

**EFFECT OF BURNOUT ON MENTAL HEALTH AMONG POLICE OFFICERS IN
STAREHE SUB-COUNTY, NAIROBI COUNTY, KENYA**

TERESIA MUMBI KAHURA

**A Thesis Submitted in Partial Fulfilment of the Requirements for the Award of the
Degree of Master of Arts in Counselling Psychology, in the Department of Counselling
Psychology, School of Humanities and Social Sciences of Africa Nazarene University**

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DECLARATION

I declare that this document and the research that describes it are my original work and that they have not been presented in any other university for academic work.

NAME: TERESIA MUMBI KAHURA

REG NO.: 18J03EMCP010

_____  _____

Student's signature

_____ 30/06/2025 _____

Date

This research was conducted under our supervision and is submitted with our approval as university supervisors.

Supervisor's Name: DR. PRICILA MUGAMBI

_____  _____

University supervisor's signature

_____ 30/06/2025 _____

Date

Supervisor's Name: Dr. SUSAN GITAU

University supervisor's signature

_____ 30/06/2025 _____

Date

DEDICATION

This work is dedicated to my family for their support throughout the program.

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I am deeply grateful to my husband, Benson N. Njoroge, and my children, Amani, Malkia, and Imani Njenga, for their unwavering love, support, and encouragement. Their presence in my life has been a constant source of strength, and I couldn't have achieved this milestone without them.

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ABSTRACT

The increasing trend of mental health cases in the society has raised global concern. Kenya National Task Force on Police reforms aim to continuously improve the working conditions of Kenya Police Officers. However, there are numerous cases involving police brutality, suicides, homicides, and deaths which points to the increase in mental illness resulting in stroke or loss of life among other health complications. This might be attributed to burnout issues among the police force, hence there is need to examine whether or not it is the contributing to mental illness. The main objective of this study was to examine the effect of burnout on the mental health of Kenya Police Service Officers in Starehe Sub-County, Nairobi, Kenya. The specific objectives were to assess the effect of emotional exhaustion, post-traumatic stress disorder (PTSD), and personal accomplishment on the mental health of Kenya Police Service officers working in Starehe Sub-County, Nairobi, Kenya. The study was anchored on spillover theory, work-family border theory, and person-environment fit theory. The study adopted a descriptive research approach that incorporates a cross-sectional research design. A target population of 174 police officers in seven police stations in Starehe Sub-County was used. A sample of 121 officers was selected using stratified sampling technique where 14 senior police officers were interviewed and 107 junior police officers were given questionnaires. Primary data was obtained using structured questionnaires and interview schedules. The quantitative data was analyzed using descriptive statistics such as frequencies, percentages, mean and standard deviations, as well as inferential statistics such as simple linear regression and multiple linear regression models. The qualitative data was analyzed using content analysis where themes generated from the data was utilized in the discussion. The study revealed a high prevalence of burnout among Kenya Police Service officers in Starehe Sub-County, with emotional exhaustion (83.5%), diminished personal accomplishment (83.1%), and PTSD (70.0%) significantly impacting mental health. Emotional exhaustion, driven by overwork, physical fatigue, and limited rest, had a strong negative effect ($\beta = 0.988, p < 0.001$), while PTSD ($\beta = 0.580, p < 0.001$) and low personal accomplishment ($\beta = 0.877, p < 0.001$) were also strongly associated with deteriorating mental well-being. Qualitative interviews confirmed these findings, citing overwhelming workloads, trauma exposure, lack of recognition, and strained supervisor relationships as key contributors. The study concluded that burnout is a pervasive and harmful issue within the police force, necessitating urgent institutional reforms. Recommendations include implementing structured counseling services, enhancing recognition and career growth opportunities, managing workloads, and providing targeted trauma support. These strategies are vital for improving officers' psychological resilience, motivation, and overall mental health.

OPERATIONAL DEFINITION OF TERMS

Burnout	This refers to a syndrome caused by persistent job-related stress that has not been effectively managed. (Adina, Vesa, & Nirestean, 2021). In this study burnout refers to issues that result from job stress that is post-traumatic stress disorder (PTSD), emotional exhaustion and personal accomplishment.
Emotional Exhaustion	Refers to a state of feeling emotionally drained or depleted, often resulting from excessive or prolonged stress, overwhelming responsibilities, or challenging situations (Mihelič, Zupan, & Merkuž, 2024). In the current study it refers to being emotionally drained due to overwhelming work, cynicism, physically depleted and irritable.
Mental Health	It refers to an individual's psychological, emotional, and social wellness, which includes their ability to manage stress, maintaining good relationships, and making wise decisions, as well as their emotional stability and cognitive functioning. (Pressman, Kraft, & Bowlin, 2020). In this study it refers to emotional well-being, psychological well-being, social well-being and cognitive function.
Personal Accomplishment	This refers to a person's understanding of their achievements, successes, or competencies in various aspects of their life, whether professional, academic, or personal (Marsh, Martin, Yeung, & Craven, 2017). This refers to the ability to attain goals, skill development, recognition of effort and work relationships.

Post-Traumatic Stress Disorder (PTSD): is a mental health condition characterized by persistent and intrusive symptoms that develop after exposure to a traumatic event (Omopo, 2024). In this study, PTSD was measured based on the presence of symptoms like avoidance, negative moods and intrusive thoughts.

ABBREVIATIONS/ACRONYMS

CAPS	Clinician Administered PTSD Scale
DDD	Depersonalization-Derealization disorder
GHQ-28	General Health Questionnaire -28 Score
IPOA	Independent Police Oversight Authority
MINI	Mini-International Neuropsychiatric Interview
NACOSTI	National Commission of Science, Technology and Innovation
OCPD	Officer in Charge of the Police District
OCS	Officer Commanding Police Station
P-E Fit theory	Person-Environment Fit theory
PTSD	Post Trauma Stress Disorder
SPSS	Statistical Package for Social Sciences

CHAPTER ONE

INTRODUCTION

1.1 Introduction

The study sought to examine how burnout is linked to the increase in mental health issues in the police service. The increase of suicide cases, death, and mental illness has increased in the 21st century not only among the police force but also in other sectors. There is a need to examine whether the increase is attributed to burnout associated with depersonalization, emotional exhaustion, or personal accomplishment. The chapter outlines the background of the study, the problem statement, the study objectives, significance, scope, limitations, delimitations, and assumptions of the study. It also provides the study's theoretical framework and conceptual framework.

1.2 Background on the Study

Globally, mental health issues have increased leading to untimely strokes, other health complications, and death, among employees. In the United States, work conditions often exhibit a demanding work culture with long hours, limited vacation time, and a focus on productivity leading to burnout (Azevedo, Shi, Medina, & Bagwell, 2022). This intense work environment can contribute to higher stress levels, and burnout, and negatively impact mental health. While the U.S. has regulations in place to address workplace safety and some mental health support, the absence of universal healthcare can limit access to necessary services (Alspaugh, Lanshaw, Kriebs & Van-Hoover, 2021).

The nature of work and working conditions of police officers encompass a combination of factors that significantly impact their job satisfaction, overall well-being, and mental health according to Lee and Kim (2023). A heavy workload is often associated with long hours, frequent emergencies, and substantial caseloads, which can lead to emotional exhaustion, and burnout, thus posing a significant risk to their mental health (Jetelina, et al., 2020). The work

environment includes the physical and organizational aspects of the workplace, exposing officers to potentially dangerous and high-stress situations which often leads to depersonalization. Personal accomplishment hinders an officer's commitment to their profession due to low salaries, limited career advancement prospects, and concerns about job security can dampen motivation, impacting job satisfaction (Hu, Huang, & Yang, 2022).

The nature of work relationships that arise from interactions with colleagues and superiors plays a crucial role in shaping an officer's mental health according to Bourassa (2021). Positive work relationships characterized by trust, support, and effective teamwork can serve as protective factors, while a hostile or unsupportive work environment, including issues such as corruption and discrimination, can contribute to stress, anxiety, and mental health problems. Hence, burnout can lead to significantly influencing the overall mental health of employees (Cvenkel, 2021). Hence, there is a need to examine the relationship between burnout and mental health.

Emotional exhaustion, stemming from overwhelming work demands and persistent stressors inherent in law enforcement, can lead to a profound depletion of emotional resources (Stormer, 2021). The constant exposure to high-pressure situations, traumatic events, and the burden of responsibility can leave officers feeling emotionally drained, rendering them vulnerable to psychological distress. According to Violanti (2021), police officers face a high risk of burnout due to an unregulated working schedule, depression and trauma from the nature of work, and physical exhaustion leading to low mental well-being. This exhaustion may manifest as heightened levels of anxiety, depression, and overall emotional dysregulation, compromising their emotional well-being.

Post-Traumatic Stress Disorder (PTSD) is a severe mental health condition that arises after exposure to traumatic events, commonly affecting individuals in high-risk professions such as law enforcement (Van-Eerd, Irvin, Harbin, Mahood & Tiong, 2021). Police officers frequently

encounter life-threatening situations, violent crimes, and distressing incidents, making them highly susceptible to PTSD (Collazo, 2022). Symptoms such as flashbacks, emotional numbness, heightened anxiety, and difficulty sleeping can significantly impact their mental well-being, job performance, and personal relationships.

Conversely, personal accomplishment serves as a buffer against burnout, providing police officers with a sense of purpose, competence, and fulfillment in their work (Civilotti, *et al*, 2022). Goal attainment, skill development, and recognition of their efforts can bolster their resilience and motivation, mitigating the negative effects of emotional exhaustion and depersonalization (Clem, 2022). However, in environments where systemic challenges, such as inadequate resources or organizational dysfunction, hinder opportunities for personal growth and recognition, officers may struggle to maintain a sense of accomplishment, leading to increased susceptibility to burnout.

In the Netherlands, the Dutch prioritize work-life balance, shorter workweeks, and generous vacation policies to reduce the impact of burnout among employees (Bouwmeester, Atkinson, Noury, & Ruotsalainen, 2021). These conditions tend to reduce work-related burnout and promote mental well-being. Moreover, European countries often have robust social safety nets and universal healthcare, providing employees with mental health support as needed. Some Asian nations, like Japan and South Korea, have a strong work ethic and long working hours, which can strain mental health. In contrast, countries such as Singapore and Hong Kong have highly competitive work environments, potentially contributing to stress and anxiety (Teo, *et al.*, 2021). While Asia has made efforts to address work-related mental health, cultural norms, and stigmas around mental health care can hinder progress.

In Africa, police forces are compacted with high workloads, often resulting from resource limitations and high crime rates, which place significant stress on officers and can lead to burnout and the development of mental health issues. In Nigeria according to Alabi (2020), the

working environment in some regions can be challenging, with inadequate facilities and safety risks, further exacerbating the stressors officers face. Another study in Tanzania (Mlugu, 2020) pointed out that working motivation is influenced by factors such as low salaries, limited career advancement opportunities, and the potential for corruption, which can contribute to demotivation and negatively impact mental well-being.

In Kenya, cases of police suicides, excessive use of force, and mental health challenges have raised concerns about the psychological toll of policing (IPOA, 2020). Despite efforts by the government to improve working conditions, PTSD remains an underlying issue contributing to burnout and emotional exhaustion among officers. However, there is limited empirical research on the extent of PTSD and its effect on mental health within the Kenya Police Service.

The impact of burnout on the mental health of police officers in Kenya extends beyond emotional well-being to encompass psychological, social, and cognitive dimensions (Muchiri, 2022). Left unaddressed, burnout can contribute to a myriad of adverse outcomes, including decreased job performance, impaired decision-making abilities, strained relationships, and heightened risk of mental health disorders such as PTSD and substance abuse (Moore et al., 2020). Addressing burnout requires a multifaceted approach that targets both individual and organizational factors, including the provision of adequate mental health support, resources for coping and resilience-building, and reforms aimed at improving working conditions and fostering a culture of well-being within law enforcement agencies.

This study was conducted in Starehe Sub County, Nairobi, Kenya, due to the existing challenges faced by the Kenya Police Service in this area. Nairobi County is among the highest crime-rated regions in Kenya, and Starehe Sub County, in particular, has 18 crime hotspots and 17 active criminal gangs, which significantly increase police workload and stress levels (Gitonga & Soi, 2022). The demanding work environment makes officers in this region highly vulnerable to burnout and PTSD, necessitating further investigation into their mental health

challenges. This study therefore examined the effect of burnout on the mental health of police officers to fill the existing gaps in literature and provide solutions to the increasing cases of mental illness among police officers in Kenya.

