39	(14%)	25	(9%)	15	(5.4%)
Poor Motivation	138	(49.6%)	70	(25.2%)	36	(12.9%)	18	(6.5%)	16	(5.8%)
Want to be Alone Always	164	(58.8%)	55	(19.7%)	22	(7.9%)	22	(7.9%)	16	(5.7%)
Poor Self-esteem	179	(64.2%)	60	(21.5%)	22	(7.9%)	8	(2.9%)	10	(3.6%)
Feel out-of-control	186	(66.7%)	49	(17.6%)	24	(8.6%)	10	(3.6%)	10	(3.6%)

Table 2: Physical symptoms of stress

Item	*Not At All*		*Slightly*		*Moderately*		*Often*		*Very Often*	
	N	*%*	*N*	*%*	*N*	*%*	*N*	*%*	*N*	*%*
Headaches	115	(40.9%)	88	(31.3%)	27	(9.6%)	36	(12.8%)	15	(5.3%)
Spastic Colon	181	(64.6%)	57	(20.4%)	23	(8.2%)	15	(5.4%)	4	(1.4%)
Indigestion	170	(60.7%)	71	(25.4%)	23	(8.2%)	11	(3.9%)	4	(1.4%)
Ulcers	189	(67.5%)	41	(14.6%)	25	(8.9%)	16	(5.7%)	9	(3.2%)
High Blood Pressure	208	(73.3%)	38	(13.5%)	18	(6.4%)	12	(4.3%)	6	(2.1%)
Palpitation	210	(75.0%)	39	(13.9%)	20	(7.1%)	7	(2.5%)	4	(1.4%)
Hyperventi-lation	225	(80.6%)	36	(12.9%)	6	(2.2%)	6	(2.2%)	6	(2.2%)
Asthma	254	(90.7%)	13	(4.6%)	7	(2.5%)	4	(1.4%)	2	(0.7%)
Stiff, sore muscles	201	(71.8%)	48	(17.1%)	16	(5.7%)	13	(4.6%)	1	(0.7%)
Trouble Sleeping	158	(56.4%)	64	(22.9%)	22	(7.9%)	25	(8.9%)	11	(3.9%)
Change in Appetite	138	(49.3%)	70	(25.0%)	43	(15.4%)	22	(7.9%)	7	(2.5%)
Change in Sexual Drive	155	(55.4%)	68	(24.3%)	27	(9.6%)	21	(7.5%)	8	(2.9%)
Decreased Immunity	193	(68.9%)	55	(19.6%)	18	(6.4%)	11	(3.9%)	3	(1.1%)

Table 3: Other symptoms of stress

Item	*Not At All*		*Slightly*		*Moderately*		*Often*		*Very Often*	
	N	*%*	*N*	*%*	*N*	*%*	*N*	*%*	*N*	*%*
Increased smoking	198	(70.7%)	29	(10.4%)	22	(7.9%)	15	(5.4%)	16	(5.7%)
Increased alcohol intake	178	(63.3%)	46	(16.4%)	25	(8.9%)	14	(5.0%)	17	(6.0%)
Increased intake of medication	182	(64.5%)	53	(18.8%)	26	(9.2%)	9	(3.2%)	12	(4.3%)

did not contribute significantly to the total scores on stress.

Sources of Stress

11.1% struggle to make decisions often or very often. 11% worry about their health often or very often. 6.4% suffer from low self-esteem often or very often. 13.5% are burdened with unresolved issues of the past often or very often. 13.9% suffer from depression often or very often. 11.8% are unmotivated to take up challenges often or very often. 10% have to adapt to a new lifestyle often or very often.

5.8% have difficulty in communicating often or very often. 8.2% experienced lost interest in others often or very often. 10% had difficulty in controlling their anger often or very often. 9.7% indicated that they were perfectionists in their expectations of others often or very often. 12.2% felt that others used them as a doormat often or very often.