1.3 Statement of the Problem

The mental stability and health of employees are essential for both individual and organizational productivity. Companies and institutions, whether private or public, continuously strive to improve working conditions to enhance performance and efficiency (Jain et al., 2021). As a government institution, the Kenya Police Service has made efforts to improve working conditions to match the demanding nature of police work. However, numerous cases of police brutality, suicides, homicides, and unexplained deaths have raised concerns about the mental health and well-being of officers (IPOA, 2020). Nairobi County is among the highest crime-rated regions in Kenya, and Starehe Sub County, in particular, has 18 crime hotspots and 17 active criminal gangs, which significantly increase police workload and stress levels (Gitonga & Soi, 2022). These conditions make officers in the region highly vulnerable to mental health challenges, necessitating further investigation into the link between burnout and mental illness.

These issues indicate a rise in burnout and mental health, which have been linked to severe consequences such as loss of life, stroke, and other health complications. A study by Muchiri (2022) which focused on work-related stress on employee performance in the Kenya Disciplined Services highlighted that the government had improved the work environment, however, they did not address work-related stress. Therefore, there is a need to examine burnout-related issues like emotional exhaustion, post-traumatic stress disorder (PTSD), and personal accomplishment. The study was conducted in Starehe Sub County, Nairobi, Kenya, due to the unique challenges faced by police officers in this area.

1.4 Purpose of the Study

The aim of this study was to examine the effect of burnout on mental health among Kenya Police Service Officers in Starehe Sub County, Nairobi County, Kenya.

1.5 Objectives of the Study

The specific objectives are given as follows:

- i. To determine the prevalence of burnout on the mental health among the Kenya Police Service Officers in Starehe Sub County, Nairobi County, Kenya.
- ii. To assess the effect of emotional exhaustion on the mental health of Kenya Police Service officers working in Starehe Sub County, Nairobi County, Kenya.
- iii. To determine the effect of post-traumatic stress disorder (PTSD) on the mental health of Kenya Police Service officers working in Starehe Sub County, Nairobi County, Kenya.
- iv. To assess the effect of personal accomplishment on the mental health of Kenya Police Service officers working in Starehe Sub County, Nairobi County, Kenya.

1.6 Research Hypothesis

H₀1: There is no significant prevalence of burnout on the mental health among Kenya Police Service officers working in Starehe Sub County, Nairobi County, Kenya.

H₀2: There is no significant effect of emotional exhaustion on the mental health of Kenya Police Service officers working in Starehe Sub County, Nairobi County, Kenya.

H₀3: There is no significant effect of post-traumatic stress disorder (PTSD) on the mental health of Kenya Police Service officers working in Starehe Sub County, Nairobi County, Kenya.

H₀₄: There is no significant effect of personal accomplishment on the mental health of Kenya Police Service officers working in Starehe Sub County, Nairobi County, Kenya.

1.7 Significance of the Study

The study's results benefitted the police officers in improving working conditions as well as eliminating burnout. The study will also examine the effect of burnout on police officer's mental health. This study will provide more information that will be adopted by other employees who encounter trauma and dangerous situations. The study will also assist in the improvement of existing policies and legislation that will promote work-life balance, work environment as well as stress management practices in solving mental, psychological, and emotion-related problems among Kenya Police Service.

For policymakers, the study provided valuable insights into the mental health challenges faced by police officers, informing the development and implementation of policies aimed at improving police welfare. The findings can guide the formulation of regulations on stress management, psychological support, and work-life balance within the Kenya Police Service. Strengthening mental health policies will not only benefit law enforcement personnel but also contribute to a more stable and secure nation, attracting both local and foreign investment.

Moreover, the study's findings were valuable to other professionals in high-risk occupations, such as healthcare workers, firefighters, and military personnel, who also experience traumatic events in their line of duty. The insights gained from this research can be adapted to enhance mental health support systems across various professions, ultimately improving workplace environments and employee well-being.

The study was to inform the nation and community and thus form a basis for policies for reducing cases of suicides, deaths, or homicides related to police officers. This will be able to

improve security and safeguard the community from threats. The nation of Kenya will benefit from stable internal security which is good for foreign investors.

The study was of benefit to scholars and researchers as it offered more information that assisted in research work. It provided necessary literature for researchers and on the other hand, the scholar also gained new knowledge. The scholar was also able to use this work as their reference and citation to add more knowledge in the area of study.

1.8 Scope of the Study

The study was conducted in Starehe Sub County, Nairobi, Kenya, due to the existing challenges faced by the Kenya Police Service in this area. Nairobi County is rated among the highest crime areas whereas Starehe Sub-County has 18 crime spots and 17 criminal gangs leading to high work for police officers (Gitonga & Soi, 2022). This established the influence of burnout on mental health. This is important in reducing high levels of mental illness, death, and suicides. The study employed the use of both descriptive and cross-sectional survey designs.

1.9 Delimitations of the Study

The study's geographical delimitations were limited to Starehe Sub County in Nairobi, Kenya. This delimitation is crucial to maintaining a specific and manageable area of study, allowing for in-depth data collection and analysis within a defined location. The study's results and findings had practical applications specifically to police officers working within this geographical boundary.

Secondly, the study specifically focused on police officers as the target population. This delimitation is important to ensure a homogenous sample with shared occupational experiences and stressors. This is because police force burnouts provided valuable insights into the unique challenges faced by police officers about the effects of burnout on psychological well-being.

Furthermore, the study primarily examined the relationship between burnout and mental health outcomes among police officers. While other factors may influence mental health, such as personal experiences and external stressors, this study maintained a focused examination of the effects of burnout within the context of policing in Starehe Sub County, Nairobi.

1.10 Limitation of the study

This research was limited to information collected from police officer's stations in different parts of Starehe Sub County, Nairobi, Kenya. The study used Starehe Sub County to generalize the information to the entire Kenya since police officers in Kenya face similar challenges. The respondents might be reluctant to respond since the topic is sensitive. The research was able to encourage the respondent that all information was kept confidential and utilized for research purposes alone.

Another limitation is the sensitivity of the topic. Since mental health issues, burnout, and PTSD among police officers can be seen as stigmatizing, some respondents might be reluctant to participate or provide honest responses. Officers may fear repercussions, such as being perceived as weak or unfit for duty, leading to potential response bias. To mitigate this, the researcher ensured confidentiality and anonymity, emphasizing that all responses were used solely for research purposes.

Additionally, data collection challenges may arise due to the demanding schedules of police officers. Their unpredictable work routines, involvement in emergencies, and long shifts might limit their availability to participate in the study. This could affect the response rate and the depth of information gathered. To address this, the researcher adopted flexible data collection methods, such as scheduling interviews and questionnaires at convenient times for the officers.

The study was also constrained by the reliance on self-reported data, which may be subject to recall bias or social desirability bias, where officers may underreport or overstate their

experiences. To enhance reliability, the study incorporated validated psychological assessment tools to measure burnout and PTSD, reducing the likelihood of subjective distortions.

Lastly, policy and institutional constraints may limit access to critical data on police mental health. The Kenya Police Service operates under strict regulations, and obtaining approval for data collection might be challenging. The researcher engaged relevant authorities early in the process to secure permissions and ensure compliance with ethical and institutional guidelines.

Despite these limitations, the study provided valuable insights into the mental health challenges faced by police officers, contributing to policy development and improved mental health interventions within the Kenya Police Service.

1.11 Assumptions of the Study

Firstly, the research assumed that burnout is a prevalent issue among police officers in Starehe Sub County. This assumption is based on existing literature and anecdotal evidence suggesting that law enforcement professionals often face high levels of occupational stress, potentially leading to burnout over time.

Secondly, the study assumes that burnout among police officers has a significant negative impact on their mental health. This assumption is grounded in psychological theories linking chronic stress and emotional exhaustion to negative effects on psychological wellness, such as anxiety and depressive symptoms, and reduced overall well-being. Understanding this assumed relationship is essential for developing effective interventions and support strategies for police officers experiencing burnout.

Additionally, the study assumes that addressing burnout among police officers could lead to improved mental health outcomes and overall job satisfaction. This assumption is rooted in the belief that proactive interventions and organizational support mechanisms can mitigate the

adverse consequences of burnout, ultimately enhancing the wellness and performance of police personnel in Starehe Sub County.

Lastly, the study assumes that findings and insights gained from this research can inform policy and practice aimed at promoting mental health and well-being within the law enforcement sector. By identifying key assumptions, the study aims to contribute valuable knowledge that can guide evidence-based interventions and organizational changes to assist Nairobi, Kenyan police personnel with their mental health problems.

1.12 Theoretical Framework

The research was anchored on spillover theory, work-family border theory, and Person-Environment Fit theory. The theories are synthesized to examine the understanding of scholars and conceptualization of burnout and mental health based on early theories.

1.12.1 Spillover Theory

The spill-over theory, initially developed by Herbert Freudenberger in 1974, offers insights into the interplay between work-related stress and its implications on individuals' psychological health and wellness (Vincent, Aboobaker, & Devi, 2022). Freudenberger, a psychologist, suggested that the pressures and demands experienced in the workplace could spill over into other domains of life, affecting various aspects of an individual's functioning.

According to Abubakar, Rezapouraghdam, Behraves, and Megeirhi (2022), the spillover theory identified post-traumatic stress disorder (PTSD), emotional exhaustion, and decreased personal achievement, collectively known as burnout as a crucial aspect of mental health. The spill-over theory posits that these manifestations of burnout are not confined solely to the workplace but can permeate other spheres of life, affecting one's overall psychological health and functioning.

Pradhan (2021) in a study of work-related stress, burnout, work-life, conflict, and quality specifically on police officers identifies that work stress spillover from different environments and therefore affects the social environment of individuals. Emotional exhaustion encompasses a sense of overwhelming fatigue and an inability to cope effectively with the requirements of a job. People who are depersonalizing themselves might show signs of disengagement, agitation, and a lack of empathy. These actions can strain relationships with others and exacerbate stress levels. Furthermore, burnout is associated with a diminished sense of personal accomplishment, wherein individuals perceive a decline in their competence and efficacy in their professional roles. This erosion of self-esteem and fulfillment can lead to feelings of inadequacy and disillusionment, further fueling the cycle of burnout.

Perrigino, *et al.*, (2021) argued that the weakness of spillover theory is its oversimplification of the complex nature of burnout and failure to account for individual differences in coping strategies and resilience. Additionally, Reiche, *et al.*, (2023) contended that the theory neglects the role of organizational factors, such as job design, leadership, and workplace culture, in contributing to burnout. While the spill-over theory highlights the interconnectedness of work and personal life, critics suggest that a more nuanced understanding of the socio-environmental factors influencing burnout is necessary to develop effective prevention and intervention strategies.

Nevertheless, empirical evidence supports the spill-over theory's premise that prolonged exposure to work-related pressures might negatively impact one's mental well-being. (Maria-Tresita, Aboobaker, & Devi, 2023). Studies have demonstrated associations between burnout and various mental health outcomes, including anxiety, depression, and even physical health problems. Thus, it is critical to address the causes of burnout at both the individual and organizational levels to enhance workers' well-being and create a positive work environment.

With the spill-over effects of work-related stress, organizations can implement measures to mitigate burnout and support employees in assisting the police force to strike a better balance between work and personal obligations. The spill-over theory aims to explain burnout as a phenomenon that may result from emotional exhaustion, post-traumatic stress disorder (PTSD), and a lack of personal accomplishment. However, it does not address the concept of mental health which is the weakness of this theory. The spill-over effects explain the interrelationship between home and workplace stress or issues but lack a proper link with mental health.

1.12.2 Work-Family Border Theory

The Work-Family Border Theory, proposed by Clark in 2000, seeks to comprehend how people manage the boundaries between their personal and professional lives and how these two domains interplay (Storch & Juarez-Paz, 2022). Clark's theory posits that individuals navigate the intersection of responsibilities in their household and at work through a process of segmentation, integration, or balance (Holmes, Thomas, Petts, & Hill, 2020). Segmentation involves maintaining distinct boundaries between work and family domains, while integration entails blending work and family responsibilities. Balance refers to achieving harmony and satisfaction in both domains by effectively managing the boundaries between them.

A key tenet of the theory is its recognition of the bidirectional influence between work and family domains (Peng, Lian, & Zhang, 2022). Stressors experienced in one domain can spill over into the other, impacting individual well-being and contributing to burnout. According to De-Clercq, Kaciak, and Thongpapanl, (2022) emotional exhaustion, a core component of burnout, may result from the cumulative strain of balancing competing demands from work and family roles. Individuals experiencing emotional exhaustion may feel overwhelmed, fatigued, and emotionally depleted, making it challenging to effectively manage

responsibilities in both domains. Post-traumatic stress disorder (PTSD), another dimension of burnout, can also be influenced by the dynamics between family and work responsibilities.

Furthermore, the Work-Family Border Theory acknowledges the importance of personal accomplishment in mitigating burnout. Individuals who experience a sense of fulfillment and efficacy in both their work and family roles are less likely to succumb to burnout. However, when the boundaries between work and family become blurred or when conflicts arise, individuals may struggle to maintain a sense of competence and achievement, leading to diminished personal accomplishment and increased susceptibility to burnout. According to Zambrana, Hardaway, and Neubauer (2022), the theory may not adequately address the unique challenges faced by marginalized or underrepresented groups in managing work-family boundaries. Despite these criticisms, the theory provides valuable insights into the interconnectedness of work and family roles and their impact on individual well-being.

Work-family border theory affirms the connection between burnout, outcomes of psychological well-being, and conflict between work and family life. High levels of conflict between work and family responsibilities are associated with an increased risk of reporting burnout symptoms, including post-traumatic stress disorder (PTSD), emotional tiredness, and decreased levels of personal accomplishment. Moreover, chronic exposure to work-family conflict has been associated with detrimental effects on mental health, such as depression, anxiety, and a decline in psychological health in general.

1.12.3 Person-Environment Fit Theory

Person-Environment (P-E) Fit Theory, was initially postulated by John L. Holland in the 1950s and later expanded upon by others including Dawis and Lofquist in the 1970s (Armitage & Amar, 2021). The theory explores how individuals' characteristics interact with their environments to influence various outcomes, including burnout and mental health. The theory

posits that individuals seek environments that align with their personality traits, values, and skills and that the degree of fit between an individual and their environment determines their satisfaction, well-being, and performance (Gander, Hofmann, & Ruch, 2020).

According to P-E Fit Theory, there are three main types of fit namely person-organization fit, person-job fit, and person-group fit. The term "person-job fit" describes how well a person's preferences, talents, and skills match the demands and features of the work they are doing (Rajper, Ghumro, & Mangi, 2020). The alignment of a person's ideals, objectives, and personality with the culture, values, and objectives of the company they work for is known as person-organization fit. Person-group fit pertains to the harmony between an individual's characteristics and the characteristics of the group or team they belong to.

According to Calitz (2022), people who feel more at ease in their workplace are less likely to suffer from signs of burnout, such as diminished personal achievement, emotional tiredness, and post-traumatic stress disorder (PTSD). Moreover, a mismatch between individuals and their environments has been associated with stress levels, job dissatisfaction, and turnover intentions. According to Hennekam, Follmer, and Beatty, (2021), the P-E Fit Theory suggests that a lack of fit between individuals and their environments can contribute to psychological distress and negative mental health outcomes. When individuals feel disconnected or incongruent with their work environment, it can lead to feelings of anxiety, depression, and overall decreased psychological well-being. This theory provides a valuable framework for comprehension of how the alignment between individuals and their environments influences burnout and mental health. The theory supports the need for better fit between individuals and their work environments, organizations can help prevent burnout and support employees' mental health and well-being.

The theory emphasizes that individuals experience better psychological well-being when their work environment aligns with their personality, skills, and values (DeYoung & Tiberius, 2023). In the context of the Kenya Police Service, officers are often exposed to high-stress environments, traumatic experiences, and demanding work conditions that may not align with their expectations or coping abilities. This misalignment can lead to emotional exhaustion, PTSD, and overall mental distress, reinforcing the theory's assertion that poor person-job and person-organization fit contribute to negative psychological outcomes (Hennekam, Follmer, & Beatty, 2021). Furthermore, the theory justifies the study by highlighting the need for organizational reforms, including better mental health support, improved working conditions, and interventions that enhance the fit between police officers and their work environments. By applying the P-E Fit Theory, this research provided empirical evidence on how the work environment influences burnout and mental health in law enforcement, thereby informing strategies to improve officer well-being and overall job effectiveness.

1.13 Conceptual Framework

A conceptual framework is a structured representation of the relationships between key variables in a study, providing a visual or theoretical explanation of how the independent and dependent variables interact (Dehalwar & Sharma, 2023). It serves as a guide for research by illustrating the linkages among variables and supporting the development of hypotheses or research questions (Barroga & Matanguihan, 2022).

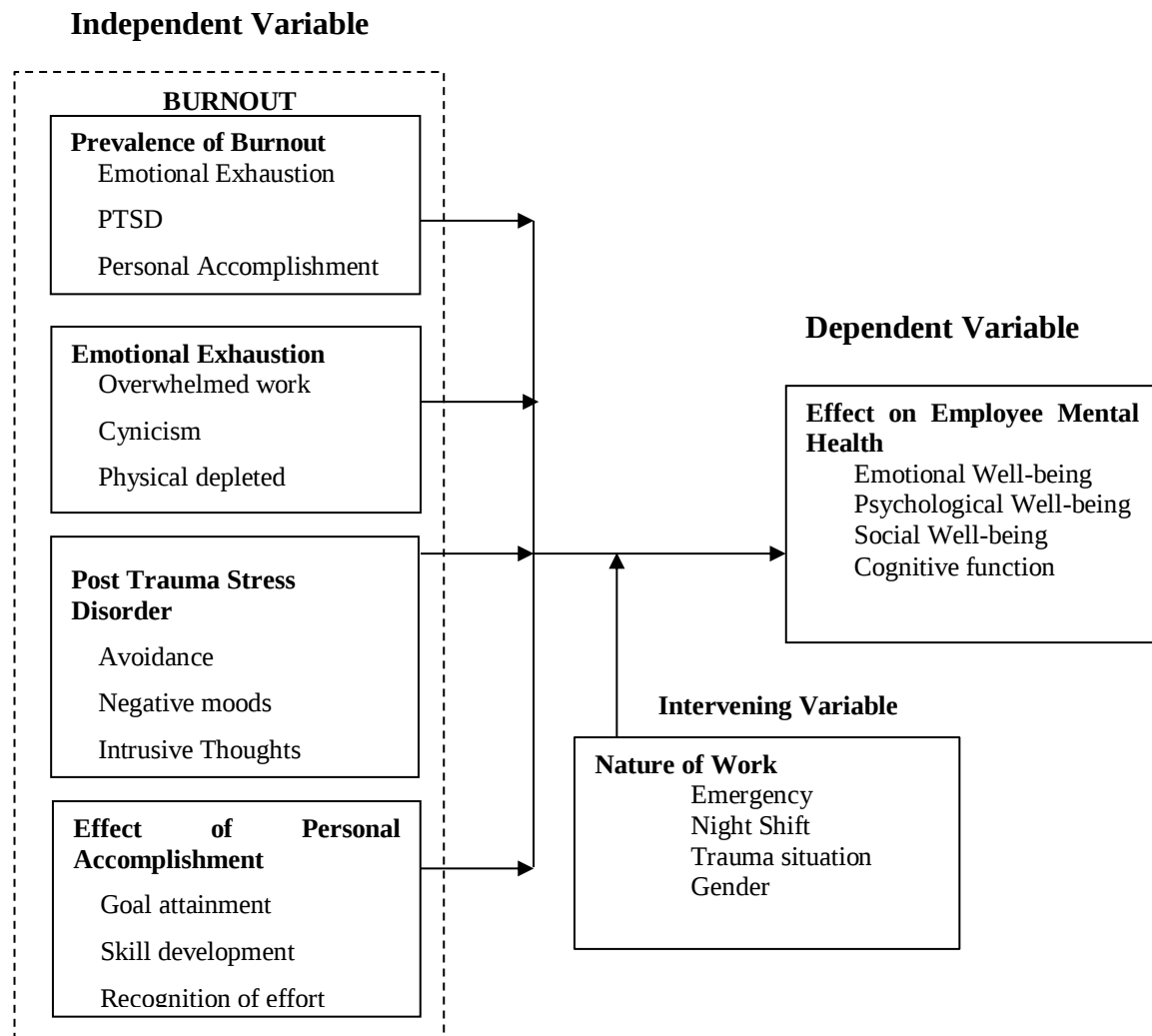


Figure 2.1: Conceptual Framework

Source: Researcher (2024)

In this study, the independent variable is burnout, which consists of components such as emotional exhaustion, post-traumatic stress disorder (PTSD), and personal accomplishment. Emotional exhaustion is measured using overwhelmed work, cynicism, and physical depletion. Another measure of burnout, post-trauma stress disorder is measured by examining avoidance behavior, negative moods, and intrusive thoughts within the police force. Finally, the effect of personal accomplishment is measured using goal attainment, skill development, and recognition of effort. These factors influence the dependent variable, which is mental health.

Mental health among police officers is a crucial factor affecting their job performance, personal well-being, and interactions with the community. High levels of burnout can lead to adverse mental health outcomes, including depression, anxiety, PTSD, and even suicidal tendencies.

The intervening variable in this study is the nature of work in law enforcement. Police officers are exposed to high-stress environments, long working hours, violent encounters, and life-threatening situations, which naturally contribute to burnout and mental health challenges. To control for the influence of the nature of work, random sampling was used to ensure that the impact of individual differences in work assignments is minimized. This helped isolate the effects of burnout on mental health without the results being disproportionately affected by extreme work conditions or specific assignments.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

The chapter examine related literature review on prevalence of burnout, emotional exhaustion, post-traumatic stress disorder (PTSD) and personal accomplishments in relation to mental health of Police Service Officers. It also discussed research gaps and critique on how the research achieved them.

2.2 Related Literature Review

The review of related literature provide discussion on empirical literature related to prevalence of burnout, emotional exhaustion, post-traumatic stress disorder (PTSD) and personal accomplishments in relation to mental health of Police Service Officers. The discuss assist in providing research gaps as well as extraction of indicator for each construct of the research variables in the study.

2.2.1 The Prevalence of Burnout on Mental Health among Police Service Officers

The prevalence of burnout among police service officers refers to the extent to which officers experience chronic physical, emotional, and psychological exhaustion due to prolonged exposure to occupational stress (Ugwu & Idemudia, 2024). Burnout is often assessed using standardized instruments such as the Copenhagen Burnout Inventory (CBI) and the Maslach Burnout Inventory (MBI), which measure various dimensions of burnout, including emotional exhaustion, depersonalization, and reduced personal accomplishment (Shoman, *et al.*, 2021). Empirical studies highlight that burnout is a significant issue among police officers due to the demanding nature of their work, including high job stress, exposure to traumatic incidents, long working hours, and inadequate support systems. Understanding the prevalence of burnout is crucial in developing strategies to enhance police officers' well-being and job performance.

In North America, Peterson *et al.*, (2019) examined association between shift work characteristics and schedules on burnout in police. It also examined whether sleepiness and sleep duration was association with burnout. A total of 3140 police officer were examined using Maslach Burnout Inventory (emotional exhaustion, depersonalization and personal accomplishment). The results indicated that short sleep and sleepiness were associated with high risk of burnout. The police working irregular schedules posed a high risk of overall burnout, followed by emotional exhaustion and last depersonalization personality. This also revealed that police force face high prevalence of burnout based on the shift schedules. The current study will focus on emotional exhaustion, post-traumatic stress disorder (PTSD) and personal accomplishment.

Bezie et al. (2024) conducted a study to investigate the prevalence of work-related burnout and associated factors among police personnel in the Central Gondar zone of Northwest Ethiopia. The study employed an institution-based cross-sectional research design between April 12 and May 12, 2023, utilizing a multistage random sampling technique to select a sample of 633 police officers. Burnout was measured using the Copenhagen Burnout Inventory, and data analysis involved bivariable and multivariable logistic regression to determine statistical significance. The study achieved a response rate of 96.05% ($n = 608$), with a median age of 28 years, and 74.3% of respondents being male. The findings indicated that 45.7% ($n = 278$) of police officers experienced burnout within the previous six months. Key risk factors included being female, high job demands, high organizational and operational stress levels, job dissatisfaction, and sleep issues.

A significant gap in this study is its geographical limitation, as it focused on a specific zone in Ethiopia, making it difficult to generalize findings to other contexts such as Kenya. Additionally, while the study identified factors influencing burnout, it did not explore potential interventions to mitigate burnout among police officers. The present study seeks to address

these gaps by focusing on police officers in Starehe Sub-County, Nairobi, Kenya, and investigating not only the prevalence of burnout but also its implications for mental health and potential intervention strategies.

Mwasala, Stephen, and Muasa (2024) examined the prevalence of job burnout among police officers in Nairobi County, Kenya. The study aimed to determine the commonality of burnout and assessed key dimensions, including emotional exhaustion, depersonalization, and personal accomplishment. A descriptive research design was employed, targeting a population of 6,899 police officers in Nairobi County. Stratified and simple random sampling techniques were used to select a sample of 371 officers, and data were collected using the Maslach Burnout Inventory (MBI). The results revealed that emotional exhaustion was highly prevalent among police officers, with a mean score of 5.92. Furthermore, the data indicated significant job burnout (mean score = 5.53) and moderate personal accomplishment levels (mean score = 4.16).