21.3% felt overloaded with work often or very often. 14.2% struggled to meet deadlines often or very often. 31.1% indicated that they carried many responsibilities often or very often. 16.6% struggled to get along with superiors, subordinates and peers often and very often. 20.2%

Table 4: Personal sphere

Item	*Not At All*		*Slightly*		*Moderately*		*Often*		*Very Often*	
	N	*%*	*N*	*%*	*N*	*%*	*N*	*%*	*N*	*%*
Struggle to make decisions	144	(51.2%)	79	(28.1%)	27	(9.6%)	19	(6.8%)	12	(4.3%)
Worried about my health	149	(52.8%)	72	(25.5%)	30	(10.6%)	20	(7.1%)	11	(3.9%)
Suffer from low self-esteem	186	(66.4%)	44	(15.7%)	32	(11.4%)	13	(4.6%)	5	(1.8%)
Burdened with unresolved issues of the past	149	(53.0%)	65	(23.1%)	29	(10.3%)	20	(7.1%)	18	(6.4%)
Suffer from depression	180	(64.1%)	47	(16.7%)	14	(5.0%)	25	(8.9%)	14	(5.0%)
Unmotivated to take up challenges	163	(58.2%)	59	(21.1%)	25	(8.9%)	15	(5.4%)	18	(6.4%)
Have to adapt to a new lifestyle	185	(66.1%)	48	(17.1%)	18	(6.4%)	17	(6.1%)	11	(3.9%)

indicated that they had to tolerate a lot of frustration often or very often. 29.6% worked long hours often or very often. 14.3% had no control over their work schedule often or very often. 32.9% were dissatisfied with their salaries often or very often. 13.8% felt that their work was boring and not challenging often or very often. 31.7% indicated that they were perfectionists in the execution of their tasks often or very often.

9% spent a lot of time under the influence of drugs and alcohol often or very often. 12.2% did not have any free time often or very often. 11.1% were too tired to use their free time constructively often or very often. 10.7% had free time but had no activities or interests to fill it with often or very often.

27.9% maintained a sense of humour often or very often. 24.6% meditated often or very often. 18.7% got a massage often or very often. 19.9% exercised regularly often or very often. 21.6% ate more sensibly often or very often. 18.1% limited their intake of alcohol often or very often. 22.3% took refuge in family and friends often or very often. 23% delegated responsibilities often or very often. 11.4% thought of quitting often or very often.

Substance Use

Cigarette Smoking: 107 (37.4%) admitted to smoking. They smoked anything from 1 to 49 cigarettes, with most smoking 5 to 20 cigarettes a day. Seventy five (70.8%) said that they smoked very often i.e. once or more a day. Most began smoking at the age of 18.

Drugs: Thirty two (11.4%) of members used either dagga, glue or cocaine. Twenty eight (90.3%) used dagga (marijuana) and 3 (9.7%) used

Table 5: Interpersonal sphere

Item	*Not At All*		*Slightly*		*Moderately*		*Often*		*Very Often*	
	N	*%*	*N*	*%*	*N*	*%*	*N*	*%*	*N*	*%*
Difficulty in communicating	175	(62.7%)	66	(23.7%)	21	(7.5%)	10	(3.6%)	6	(2.2%)
Lost interest in others	187	(66.8%)	51	(18.2%)	19	(6.8%)	12	(4.3%)	11	(3.9%)
Difficulty in controlling my anger	172	(61.4%)	57	(20.4%)	23	(8.2%)	16	(5.7%)	12	4.3%)
Am a perfectionist in my expectations of others	154	(55.2%)	69	(23.7%)	29	(10.4%)	13	(4.7%)	14	(5.0%)
See that others use me as a doormat	172	(61.6%)	60	(21.5%)	13	(4.7%)	14	(5.0%)	20	(7.2%)

Table 6: Work sphere

Item	*Not At All*		*Slightly*		*Moderately*		*Often*		*Very Often*	
	N	*%*	*N*	*%*	*N*	*%*	*N*	*%*	*N*	*%*
Feel overloaded with work	102	(36.2%)	90	(31.9%)	30	(10.6%)	25	(8.9%)	35	(12.4%)
Struggle to meet deadlines	138	(48.9%)	70	(24.8%)	34	(12.1%)	26	(9.2%)	14	(5.0%)
Carry a lot of responsibilities	69	(24.4%)	63	(22.3%)	63	22.3%)	39	(13.8%)	49	(17.3%)
Struggle to get along with superiors, subordinates and peers	140	(49.6%)	70	(24.8%)	24	(8.5%)	30	(10.6%)	17	(6.0%)
Have to tolerate a lot of frustration	120	(42.6%)	58	(20.6%)	47	(16.7%)	30	(10.6%)	27	(9.6%)
Work long hours	102	(36.3%)	57	(20.3%)	39	(13.9%)	46	(16.4%)	37	(13.2%)
No control over my work schedule	165	(58.7%)	51	(18.1%)	25	(8.9%)	21	(7.5%)	19	(6.8%)
Dissatisfied with my salary	83	(29.3%)	62	(21.9%)	45	(15.9%)	32	(11.3%)	61	(21.6%)
My work is boring and not challenging	170	59.4%)	46	(16.3%)	27	(9.6%)	15	(5.3%)	24	(8.5%)
Perfectionist in the execution of my tasks	75	(26.7%)	48	(17.1%)	69	(24.6%)	46	(16.4%)	43	(15.3%)

Table 7: Recreational sphere

Item	*Not At All*		*Slightly*		*Moderately*		*Often*		*Very Often*	
	N	*%*	*N*	*%*	*N*	*%*	*N*	*%*	*N*	*%*
Spend a lot of time under the influence of drugs and alcohol	197	(70.4%)	39	(13.9%)	19	(6.8%)	10	(3.6%)	15	(5.4%)
Do not have any free time	132	(47.1%)	67	(23.9%)	47	(16.8%)	24	(8.6%)	10	(3.6%)
Too tired to use my free time constructively	144	(51.2%)	69	(24.6%)	37	(13.2%)	19	(6.8%)	12	(4.3%)
Have free time but no interests/activities to fill it with	152	(54.1%)	63	(22.4%)	35	(12.5%)	18	(6.4%)	12	(4.3%)

Table 8: Coping strategies

Item	*Not At All*		*Slightly*		*Moderately*		*Often*		*Very Often*	
	N	*%*	*N*	*%*	*N*	*%*	*N*	*%*	*N*	*%*
Maintain a sense of humour	62	(22.5%)	57	(20.7%)	80	(29.0%)	44	(15.9%)	33	(12.0%)
Meditate	85	(30.7%)	80	(28.9%)	69	(24.9%)	29	(10.5%)	14	(5.1%)
Get a massage	98	(35.4%)	58	(20.9%)	69	(24.9%)	35	(12.6%)	17	(6.1%)
Exercise regularly	75	(27.1%)	77	(27.8%)	69	(24.9%)	32	(11.6%)	23	(8.3%)
Eat more sensibly	63	(22.7%)	82	(29.5%)	72	(25.9%)	38	(13.7%)	22	(7.9%)
Limit intake of alcohol	123	(44.4%)	53	(19.1%)	51	(18.4%)	21	(7.6%)	29	(10.5%)
Take refuge in family and friends	108	(38.8%)	53	(19.1%)	53	(19.1%)	42	(15.1%)	20	(7.2%)
Delegate responsibility	90	(32.4%)	49	(17.6%)	75	(27.0%)	49	(17.6%)	15	(5.4%)
Quit	166	(59.5%)	47	(16.8%)	32	(11.5%)	23	(8.2%)	9	(3.2%)

glue. With 5 (62.5%) members, their 2nd choice of drug was glue and with 2 (25%) members glue was their 2nd choice of drug. Fifteen (53.6%) said that they were between the ages of 15 and 19 when they first started using drugs. Twelve (48%) said that they used drugs at least once a month, 8 (32%) said that they used drugs once a week and 5 (20%) said that they used drugs once or more a day.

Alcohol: One hundred and fifty five (54.8%) admitted to drinking alcohol. One hundred and fifteen (73.7%) drank beer and 28 (17.9%) drank wine. Their 2nd choice of drink was as follows: brandy - 24 (37.5%), beer - 17 (26.6%), cider -7 (10.9%) and brew - 6 (9.4%). Seventeen (11%) were 18 years old when they first started drinking, sixteen (10.4%)

were 25 years old and 12 (7.8%) each were 20 and 22 years old. Seventy six (50.3%) said that they drank more or less once or more a week, 38 (25.2%) drank about once a month and 35 (23.2%) drank once or more a day. Ninety four (43.9%) admitted that they have been drunk after drinking alcohol even when they did not mean to and 35 (16.4%) that they become increasingly irritable after drinking alcohol.

DISCUSSION

The test results confirm that the police officials who took part in the survey are generally stressed. Finn (1997) and Colwell (1998) did find policing to be a stressful occupation. Colwell (1998), mentioned that police work imposes a higher degree of stress and a whole variety of stressful situations on members that do most other professions. According to Schaefer (1983), a high degree of stress could lead to illnesses like hypertension, cardiovascular irregularities and gastrointestinal disorders. This study confirms that a sizeable number of members of the police are already showing physical symptoms of stress. Furthermore, 27.1% indicated that they do not exercise at all.