One limitation of Mwasala, Stephen and Muasa, (2024) study's is its lack of emphasis on the specific causes of burnout among police officers, focusing instead on prevalence without exploring underlying factors such as organizational stress, job dissatisfaction, or coping mechanisms. Additionally, while the study provided a broad assessment of Nairobi County, it did not examine burnout in individual sub-counties where crime rates and job demands may vary. The present study addresses these gaps by concentrating on Starehe Sub-County, an area with high crime rates and significant police workload, to provide a more localized understanding of burnout and its impact on mental health.

Previous studies have successfully measured the prevalence of burnout among police officers using validated tools such as CBI and MBI, there remains a need to contextualize findings to specific regions and explore contributing factors and possible interventions (Bezie *et al.*, 2024, Mwasala, Stephen, & Muasa, 2024). This study seeks to fill these gaps by examining burnout

among police officers in Starehe Sub-County, incorporating both qualitative and quantitative approaches to offer a comprehensive understanding of the issue. By doing so, the research contributed to evidence-based strategies aimed at reducing burnout and improving the mental well-being of law enforcement personnel.

2.2.2 Relationship between Emotional Exhaustion and Mental Health among Police Officer

Emotional exhaustion is a state of chronic emotional and physical fatigue that arises from prolonged exposure to high levels of stress, often in demanding work environments (Stormer, 2021). It serves as a critical indicator of burnout, particularly in professions that require intense emotional engagement, such as law enforcement. Emotional exhaustion manifests as a depletion of emotional resources, leaving individuals feeling mentally drained, overwhelmed, and unable to cope effectively with work-related stressors (Sheng, Yang, Han, & Jou, 2023). Individuals experiencing emotional exhaustion often find themselves feeling drained, both physically and mentally, with diminished energy and motivation to cope with daily challenges.

According to Haldorai, Kim, Agmapisarn, and Li (2023), the depletion of emotional reserves can have significant implications for mental health, as it may lead to heightened levels of stress, anxiety, and depression. Additionally, emotional exhaustion can impair cognitive functioning and decision-making abilities, further exacerbating mental health symptoms and hindering overall well-being (Yang & Hayes, 2020). Therefore, recognizing and addressing emotional exhaustion as a key indicator of burnout is crucial for mitigating its detrimental effects on mental health. It also promotes resilience and recovery among individuals experiencing high levels of occupational stress.

Martínez-Líbano, Yeomans, Campusano and Flores (2021) emotional exhaustion and mental health. The purpose of the study was to ascertain whether emotional tiredness was present in

social science students during the COVID-19 epidemic, how severe it was, and whether it may have an impact on their mental health. A questionnaire including socio demographic information, the emotional exhaustion scale (ECE), and perceptions of the affectation of mental health was utilized in the descriptive and cross-sectional study design. According to the findings, a significant proportion of 90.2% stated that their mental health has gotten worse, exhibiting signs of stress (64.1%), sensitivity (41%), anxiety/distress (39.7%), irritability (39.4%), and depressive symptoms (34.9%). The pandemic (61.9%), social separation and confinement (47.3%), economic issues (41.6%), and the news (23.8%) were the causes that had an impact. Moreover, emotional fatigue was found to be high (65.7%), medium (29.2%), and low (5.1%). The current study measured emotional exhaustion using overwhelmed work, cynicism, physical depletion and irritability to address the conceptual gap.

Wu, Qi, Wei and Shaw (2023) investigated the connection between depressed symptoms and psychological disengagement from work, as well as the indirect effects of mental fatigue and the moderating effects of compassion for oneself. Based on the recovery–engagement–exhaustion model and emotion regulation theory, Wu and others study aimed to determine the moderating role of self-compassion in the relationship between emotional exhaustion and depressive symptoms as well as the indirect role of emotional exhaustion in the association between psychological detachment and depressive symptoms.

According to Wu, Qi, Wei and Shaw (2023) study relevant data were gathered from 727 university instructors via an online survey. Structural equation modeling was used to examine the indirect and moderating effects. Emotional tiredness was linked to psychological detachment and depression symptoms. The relationship between depressive symptoms and emotional exhaustion was mitigated by self-compassion. Compared to university professors with low levels of self-compassion, individuals with high levels of self-compassion showed a lower correlation between depressive symptoms and psychological exhaustion.

Through the identification of the psychological path and protective effect of self-compassion, Wu *et al.*, (2023) study advances our knowledge of the relationship between psychological detachment and depressive symptoms. In order to address the emotional strain that comes with employment, interventions aimed at enhancing mental health in the workplace should be created with psychological detachment and self-compassion in mind. Conceptual gap was also addressed by the current study since it examined the effect of physiological exhaustion on mental wellness instead of emotional exhaustion, mental detachment from symptoms and work.

In Germany, a research team led by Maria, Wolter, Gusy, Kleiber, and Renneberg (2020) investigated burnout among police officers, focusing on job rewards and health-oriented leadership. Analyzing data from 573 German police departments, the study found that high work effort was associated with increased burnout levels. However, job rewards and health-oriented leadership had minimal influence on the level of burnout. Therefore, while health-oriented leadership helped alleviate the impact of work effort on police officers' burnout, job rewards did not provide similar relief. The current study focused on emotional exhaustion, depersonalization and personal accomplishment rather than health-oriented leadership and job rewards.

In Mexico, a study conducted by García-Rivera *et al.* (2020) investigated burnout syndrome among police officers and its connection to physical activities and leisure pursuits. Using a cross-sectional design, the study targeted 276 police officers and utilized the Spanish Burnout Inventory and the Operational Police Stress questionnaires. The findings revealed a high prevalence of burnout and mental exhaustion among the police officers, with exercise showing a significant and positive correlation with lower burnout risk. Additionally, men exhibited a higher risk of burnout compared to women. These results underscore the importance of considering interventions and improving occupational health practices within the police force.

While the study focused on burnout prevalence and its association with mental exhaustion, it did not explore its impact on emotional exhaustion, depersonalization, and personal accomplishment in relation to mental health, which is the focus of the current study.

Oyekanmi (2021) conducted a study among police officers in Lagos, Nigeria, focusing on emotional exhaustion and its mental health consequences. Using the Job Demands-Resources Model (JD-R), the study found that high job demands, such as emotional exhaustion, were strongly linked to mental health issues like anxiety and depression. This research emphasizes the negative impact of job-related stress on officers' well-being. However, it predominantly focused on anxiety and depression, omitting the exploration of other dimensions of mental health, such as social or cognitive well-being, which the current study aims to address by including these broader mental health aspects in its investigation.

Similarly, Ntuli and Kaba (2023) investigated the impact of emotional exhaustion on mental health in South African healthcare workers. Grounded in the Conservation of Resources Theory (COR), the study examined how emotional exhaustion, driven by a depletion of resources, led to increased levels of depression and anxiety among healthcare professionals in Johannesburg. While the findings underscored the importance of managing job demands, the study was limited to healthcare workers, thus not accounting for the unique stressors faced by police officers. The current study aims to bridge this gap by exploring emotional exhaustion within the specific context of the Kenyan police force, considering both the unique stressors faced by police officers and the broader impacts of emotional exhaustion on their mental health.

Locally, in Kenya, Kimani and Mwangi (2022) explored emotional exhaustion among teachers in Nairobi, examining its relationship with anxiety and depression. Their study, based on the Transactional Model of Stress and Coping, found a strong connection between emotional exhaustion and poor mental health outcomes among teachers, particularly in relation to stress

and depression. However, the focus on teachers, who face different stressors compared to police officers, leaves a gap in understanding the mental health challenges faced by law enforcement personnel. The current study addressed this gap by focusing on Kenyan police officers, specifically in Starehe Sub-County, Nairobi, and considering the unique nature of their work environment and stressors.

Furthermore, Ndero, Kimamo, and Mwaura (2024) examined burnout and its effects on the mental health of Kenya Police Service officers. The study, grounded in the Spillover Theory, highlighted a significant relationship between emotional exhaustion and mental health issues such as stress and depression. While it provided valuable insights into the impact of burnout on police officers, it did not explore the broader dimensions of well-being, such as social and cognitive well-being. The current study extends this research by addressing the gap in understanding the full spectrum of mental health outcomes, including emotional, psychological, social, and cognitive aspects, among Kenyan police officers.

2.2.3 Relationship between Post-traumatic stress disorder (PTSD) and Mental Health among police officers

Post-traumatic stress disorder (PTSD) is a significant mental health issue that affects individuals who have been exposed to traumatic events, including law enforcement officers who frequently encounter high-stress and life-threatening situations (Omopo, 2024). The prevalence of PTSD among police officers is a critical area of study, as it influences their psychological well-being, job performance, and overall quality of life. PTSD is typically measured using validated diagnostic tools such as the Clinician Administered PTSD Scale (CAPS) and the Mini International Neuropsychiatric Interview (M.I.N.I.) (Du *et al.*, 2022). Empirical studies have explored the incidence and factors contributing to PTSD among law enforcement personnel, offering insights into its impact on mental health.

Ugwu and Idemudia (2024) conducted a systematic review and meta-analysis examining the relationships between burnout and PTSD among police officers. The study aimed to understand how changing job demands and societal expectations impact PTSD and burnout levels among officers. A systematic search was conducted across four databases—PubMed, PsycINFO, and CINAHL—using PRISMA guidelines. The study analyzed data from 10 studies comprising 4,572 police officers worldwide. Findings revealed that occupational pressures significantly contributed to burnout and PTSD, with high variability in their effects on officers' mental health and job performance. However, the study lacked specific contextual analysis regarding African or Kenyan police officers, limiting its applicability to local law enforcement. The current study seeks to address this gap by investigating PTSD and mental health among police officers in Starehe Sub-County, Nairobi, providing region-specific insights.

Isabirye, Namuli, and Kinyanda (2022) investigated the prevalence and factors associated with PTSD among field police patrol officers in the Kampala metropolitan area. The study employed a cross-sectional survey design with a sample of 392 officers. PTSD was diagnosed using the Clinician Administered PTSD Scale for DSM-5, while the M.I.N.I. was used to screen for psychiatric comorbidities. The findings showed that 7.4% of officers met the criteria for PTSD, while an additional 62.5% exhibited sub-threshold PTSD symptoms. Significant associations were found between PTSD and psychiatric comorbidities, including alcohol use disorder, major depressive episodes, and dissociative symptoms. While this study provided crucial insights into PTSD prevalence in a Sub-Saharan African context, it was limited to field patrol officers and did not explore PTSD among different ranks of police personnel. The present study aims to fill this gap by examining PTSD across various ranks in the police service in Starehe Sub-County.

In Kenya, Ndero, Kimamo, and Mwaura (2024) explored the relationship between internal support mechanisms and trauma among police officers. The study adopted a hermeneutic

phenomenology approach, analyzing academic publications, news articles, and case studies of Kenyan police officers involved in violent incidents such as assault, homicide, and suicide. Findings indicated that police officers in Kenya experience severe PTSD due to exposure to traumatic events. However, police culture and training emphasize repression, hardiness, and masculinity rather than trauma-informed coping mechanisms. The study highlighted that PTSD among Kenyan police officers often manifests in psychiatric disorders and violent behaviors, with suicide (90%), homicide (17%), and assault (14%) being prevalent. Despite these critical findings, the study relied heavily on secondary data and media reports rather than first-hand accounts from officers. The present study addressed this limitation by directly collecting primary data through structured questionnaires and interviews with police officers in Starehe Sub-County.

Akoth and Njiru (2023) investigated the prevalence and risk factors for PTSD among police officers in Nairobi County. The study employed a census approach with a sample of 250 male and female officers. PTSD prevalence was measured using a sociodemographic survey, and inferential statistics were used for analysis. Results indicated that 18.01% of officers had PTSD, with marital status being a significant risk factor (partial Eta squared value of 0.362). This study provided valuable insights into PTSD risk factors but did not comprehensively examine how PTSD affects overall mental health and work performance. The current study expanded on this by analyzing the broader impact of PTSD on police officers' psychological well-being and professional efficacy.

While the reviewed studies provide essential insights into PTSD prevalence among police officers, they exhibit notable gaps. Many focus on international contexts, limiting their applicability to Kenyan law enforcement. Others rely on secondary data or specific subsets of police officers, missing a holistic view of PTSD among different ranks. Additionally, few studies have explored the direct impact of PTSD on overall mental health and job performance.