According to Klein (1989), a stressed member of the police usually also has negative effects on his/her peers and family. According to the results of the survey, 33.2% have lost interest in others. 38.6% have difficulty controlling their anger and 44.8% expected other people to be perfectionists. This accounts for partners in therapy complaining that members are short-tempered with them, overprotective and expect perfectionism. An

Anonymous Policeman's Wife (2003) writing in to Servamus complains that stress is ruining her relationship (Servamus, May 2003, Vol'. 96, Issue 5, pg. 7). According to Colwell (1988), after all the trauma that the member of the police has to deal with and the frustrations at work, by contrast, the official is expected to accomplish a mood swing to a loving spouse, understanding parent, school supporter and community volunteer. Some participants were clearly having difficulty with this mood shift.

More than one third, said that they suffered depression and 41.8% said that they were unmotivated to take up challenges. Some members of the police writing in to *Servamus* have signed off as "Desperate and Depressed" (2003) and "Disillusioned" (2001). This clearly indicates that frustrations give rise to depression and disillusionment.

This is in line with those complaints made by South African members in the Servamus Magazine. Geldenhuys (2003) stated that police officials are generally never paid what they should be earning. Roosendaal (2002) complains that the present salary increases have not been sufficient because there have been other increases as well such as medical aids, pension contributions and taxes. According to Levinson (1981), the situation is made even worse when police members work under severe pressure for long periods of time with little support and little or no incentives. They become the prime victims of burnout. Bratz (1986) asserts that members of the police have to cope with the rigors of working weekends, holidays, nights and rotating shifts. They witness people dying, being beaten almost to death, burglaries, thefts and domestic violence. This could mould them into apathy and detachment. They sometimes also have to put up with frustrations at work. An anonymous member from Port Elizabeth (Servamus Vol. 96, Issue 6, June 2003, pg 8) complains of nepotism preventing fair promotions. A high percentage of participants complained of being stressed as a result of feeling overloaded with work. "Real policeman" (2003) from Kwa-Zulu Natal complains that hundreds of policemen are not doing real police work, leaving stations and other Units understaffed by guarding politicians.

Generally, it seems that police members do not have effective coping skills and do not spend recreational time constructively. Some members of the police smoke, take drugs and drink alcohol. This finding correlates with that of Corelli (1994), MaClean (Cited in Corelli, 1994) and Klein (1989). Corelli (1994), asserts that police officers often self-medicate with alcohol to forget the things they've seen. They have a superman mentality, a macho image which they protect. This is part of the police culture itself. To handle the pressures of the job, "the guys" join together and their favourite pastime is drinking. MaClean (cited in Corelli, 1994) asserts that alcohol abuse among police officials is the norm because they are ostracized by the rest of society for the type of work that they do. Klein (1989) feels that it probably won't be the bullet that will strike an officer down but the effect of chronic stress.

LIMITATIONS OF STUDY

- This study was done in the Central Area in Limpopo Province of South Africa and therefore cannot be generalized to other areas without caution.
- This study was mainly quantitative. If it included a qualitative part, it would have yielded more information, especially with regard to finding out how those police officials who did not complain of stress coped. This information could have been passed on to members coping ineffectively as an option they might want to try. Members could have also given their input on how the current situation could be improved upon.
- The study was done within a specific time period. With a longitudinal study, more information could have been acquired.

CONCLUSION AND RECOMMENDATION

There are a sizeable number of police members who are stressed and are coping ineffectively. The stress is affecting them mentally and physically. It is also affecting their interpersonal relationships.

It is recommended that workshops be held illustrating the dangers of substance abuse both mentally and physically and the damage it does to interpersonal relationships. Every police official at some point should attend this workshop at least once a year. Dieticians should hold workshops explaining the importance of eating a healthy diet. Experts should advise police members and their spouses on how to be thrifty with money. Police officials should be encouraged

to exercise regularly. Gym contracts should either be subsidized by the SAPS or the Area should build a gym or meet at a local sports centre or sports ground to play sport. It will also help to facilitate good working relationships between police members. Members of the police should be consulted to find out what are the barriers that are preventing them from making better use of Psychological Services and their suggestions should be taken into account. Psychological Services could play a pivotal role in alleviating stress and developing pro-active programs to this effect. Programs should be run encouraging police members to come forward with their problems and to attend psychotherapy. They should be told how psychotherapy can help them and what to expect in therapy. Programs should be developed for the spouses and children so that they can support each other and ultimately the member. There needs to be open channels of communication or a direct line between families and the SAPS. Training should be given to senior police members teaching them how to work with people and how to give instructions minimizing stress for the police member on the receiving end.

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