The present study seeks to address these gaps by conducting a primary, cross-sectional investigation of PTSD and mental health among police officers in Starehe Sub-County. Through the use of both quantitative (questionnaires) and qualitative (interviews) data collection methods, this research provided a comprehensive understanding of PTSD prevalence, risk factors, and its broader implications on mental health within the Kenyan police force.

2.2.3 Relationship between Personal Accomplishment and Mental Health among Police Officers

Personal accomplishment, a core dimension of burnout, serves as a crucial indicator of individuals' perceived competence and efficacy in their professional roles. According to Levin, Roziner and Savaya, (2022), personal accomplishment reflects one's sense of achievement, fulfillment, and satisfaction derived from their work. When individuals experience diminished personal accomplishment because of burnout, it can profoundly impact their mental well-being. Feelings of inadequacy, self-doubt, and disillusionment may arise, leading to increased levels of stress, anxiety, and depression. A decline in personal accomplishment can contribute to a loss of motivation and engagement in work activities, further exacerbating burnout and mental health symptoms (Edú-Valsania, Laguía, & Moriano, 2022). Recognizing and addressing personal accomplishment as an indicator of burnout is essential for fostering resilience, promoting self-efficacy, and enhancing overall mental health and job satisfaction among individuals experiencing occupational stress. Interventions aimed at cultivating a supportive work environment, providing opportunities for skill development and recognition, and promoting work-life balance can help restore individuals' sense of achievement and fulfillment, thereby mitigating the damaging impacts of burnout on psychological well-being.

Makris, Alikari, Zyga, Tsironi, Patelarou, and Platis (2020) examined personal achievement among experts operating in a community mental health environment. In this study, professionals working in community mental health settings had their levels of personal accomplishment measured. They also wanted to know how these levels related to social support and psychological disorders, and if these conditions could influence an individual's level of personal accomplishment. This 2018 cross-sectional study involved 80 professionals from the Association for Regional Development and Mental Health working in community mental health settings. It used the Multidimensional Scale of Perceived Social Support, the General Health Questionnaire-28 (GHQ-28), and the subscale "Personal Accomplishment" of the Maslach Burnout Inventory. The measures were created to assess psychiatric problems, social support, and individual achievement, in that order. The method employed was convenience sampling. The results showed low levels of personal success. Social assistance and mental health problems did not statistically significantly affect personal performance among professionals working in community psychiatric settings. On the other hand, it was discovered that "Social Dysfunction"—a component of psychiatric disorders—had a statistically significant impact on personal success. Furthermore, weak relationships were found between the GHQ-28 dimensions of "Social Dysfunction" and "Severe Depression" and Personal Accomplishment. The current study was done in the context of police officers who face different issues with the healthcare workers.

Richards, Lux, and Woods (2017) investigate perceived mattering, resilience, and personal achievement as barriers to physical education. The objective of this research was to develop an in depth understanding of the variables that lessen physical educators' perceptions of marginalization and isolation. A conceptual model was created to represent the connections between the research variables. An online survey was utilized to gather data from 419 physical educators who were currently employed. Perceived mattering, resilience, self-actualization,

and marginalization and isolation were among the variables. Structural equation modeling was used in primary data analysis to verify the relationships in the proposed conceptual model.

The structural model, upon elimination of non-significant regression paths, provided overall confirmation of the study hypotheses. The current study adopted a linear regression model while analyzing the relationship between personal achievement and mental health.

Gong, Li, and Niu (2021) investigated the role of psychological empowerment in mitigating job burnout among police officers in China. Their study aimed to evaluate how psychological empowerment influences burnout from both a variable-centered and person-centered perspective. Drawing from 363 questionnaires completed by Chinese police officers, the findings suggest that higher levels of psychological empowerment are associated with decreased job burnout among this group. Using a person-centered approach, the study employed latent profile analysis to categorize police officers into three distinct job burnout profiles: low, moderate, and high. Officers experiencing high emotional exhaustion were more likely to fall into the high job burnout profile, while those with low depersonalization and reduced personal accomplishment tended to belong to the moderate and low job burnout profiles, respectively. The study also revealed that psychological empowerment can influence the different job burnout profiles experienced by police officers. The study evaluated emotional exhaustion, post-traumatic stress disorder (PTSD) and personal accomplishment level while evaluating level of burnout, however, the study did not examine mental health of the police officer which the current study examined.

Ndero, Kimamo & Mwaura (2024) investigated the psychological well-being and job satisfaction of Kenyan Police Officers, addressing concerns regarding high levels of suicide, homicide, assault, and intimate partner abuse among them. Through an extensive and systematic literature review utilizing search engines such as Google Scholar, Web of Science,

and Scopus, emerging patterns, findings, and conclusions were discerned from the gathered data. The findings highlighted that, statistics from the Kenya police service indicated a concerning number of police officers approximately 20,000 experiencing depression or various psychological disorders. Furthermore, between 2016 and 2020, there were an average of 13 murders and 11 suicides per year within the police ranks nationwide. The systematic literature review emphasized the importance of maintaining high psychological well-being among police officers to mitigate psychological morbidity in their line of work. This not only reduces turnover rates but also helps retain talent and enhances productivity. Additionally, it was found that high psychological well-being has positive effects on the happiness and well-being of work teams and families. Moreover, the analysis of literature highlighted that job satisfaction is a crucial aspect of psychological well-being in the workplace. The current study focused on personal accomplishment on not only psychological well-being but considered cognitive, emotional and social well-being of police officers in Kenya.

2.3. Summary and Research Gap

Conceptually, existing studies on police burnout, such as those by Bezie et al. (2024) and Mwasala et al. (2024), focus on measuring the prevalence and risk factors of burnout among police officers. However, they do not comprehensively explore how burnout could relate to mental health. This leaves a gap in understanding how chronic exposure to job-related stressors influences mental health holistically. Methodologically, most studies, including Bezie et al. (2024), relied on self-administered standardized burnout inventories, which may introduce response bias. The current study used a modified self-administered questionnaire. Additionally, studies like Mwasala et al. (2024) utilized cross-sectional designs, limiting the ability to determine causality between burnout and its contributing factors. The current study addressed these gaps by employing a mixed-methods approach, using both quantitative surveys and qualitative interviews to provide a more in-depth analysis of burnout experiences among police

officers. Geographically, burnout studies like those by Bezie et al. (2024) were conducted in Ethiopia, and Isabirye et al. (2022) in Uganda, limiting their applicability to Kenya. Contextually, while studies such as Mwasala et al. (2024) have explored burnout in Nairobi County, they have not specifically examined the unique work conditions in Starehe Sub-County, which has distinct crime patterns and operational challenges. The current study filled this gap by providing localized data on burnout prevalence among police officers in Starehe Sub-County, offering insights that can inform targeted interventions for stress management and mental health support.

Emotional exhaustion was measured using sensitivity, anxiety, irritability, and depression by Martínez-Líbano, Yeomans, Campusano and Flores (2021) leading to conceptual gap. The current study measured emotional exhaustion using overwhelmed work, cynicism, physical depletion and irritability to address this gap. Wu, Qi, Wei and Shaw (2023) did psychological detachment from work and depression in relation to emotional exhaustion creating conceptual gaps. The current study addressed this gap by focusing on emotional exhaustion in relation to mental health, emotional well-being, psychological well-being, social well-being and cognitive function. Maria, Wolter, Gussy, Kleiber, and Renneberg (2020) looked into job rewards and health-oriented leadership in their investigation of burnout among German police officers. Instead of health-oriented leadership and job rewards, the present study concentrated on emotional weariness, depersonalization, and personal accomplishment. In a different study, García-Rivera et al. (2020) looked into the relationship between burnout syndrome and physical activity and leisure interests among Mexican police personnel. The current study focuses on the relationship between burnout prevalence and mental weariness, but it did not examine the effects of burnout on emotional exhaustion, depersonalization, and personal accomplishment in connection to mental health.

Conceptually, prior studies have treated PTSD and burnout as distinct constructs rather than examining their interconnected effects on mental health. Ugwu and Idemudia (2024) highlight the impact of occupational pressures on both PTSD and burnout but do not explore how they interact to affect overall psychological well-being. Similarly, while Isabirye et al. (2022) assessed PTSD prevalence and associated comorbidities, they did not link these findings directly to long-term mental health deterioration. The current study bridged this conceptual gap by investigating PTSD and burnout in a unified framework, examining their combined impact on police officers' mental health. Methodologically, previous studies such as Ndero et al. (2024) relied on secondary data and case studies, which, while insightful, limit the generalizability of findings. The current study improved upon this by using primary data collection through structured questionnaires and interviews, ensuring a more robust and representative analysis. By concentrating on Starehe Sub-County, this study provided region-specific data that can guide localized policy recommendations and mental health support programs tailored for law enforcement personnel.

In personal achievement by Makris *et al.*, (2020) was examined on healthcare workers. The current study addressed the contextual gap by focusing on police officers. It examined the effect of personal achievement on mental health which was not examined by Makris *et al.*, (2020). Another study by Richards, Lux, and Woods (2017) used structural equation modeling to examine the relationship between perceiving mattering, resilience and personal achievement. To address this methodological gap, the current study focused on linear regression models that emphasized on the effect on personal achievement on mental health among police officers. Gong, Li, and Niu (2021) looked into how psychological empowerment helped Chinese police officers who were experiencing job burnout. The study assessed the degree of burnout by measuring emotional tiredness, depersonalization, and personal accomplishment; however, it did not look at police officers' mental health, which is what this study looked at. In order to

address concerns about the high rates of suicide, homicide, assault, and intimate partner abuse among Kenyan police officers, Ndero, Kimamo, and Mwaura (2024) looked into the psychological health and job satisfaction of these officers. In addition to psychological well-being, the current study took into account the social, emotional, and cognitive well-being of Kenyan police officers.

The existing literature highlights several gaps in understanding the relationship between burnout and mental health, particularly within the context of police officers. Conceptually, studies such as those by Martínez-Líbano et al. (2021) and Wu et al. (2023) explored emotional exhaustion but did not link it comprehensively to broader mental health aspects such as emotional, psychological, social, and cognitive well-being. Furthermore, studies like Makris et al. (2020) and Richards et al. (2017) investigated personal achievement in healthcare settings, yet they failed to assess its role in mental health among police officers. The current study addressed these gaps by analyzing burnout dimensions these are emotional exhaustion, post-traumatic stress disorder (PTSD), and personal accomplishment and their specific effects on mental health.

Methodologically, previous research, Richards et al. (2017), relied on systematic reviews and structural equation modeling, neglecting the collection of primary data or the use of regression models to examine burnout's impact. To address this, the current study utilized primary data collected through interviews and questionnaires and analyze it using both linear and multiple regression models to provide more robust insights.

Contextually, studies such as those by Maria et al. (2020) and García-Rivera et al. (2020) explored burnout among police officers in Germany and Mexico, respectively, without addressing the unique challenges faced by Kenyan police officers. This study focused on

Kenyan police officers in Starehe Sub-County, Nairobi, Kenya, addressing the contextual gap by exploring burnout's relationship to mental health within this specific population.

Moreover, past research, Gong et al. (2021), overlooked critical dimensions of well-being such as social, emotional, and cognitive well-being in their analysis of burnout and mental health. The current study incorporated these dimensions to provide a more comprehensive understanding of how burnout affects mental health, addressing not only psychological but also emotional and social aspects of well-being. This localized, holistic approach contributed valuable insights to the field and inform interventions for improving police officers' mental health.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter outlines the research methodology that was employed to achieve the study's objectives. It provides a detailed description of the research design, target population, sampling techniques, research instruments, data collection procedures, and data analysis methods. The methodology serves as a roadmap for systematically gathering, organizing, presenting, and analyzing data to ensure the reliability and validity of the findings. By employing appropriate research techniques, this chapter aims to facilitate an in-depth exploration of the relationship between burnout and mental health among Kenya Police Service officers in Starehe Sub County, Nairobi, Kenya.

3.2 Research Design

This study adopted a descriptive research design combined with a cross-sectional research design to examine the effect of burnout on the mental health of police officers in Starehe Sub-County, Nairobi, Kenya. A descriptive research design is appropriate as it allows for an in-depth exploration of the current state of burnout and its impact on mental health among police officers. This design enables the researcher to systematically describe the characteristics, behaviors, and conditions of the study population, providing detailed insights into the prevalence, patterns, and effects of burnout (Doyle et al., 2020). Through this design, the study captured a comprehensive picture of burnout among police officers and how it affects their mental health, offering valuable insights that may inform policy interventions.

The cross-sectional research design complemented the descriptive approach by allowing the researcher to collect data at a single point in time from a large and diverse population. This design is particularly useful when studying groups that experience dynamic and high-pressure work environments like police officers. A cross-sectional design is effective in identifying

associations between burnout and mental health variables without requiring long-term follow-ups (Wang & Cheng, 2020). Given the nature of police work—characterized by high-stress environments, exposure to traumatic events, and long working hours—this approach helped identify trends and relationships that may contribute to mental health challenges (Tajirian et al., 2020).

This study employed a mixed-method approach, integrating both quantitative and qualitative research methods. The mixed-method approach was deemed appropriate as it provides a more comprehensive understanding of the research problem by combining numerical data with in-depth qualitative insights. The quantitative component helped measure the prevalence of burnout and its effects on mental health, while the qualitative aspect provided deeper insights into the lived experiences of police officers dealing with burnout.

3.3 Research Site

The research was done among the Kenya Police Services employees in Starehe Sub County, Nairobi, Kenya. Starehe Sub-County is situated in the heart of Nairobi, Kenya's capital city. It is bordered by other prominent sub-counties such as Embakasi, Westlands, and Lang'ata.

Like many urban areas, Starehe faces challenges such as high crime rate, inadequate insecurity and traffic congestion. Efforts are continually made by local authorities and community organizations to address these challenges and improve the living conditions for residents.

Starehe Sub-County was selected for this study because it has 18 crime hotspots and 17 criminal gangs, resulting in a high workload for police officers (Gitonga & Soi, 2022). Additionally, the police officers are overworked since the desire ratio according to Kenya police report 2023 should be one police 450 citizens, however, currently one police officer is responsible for 1050 citizens. Therefore, Starehe Sub County being located at the Central

Business District that is densely populated, the police overwork due to the mentioned ratio above, which may affect their mental health.

3.4 Target Population

The study utilized five police Stations situated in Starehe Sub-County, Nairobi County which included Ruaraka, Pangani, Muthaiga, Huruma, Kariobangi, Korogocho and Lucker Summer police station. A target population of 174 police officers stationed in the seven police stations in Starehe sub-county was used. The target population was grouped into senior police officers and junior police officers. The police officers are target in this study because of high-stress nature of their work, which exposes them to burnout, emotional exhaustion, and post-traumatic stress disorder (PTSD). Starehe Sub-County, Nairobi, has been chosen due to its high crime rates, with 18 crime hotspots and 17 criminal gangs, leading to increased workload and psychological strain among officers (Gitonga & Soi, 2022).

Table 3.1:

Target Population

Police Stations	Senior Officers	Junior Officers	Total
Ruaraka	3	24	27
Pangani	3	23	26
Muthaiga	3	21	24
Huruma	3	22	25
Kariobangi	3	23	26
Korogocho	3	20	23
Lucky Summer	3	20	23
Total	21	153	174

3.5 Study Sample

A sample is a logical representative of the entire population. The study sampling procedure and sample size represented the study sample.

3.5.1 Study Sample size

A sample size is a scientific logical representation of the entire population. The sample was calculated using Yamane Tore formulae (Thompson & Lange, 2011). This was given as;

$$n = \frac{N}{1 + N(e)^2}$$

Whereas, N=174 and e=5%

$$n = \frac{174}{1 + 174(0.05)^2}$$

The sample size; n = 121 respondents.

Following the Yamane Tore formulae a sample of 121 respondents was scientifically acceptable since it was sufficient for collection of data from Starehe Sub-County from a population of 174 policies officers. The formulae is appropriate when the target population is large enough.

3.5.2 Sampling Procedure

Stratified sampling is a probability sampling technique that involves dividing a population into distinct subgroups or strata based on specific characteristics before randomly selecting participants from each stratum. This method ensures that each subgroup is adequately represented in the final sample, enhancing the accuracy and generalizability of the findings (Kumar, 2019). In this study, the stratified sampling technique was used to categorize police officers into two strata: senior officers and junior officers. A proportionate sampling method

was then applied to determine the number of participants from each stratum. Senior officers were sampled to be interviewed to capture their managerial perspective on burnout and mental health, while junior officers completed questionnaires to provide insight into their lived experiences. This approach enhances the reliability of the study by ensuring diverse perspectives within the Kenya Police Service are adequately represented. The sample framework is presented in Table 3.2.

Table 3.2:

Sample Framework

Police Stations	Senior Officers		Junior Officers		Total	
	N	N	N	n	N	n
Ruaraka	3	2	24	17	27	19
Pangani	3	2	23	16	26	18
Muthaiga	3	2	21	17	24	19
Huruma	3	2	22	15	25	17
Kariobangi	3	2	23	16	26	18
Korogocho	3	2	20	13	23	15
Lukcy Summer	3	2	20	13	23	15
Total	21	14	153	107	174	121

Source: Modified from Starehe Sub-County Police Post (2023)

3.6 Data Collection

Data was collected using appropriate data collection instruments. However, before their adoption, a pre-test was conducted to test the instruments' validity and reliability, ensuring their effectiveness and accuracy for the study.

3.6.1 Data Collection Instrument

This study utilized both questionnaires and interview schedules as data collection instruments to gather comprehensive information on burnout and mental health among police officers in Starehe Sub-County. The use of these instruments is intended to capture both quantitative and qualitative data, ensuring a well-rounded analysis of the research problem. The structured questionnaire was the primary instrument for collecting quantitative data from 107 junior police officers. The questionnaire contained closed-ended questions designed to measure key variables such as burnout and mental health using a standardized format. It was divided into three main sections: Section A (Demographic Information), Section B (Burnout), and Section C (Mental Health). Section B was further divided into three parts: Emotional Exhaustion, Post-Traumatic Stress Disorder (PTSD), and Personal Accomplishment. The questionnaire used a Likert scale to assess various burnout and mental health indicators, allowing respondents to express their levels of agreement or frequency of experiences. This method is effective in gathering large-scale, structured, and comparable data that can be analyzed statistically.

Interview guide which consisted of unstructured questionnaires was used in guiding the interviews. The interview guides were given to 14 senior police officers from the police station. The unstructured question was separated where section A contains questions on emotional exhaustion, section B consists of post-traumatic stress disorder (PTSD) questions, section C had personal accomplishment and section E contained mental health questions. An open-ended interview schedule was adopted to provide in-depth comprehension of the burnout aspect representing post-traumatic stress disorder (PTSD), emotional exhaustion, personal accomplishment in relation to the mental health of police officers. This was analyzed using content analysis of themes existing from the respondents.

3.6.2 Pretesting Testing of Research Instruments

A pretest technique is a preliminary assessment conducted before the main study to evaluate the effectiveness, clarity, and reliability of the research instruments. It helps identify potential weaknesses in the questionnaire, such as ambiguous wording, unclear instructions, or response bias, ensuring that the final data collection process is both valid and reliable (Mugenda & Mugenda, 2003).

In this study, a pretest involving 17 questionnaires, representing 10% of the sample size, was conducted in Makadara Sub-County, which shares similar characteristics with Starehe Sub-County. This allowed for the refinement of the research tools to enhance their accuracy and effectiveness in capturing data related to burnout and mental health among police officers. The feedback from the pretest was used to make necessary adjustments to the questionnaire before administering it to the actual study population.

3.6.3 Reliability of Research Instrument

Reliability in research is generally the consistency and stability of measurement over time, across different observers, or under different conditions (Ahmed & Ishtiaq, 2021). Essentially, it addresses the question of whether a measurement instrument produces consistent results when administered multiple times or by different people. A reliable measurement instrument produces similar results on repeated administrations, indicating that the observed scores accurately reflect the true scores of the individuals being measured.

A social science statistical software was used to evaluate the pretested research questionnaires. The Cronbach's Alpha coefficient was used to gauge the dependability. Cronbach's Alpha is an indicator of how closely similar items in a measuring tool reflect the same underlying concept. A statistical measure of internal consistency. 0.7 and above was considered the trustworthy threshold.

3.6.4 Instrument Validity

Validity in research refers to the extent to which an instrument or measure accurately assesses the construct or concept it is intended to measure (Sürücü & Maslakci, 2020). It is crucial to ensure that research findings are based on valid data, as invalid measures can lead to inaccurate conclusions and interpretations. There are several types of validity, including content validity, criterion validity, and face validity, each assessing different aspects of the measurement process. The study examined all these validity test to ensure an accurate instrument is obtained.

Content validity refers to the degree to which the items in a measurement instrument adequately represent the full range of the construct being measured. To measure content validity, researchers typically use qualitative methods such as expert judgment or content analysis. Expert judgment from the study supervisors who are experts in the field was used in the study to assess whether the items in the instrument cover all relevant aspects of the construct. Construct validity was ensured by systematically analyzing the content of the items to ensure they align with the study objectives and theoretical definition of the construct.

Criterion validity assesses the extent to which scores on a measure correlate with scores on an external criterion that is theoretically related to the construct being measured. There are two types of criterion validity: concurrent validity and predictive validity. To measure criterion validity, the researcher typically used correlational analyses to examine the strength and direction of the relationship between the scores on the measure and the scores on the criterion measure.

Face validity refers to the extent to which a measurement instrument appears to measure what it is intended to measure based on its face value. Face validity is often assessed subjectively by asking individuals who are unfamiliar with the instrument to review it and provide feedback on whether it seems to measure the intended construct. While face validity is not a strong

indicator of validity on its own, it can help enhance the credibility and acceptability of the instrument among participants and stakeholders. To measure face validity, researchers sought feedback from the pretest participants.

3.6.5 Data Collection Procedures

The researcher obtained approval from the African Nazarene University Board of Post Graduate Study. The university authority for data collection letter gave authority to collect data and assist the researcher to obtain necessary permits from the National Commission of Science, Technology and Innovations. The respondents used the authorization permits which include NACOSTI and Letter from the University with opening letters and questionnaires as key collection documents. Consent was acquired from the respondents. The data was collected from each police station in Starehe where all the officers participated in the study. The researcher dropped and picked questionnaires by the researcher after the respondents had filled them to give time for the officers to respond to questions. The collected data was ready for data analysis and presentation. Data was secured to ensure privacy and confidentiality to avoid unauthorized access through the use of passwords.

3.7 Data Analysis and Presentation

Collected data was screened, organized and entered into the statistical package of social sciences (SPSS version 27.0). The qualitative data was analyzed using content analysis. The quantitative data was analyzed using descriptive statistics that is. frequencies, percentage, mean and standard deviations. Inferential statistics was adopted, simple linear regression model 1 and multiple linear regression model to test the study hypotheses. The data was presented using tables and charts. The model was as follows.

$$Y = \beta_0 + \beta_i X_i + e \quad \text{----- model 1}$$

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + e \text{ ----- model 2}$$

Where;

Y	= Mental Health
β_0	= Constant Term
$\beta_1, \beta_2, \beta_3, \beta_4$	= Beta coefficients
X_1	= Emotional Exhaustion
X_2	= Post-traumatic stress disorder (PTSD)
X_3	= Personal Accomplishment
X_i	= Burnout variable (i = 1, 2, 3 ,4)
e	= Error Term

The hypothesis was tested using the simple linear regression beta coefficient based on a 5% significance level where a significant value less than 5% led to rejection of the following null hypothesis. Otherwise, the alternative was rejected if the significant value was more than 5%. The multiple linear regression was adopted to evaluate the general influence of burnout to mental health.

3.8 Legal and Ethical Considerations

A letter from ANU was obtained which was used to apply for a NACOSTI permit. Letter from the County Director of Education and County Commission Office was obtained to facilitate the collection process. The Officers Commanding Police Stations (OCS) and the Officer in Charge of the Police District (OCPD) was informed before collecting the information from the police stations. This ensured that legal requirements were achieved before starting the data collection.

Additionally, researchers prioritized participants' confidentiality and privacy, safeguarding their personal information and ensuring anonymity in reporting findings to prevent potential

harm or stigma. The collection process also required consent from the respondents and assurance that the information was used for academic purposes.

Moreover, ethics required transparency and honesty in all aspects of the research process. The researcher accurately represented their credentials, affiliations, and intentions, and must honestly report their findings, including any limitations or conflicts of interest. This ensured that correct data and results are reported to assist in the entire process.

CHAPTER FOUR

RESULTS AND DISCUSSIONS

4.1 Introduction

The study aimed to investigate the impact of burnout specifically emotional exhaustion, post-traumatic stress disorder (PTSD), and the sense of diminished personal accomplishment, all of which are exacerbated by the demanding nature of police work. The study's primary focus was on understanding how these aspects of burnout affect officers' mental health and to what extent this influences their overall well-being and performance in their roles. Data was collected from a sample of officers in Starehe Sub County, an area known for its high crime rates and complex law enforcement challenges. The questionnaires data formed the quantitative data while the interview questions produced qualitative data. The quantitative data were then integrated with qualitative data to come up with solid evidence of whether Kenya Police Officers face burnouts during their duties and its impact on their mental health. This section of the report presents the response rate and demographic information of the respondents. It also entails results from both quantitative and qualitative based on the study objectives.

4.2 Response Rate

The response rate from a sample of 121 respondents comprising 107 junior police officers given questionnaire and 14 senior officers given interview schedules was shown in Table 4.1.

Table 4.1:

Response Rate

Details	Questionnaires	% Rate	Interview	% Rate
Responded	101	94.4%	12	85.7%
Not Responded	6	5.6%	2	14.3%
Total	107	100%	14	100%

The response rate for the study was high, with 101 out of 107 distributed questionnaires returned fully completed, resulting in a 94.4% response rate. This indicates a strong level of engagement and interest from the respondents. Additionally, the study involved interviews with senior officers, achieving an 85.7% response rate as 12 out of the 14 intended senior officers participated in the interviews. Both the questionnaires and interviews were sufficient enough for data analysis since they exceeded 80% recommended by Mugenda and Mugenda (2003) as excellent for further data analysis. The high response rates are indicative of the relevance and importance of the study to the participants, suggesting that police officers are keen to discuss issues related to their mental health and the challenges they face in their professional roles.

4.3 Socio-demographic Information

The demographic data collected from the respondents provides insights into the characteristics of the police officers who participated in the study. The study examined the gender, age, highest education level, duration of working as police officers and rank of the Kenya Police Service.

Table 4.2:

Gender Demographics

	Frequency	Percentage
Male	54	53.5%
Female	47	46.5%

Table 4.2 presents the gender breakdown of the respondents. The majority of the officers were male (53.5%), while 46.5% were female. This relatively balanced gender distribution is essential in understanding if burnout and mental health issues affect both genders equally or if there are any gender-specific challenges within the police force.

Table 4.3:*Age Distribution*

	Frequency	Percentage
20-29 years	23	22.8%
30-39 years	54	53.5%
40-49 years	23	22.8%
50-59 years	1	1.0%

The age distribution (Table 4.3) reveals that 53.5% of the respondents were between 30 and 39 years old, making up 53.5% of the sample. This is followed by the 20-29 years and 40-49 years' age groups, each comprising 22.8%. A small proportion of respondents (1%) were in the 50-59 years' category. This age distribution suggests that a majority of the officers are in the early to mid-career stages of their service, which aligns with the high levels of stress and potential burnout seen in this age range due to the demanding nature of their roles.

Table 4.4:*Highest Education Level*

	Frequency	Percentage
Secondary	55	54.5%
Certificate	36	35.6%
Diploma	4	4.0%
Undergraduate	3	3.0%
Postgraduate	3	3.0%

Table 4.4 shows the education levels of the officers. The 54.5% of respondents had completed secondary school, followed by those with a certificate (35.6%). A smaller proportion of respondents had a diploma (4.0%), an undergraduate degree (3.0%), or a postgraduate degree (3.0%). This indicates that the police force in the study area consists primarily of officers with

a secondary education or vocational qualifications, which may affect their perceptions of job-related stress and their ability to access mental health support.

Table 4.5:

Working Duration

	Frequency	Percentage
Less than 1 years	19	18.8%
2-4 years	26	25.7%
5-7 years	35	34.7%
8-10 years	20	19.8%
Above 10 years	1	1.0%

As presented in Table 4.5, the 34.7% of the respondents had been in service for 5-7 years, followed by those who had served between 2-4 years (25.7%) and less than one year (18.8%). A small proportion of respondents had been in the service for more than 10 years (1.0%). This service duration distribution shows that many officers are relatively experienced, which could suggest that burnout and mental health issues may accumulate over time due to prolonged exposure to the stresses of policing.

Table 4.6:

Rank in Kenya Police Service

	Frequency	Percentage
Police Constable	23	22.8%
Corporal	42	41.6%
Sergeant	26	25.7%
Senior Sergeant	6	5.9%
Inspector	4	4.0%

Table 4.6 shows that the 41.6% of respondents held the rank of Corporal, followed by Police Constables (22.8%) and Sergeants (25.7%). Fewer respondents were ranked as Senior Sergeant

(5.9%) or Inspector (4.0%). This ranking distribution reflects the hierarchical structure of the Kenya Police Service, and it may provide insights into how burnout and mental health issues differ across ranks and levels of responsibility.

The demographic profile provides a clear understanding of the sample population, which is crucial for interpreting the results of the study in relation to burnout and mental health among Kenya Police Service officers in Starehe Sub County, Nairobi. The following sections of the report will discuss the findings on the prevalence of burnout, emotional exhaustion, PTSD, and personal accomplishment, as well as their effects on the mental health of the officers.

4.4 Prevalence of Burnout

The first objective of this study was to determine the prevalence of burnout among the Kenya Police Service Officers in Starehe Sub County, Nairobi, Kenya. Burnout was operationalized through three dimensions: Emotional Exhaustion (EE), Post-Traumatic Stress Disorder (PTSD or PT), and Personal Accomplishment (PA) on Mental Health (MH). This was measured using a five point Likert scale that produced a mean that was converted to prevalence rate.

Table 4.7:

Prevalence of Burnout

Burnout Dimension		N	Minimum	Maximum	Mean	Std. Deviation	Prevalence
Emotional Exhaustion (EE)	EE	101	3.20	4.80	4.1525	.49812	83.5%
Post-Traumatic Stress (PT)	PT	101	1.80	4.60	3.5010	.93878	70.0%
Personal Accomplishment (PA)	PA	101	3.00	4.80	4.1564	.52506	83.1%
Mental Health (MH)	MH	101	2.75	4.75	3.8688	.62209	77.4%

The findings of the first objective reveal a significant prevalence of burnout among Kenya Police Service officers stationed in Starehe Sub County, Nairobi. Emotional exhaustion recorded the highest prevalence at 83.5%, with a mean score of 4.15 (on a 5-point scale),

indicating that most officers frequently experience extreme mental fatigue and a depletion of emotional resources. This suggests that the demanding nature of police work in a high-crime area such as Starehe, which is characterized by multiple crime hotspots and active criminal gangs, is taking a toll on officers' psychological stamina. Similarly, the dimension of personal accomplishment showed a high prevalence of 83.1% with a mean score of 4.16, suggesting that many officers feel a lack of recognition or achievement in their work, which contributes to feelings of ineffectiveness and low morale—an integral component of burnout.

Post-Traumatic Stress Disorder (PTSD) also presented a notable prevalence of 70.0% with a mean score of 3.50, pointing to considerable exposure to trauma and its lingering psychological impacts. These may include symptoms such as emotional numbness, hypervigilance, and distressing recollections of traumatic events encountered in the line of duty. The mental health had mean of 3.87 with an overall burnout-related prevalence of 77.4%, reflecting a high level of mental health strain among the respondents. These results indicate that burnout is not only prevalent but also significantly impacting the mental well-being of police officers in this area.

Overall, the study findings confirm that burnout is a pervasive issue within the Kenya Police Service in Starehe Sub County. The high levels of emotional exhaustion, trauma, and diminished sense of personal achievement underscore the urgent need for institutional reforms focused on psychological support, employee recognition, and stress-reduction strategies. Consequently, the null hypothesis that there is no significant prevalence of burnout among Kenya Police Service officers is rejected.

4.5 Emotional Exhaustion and Mental Health

The second objective of the study sought to assess the effect of emotional exhaustion on the mental health of Kenya Police Service officers in Starehe Sub County, Nairobi.

Table 4.8:*Emotional Exhaustion*

Emotional Exhaustion	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Mean	Standard Deviation
	1	2	3	4	5		
E1. I am overwhelmed with work requiring overtime, leading to overworking.	0(0.0%)	0(0.0%)	0(0.0%)	49(48.5%)	52(51.5%)	4.51	.502
E2. Emotional exhaustion has led to self-doubt (cynicism) and inability to conduct my duties.	0(0.0%)	16(15.8%)	37(36.6%)	42(41.6%)	6(5.9%)	3.38	.823
E3. I am physically and emotionally depleted leading to low employee performance.	0(0.0%)	0(0.0%)	8(7.9%)	47(46.5%)	46(45.5%)	4.38	.630
E4. I am short-tempered and irritable due to emotional exhaustion.	0(0.0%)	0(0.0%)	35(34.7%)	59(58.4%)	7(6.9%)	3.72	.585
E5. Physical tiredness increases emotional exhaustion among the police officers.	0(0.0%)	0(0.0%)	0(0.0%)	23(22.8%)	78(77.2%)	4.77	.421

The descriptive results presented in Table 4.8 indicate that emotional exhaustion is a significant concern among the officers. A substantial proportion of respondents (48.5% agreed and 51.5% strongly agreed) reported being overwhelmed with work and working overtime, resulting in overworking, with a very high mean of 4.51 and a low standard deviation of 0.502. Moreover, 92% of respondents either agreed or strongly agreed that they were physically and emotionally depleted, leading to poor performance (mean = 4.38).

A combined 87.2% also indicated that physical tiredness significantly contributed to emotional exhaustion (mean = 4.77). These results confirm that many police officers are subjected to heavy workloads and physical strain, which likely compromises their mental well-being.

However, perceptions about emotional exhaustion causing self-doubt and cynicism were mixed, with only 47.5% respondents agreeing or strongly agreeing (mean = 3.38), suggesting some officers may maintain a degree of psychological resilience.

To test the second hypothesis; H_{02} : There is no significant effect of emotional exhaustion on the mental health of Kenya Police Service officers, a simple linear regression analysis was conducted where beta coefficient significant values were used to test the hypothesis.

Table 4.9:

Emotional Exhaustion Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.791 ^a	.626	.622	.38227

a. Predictors: (Constant), EE

The results, summarized in Tables 4.9 to 4.11, provide strong evidence against the null hypothesis. The model yielded a high R value of 0.791, and an R Square of 0.626, indicating that emotional exhaustion accounts for approximately 62.6% of the variance in mental health scores among the officers.

Table 4.10:

Emotional Exhaustion ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	24.232	1	24.232	165.823	.000 ^b
	Residual	14.467	99	.146		
	Total	38.699	100			

a. Dependent Variable: MH

b. Predictors: (Constant), EE

ANOVA results further support the model's significance ($F = 165.823$, $p < 0.001$), confirming that the regression model is statistically significant.

Table 4.11:*Emotional Exhaustion Coefficients*

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1 (Constant)	-.235	.321		-.732	.466
EE	.988	.077	.791	12.877	.000

a. Dependent Variable: MH

Most notably, the regression coefficient for emotional exhaustion ($B = 0.988$, $p < 0.001$) implied a strong positive relationship suggesting that as emotional exhaustion increases, mental health deteriorates significantly.

These findings lead to the rejection of the null hypothesis (H_0), confirming that emotional exhaustion has a statistically significant and negative effect on the mental health of police officers in the study area. This highlights the need for strategic interventions to reduce emotional strain in policing roles through counseling services, mental health support, workload management, and stress reduction programs. The results align with existing literature that links occupational burnout, especially emotional exhaustion, with declining psychological health among law enforcement personnel.

The interview results were thematically analyzed and when asked whether junior officers exhibited signs of lack of self-confidence, irritability, and cynicism, most senior officers observed such behaviors, though to varying degrees.

Senior Officer 3 noted,

“Yes, there are days some of the junior officers second-guess their decisions, especially after high-stress field operations.” Senior Officer 7 highlighted, *“You can see the irritability in how they interact with each other quick to anger and easily frustrated.”*

However, some officers, like Senior Officer 9, observed that

“While irritability is common, not all officers show cynicism; a few remain optimistic despite the pressure.”

This mirrors the questionnaire results, where only 47.5% of respondents agreed or strongly agreed that emotional exhaustion led to self-doubt and cynicism (mean = 3.38). The mixed responses in the interviews underscore the variability in psychological resilience among the officers.

In responding to what could be causing emotional exhaustion, several dominant themes emerged: work overload, exposure to trauma, poor work-life balance, and lack of recognition. Senior Officer 1 explained,

“Officers work for long hours without adequate rest or rotation. This is the main reason they burn out.”

Senior Officer 5 added,

“They witness traumatic events almost daily, and without proper debriefing, this builds up emotionally.”

Others like Senior Officer 10 pointed to organizational factors:

“There’s minimal appreciation for their efforts. It makes them feel like machines, just doing work with no morale.”

These narratives directly support the descriptive statistics from the questionnaire, where 100% of respondents agreed or strongly agreed they were overworked (mean = 4.51), and 92% felt physically and emotionally depleted (mean = 4.38).

On whether the nature of work leads to physical depletion, all the senior officers concurred. Senior Officer 6 stated emphatically,

“Absolutely. The shifts are long, and often officers are out on patrols with little time to rest or eat properly.”

Senior Officer 11 remarked,

“It’s not just standing for long hours; sometimes they respond to emergencies back-to-back. The physical toll is real.”

This aligns with the high percentage (87.2%) from the survey who reported physical tiredness as a major contributor to emotional exhaustion, with an exceptionally high mean of 4.77. The interviews reinforce the perception that physical exhaustion is a daily reality for most junior officers.

When asked whether junior officers feel overwhelmed by their work, there was consensus among the interviewees.

Senior Officer 2 shared,

“Yes, especially when they have multiple duties and little supervision. You’ll find one officer handling three tasks at once.”

Senior Officer 8 added,

“They are overwhelmed because the police-to-population ratio is too low. One officer might serve three wards impossible to cope.”

These sentiments match the survey result where a significant portion of respondents reported being overwhelmed with work and working overtime. The statistical finding of a mean score of 4.51 confirms that work overwhelm is a serious concern.

4.6 Post-traumatic stress disorder (PTSD) and Mental Health

The third objective of the study aimed to determine the effect of Post-Traumatic Stress Disorder (PTSD) on the mental health of Kenya Police Service officers in Starehe Sub County, Nairobi.

The results were presented in Table 4.12.

Table 4.12:

Post-traumatic stress disorder

Post-traumatic stress disorder (PTSD)	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Mean	Standard Deviation
	1	2	3	4	5		
PT1. I sometimes avoid people because of the stress that affect me.	8(7.9%)	16(15.8%)	21(20.8%)	35(34.7%)	21(20.8%)	3.45	1.212
PT2. I sometimes feel emotional detachment due to the nature of our work.	8(7.9%)	24(23.8%)	17(16.8%)	27(26.7%)	25(24.8%)	3.37	1.302
PT3. Trauma due to violence, handling death bodies and other work have led to detachment from friends and family.	0(0.0%)	0(0.0%)	35(34.7%)	31(30.7%)	35(34.7%)	4.00	.837
PT4. I am sometimes disconnected with our family, friends and environment.	0(0.0%)	24(23.8%)	19(18.8%)	58(57.4%)	0(0.0%)	3.34	.840
PT5. Burnout has affected my personality and sometimes I feel odd from other people.	0(0.0%)	24(23.8%)	27(26.7%)	40(39.6%)	10(9.9%)	3.36	.955

Descriptive results from Table 4.12 indicate that officers experience significant PTSD symptoms. The item with the highest mean score (4.00) was “Trauma due to violence, handling dead bodies and other work have led to detachment from friends and family,” showing that many officers agree or strongly agree with this statement. Similarly, notable proportions of

respondents agreed or strongly agreed that stress has led them to avoid people (mean = 3.45), feel emotionally detached (mean = 3.37), and feel disconnected from their environment (mean = 3.34). These findings suggest that PTSD symptoms are prevalent and are affecting the psychological and social functioning of the officers.

Inferential statistics provided strong evidence of the significant impact of PTSD on mental health.

Table 4.13:

Post-Traumatic Stress Disorder Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.875 ^a	.765	.763	.30291

a. Predictors: (Constant), PT

As shown in Table 4.13, the regression model yielded a high R value of 0.875 and an R-squared of 0.765, meaning that 76.5% of the variation in mental health scores could be explained by PTSD symptoms.

Table 4.14:

Post-Traumatic Stress Disorder ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	29.615	1	29.615	322.759	.000 ^b
	Residual	9.084	99	.092		
	Total	38.699	100			

a. Dependent Variable: MH

b. Predictors: (Constant), PT

This is further supported by the ANOVA results in Table 4.14, which showed a highly significant F-statistic ($F = 322.759$, $p < 0.001$), indicating that the regression model is statistically reliable.

Table 4.15:*Post-Traumatic Stress Disorder Coefficients*

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1 (Constant)	1.839	.117		15.732	.000
PT	.580	.032	.875	17.965	.000

a. Dependent Variable: MH

Table 4.15 revealed a significant positive coefficient for PTSD ($\beta = 0.580$, $t = 17.965$, $p < 0.001$), implying that increases in PTSD symptoms are associated with a decline in mental health. Based on these results, the null hypothesis (H03), which stated that there is no significant effect of PTSD on the mental health of the officers, is rejected. The study concludes that PTSD has a strong and statistically significant negative impact on mental health among Kenya Police Service officers in Starehe Sub County. These findings underscore the need for targeted mental health interventions, trauma counseling, and stress management programs within the police force to mitigate the psychological burden caused by the nature of their work.

Most senior officers interviewed reported that junior officers frequently exhibit behaviors indicative of avoidance, a core symptom of post-traumatic stress disorder.

Senior Officer 2 noted,

“Some officers deliberately avoid social gatherings or even meetings with peers. They prefer isolation, especially after a distressing incident.”

Senior Officer 7 added,

“They often request redeployment from areas where traumatic experiences occurred, especially if it involved fatalities or violence.”

These findings align with the descriptive statistics in Table 4.11, where officers reported a mean score of 3.45 for the item related to avoiding people due to stress. This suggests that a

considerable number of officers are actively withdrawing from social interactions as a coping mechanism.

Another strong theme that emerged from the interviews was emotional detachment and psychological disconnection, which were frequently observed by senior officers.

Senior Officer 4 explained,

“Some officers lose touch with their emotions, they rarely express joy or sadness. It’s like they’re emotionally shut down.”

Similarly, Senior Officer 10 recounted,

“After handling gruesome scenes like road accidents or riots, some officers seem numb. They don’t talk much and become withdrawn from their families.”

These perspectives reflect the quantitative data, where respondents indicated agreement or strong agreement with statements such as feeling emotionally detached (mean = 3.37) and disconnected from the environment (mean = 3.34). The repeated reference to disconnection in both data sets illustrates the depth of psychological strain experienced by officers.

All senior officers interviewed acknowledged that cases of post-traumatic stress disorder are either present or strongly suspected among their teams.

Senior Officer 6 remarked,

“It’s clear in how some officers react to triggers loud noises, crowds, or certain locations. They become visibly agitated or freeze.”

Senior Officer 11 confirmed,

“We’ve had several referrals for counseling, and the diagnosis often points to PTSD. The problem is underreported because most officers fear the stigma.”

These accounts are directly supported by the findings from inferential statistics, where PTSD was shown to have a strong and significant impact on mental health. Specifically, the regression

analysis yielded an R value of 0.875 and an R-squared of 0.765, indicating that 76.5% of the variation in mental health scores could be explained by PTSD symptoms.

Moreover, the coefficient for PTSD ($\beta = 0.580$, $p < 0.001$) confirms a strong positive association between PTSD and declining mental health, while the ANOVA results ($F = 322.759$, $p < 0.001$) confirmed the model's statistical reliability. This statistical confirmation supports the widespread qualitative consensus from the interviews: PTSD is both real and rampant within the ranks of the Kenya Police Service in this region.

4.7 Personal Accomplishment and Mental Health

The fourth objective of the study was to assess the effect of Personal Accomplishment on the mental health of Kenya Police Service officers working in Starehe Sub County, Nairobi.

Table 4.16:

Personal Accomplishment

Personal Accomplishment	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Mean	Standard Deviation
	1	2	3	4	5		
PA1. My work demands too much resulting in low personal goal attainment.	0(0.0%)	0(0.0%)	0(0.0%)	41(40.6%)	60(59.4%)	4.59	.494
PA2. I have low skill development due to demanding work at our stations.	0(0.0%)	0(0.0%)	8(7.9%)	45(44.6%)	48(47.5%)	4.40	.634
PA3. The society and senior officers rarely recognize our effort and risk that we take in our duties.	0(0.0%)	8(7.9%)	22(21.8%)	49(48.5%)	22(21.8%)	3.84	.857
PA4. I have a hostile work relationship with my senior officers based on high demand for work.	0(0.0%)	8(7.9%)	38(37.6%)	46(45.5%)	9(8.9%)	3.55	.768

Personal Accomplishment	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Mean	Standard Deviation
	1	2	3	4	5		
PA5. I am not able to accomplish a lot in our work.	0(0.0%)	0(0.0%)	8(7.9%)	45(44.6%)	48(47.5%)	4.40	.634

Descriptive statistics in Table 4.16 highlight that a significant proportion of officers reported challenges related to personal accomplishment. The highest-rated items were “My work demands too much resulting in low personal goal attainment” (mean = 4.59, SD = .494) and “I am not able to accomplish a lot in our work” (mean = 4.40, SD = .634), with a combined 100% agreement or strong agreement. These results indicate that officers experience a diminished sense of achievement due to overwhelming work demands, which is a critical indicator of burnout. Additional items such as low skill development (mean = 4.40), lack of societal and institutional recognition (mean = 3.84), and strained relationships with senior officers (mean = 3.55) further reinforce the sentiment of reduced personal accomplishment among officers. Inferential analysis also revealed a statistically significant relationship between personal accomplishment and mental health.

Table 4.17:

Personal Accomplishment Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.740 ^a	.548	.543	.42048

a. Predictors: (Constant), PA

The regression model (Table 4.17) showed an R value of 0.740 and an R-squared of 0.548, indicating that approximately 54.8% of the variation in mental health scores could be explained by personal accomplishment levels.

Table 4.18:*Personal Accomplishment ANOVA*

Model	Sum of Squares	df	Mean Square	F	Sig.
1 Regression	21.195	1	21.195	119.880	.000 ^b
Residual	17.504	99	.177		
Total	38.699	100			

a. Dependent Variable: MH

b. Predictors: (Constant), PA

The ANOVA results in Table 4.18 confirm the model's significance, with a high F-statistic ($F = 119.880$) and a p-value of less than 0.001, demonstrating that the relationship between personal accomplishment and mental health is statistically meaningful.

Table 4.19:*Personal Accomplishment Coefficients*

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1 (Constant)	.224	.335		.669	.505
PA	.877	.080	.740	10.949	.000

a. Dependent Variable: MH

Further, the coefficients table (Table 4.19) showed a strong, significant positive relationship ($\beta = 0.877$, $t = 10.949$, $p < 0.001$), suggesting that improvements in personal accomplishment are associated with better mental health outcomes. The fourth Hypothesis H_{04} , which stated that there is no significant effect of personal accomplishment on the mental health of Kenya Police Service officers, is rejected. The study concludes that reduced personal accomplishment significantly and negatively affects the mental health of police officers. This calls for institutional reforms aimed at recognizing and supporting officers' efforts, reducing overwhelming work pressure, and enhancing career development opportunities to foster a greater sense of achievement and psychological well-being.

A predominant theme that emerged from the interviews was that most officers are struggling to meet their personal and professional goals due to the intensity and demands of police work. Senior Officer 3 shared,

“We have very capable officers, but many are overwhelmed with duties. They work long hours, often at the expense of their personal goals.”

Similarly, Senior Officer 9 explained,

“It’s hard for them to pursue further education or even spend time with family. Their schedules leave little room for personal development.”

This narrative directly corresponds with descriptive statistics from Table 4.15, where the item *“My work demands too much resulting in low personal goal attainment”* had a mean score of 4.59, reflecting unanimous agreement. Another item, *“I am not able to accomplish a lot in our work,”* scored a mean of 4.40, indicating a consistent sense of unfulfilled accomplishment.

These findings collectively point to a widespread experience of burnout and demotivation, which the inferential statistics further support. The regression analysis (Table 4.16) showed an R value of 0.740 and an R-squared of 0.548, meaning that 54.8% of the variation in mental health could be explained by the officers’ levels of personal accomplishment.

When asked about recognizing effort and developing skills, several senior officers acknowledged that there is inadequate institutional recognition, though some informal practices exist.

Senior Officer 5 noted,

“We try to appreciate good performance during parades or meetings, but formal rewards are rare. Promotions are slow and often not linked to performance.”

Senior Officer 8 added,

“Training opportunities are limited, and when available, they are often reserved for a few selected individuals.”

This sentiment aligns with the questionnaire data: low skill development had a mean of 4.40, and lack of societal and institutional recognition had a mean of 3.84, indicating dissatisfaction in both areas.

The regression coefficients table (Table 4.19) shows a strong and significant positive relationship ($\beta = 0.877$, $t = 10.949$, $p < 0.001$) between personal accomplishment and mental health. This reinforces the conclusion that the absence of recognition and skill-building opportunities negatively impacts officers’ psychological well-being and morale.

Work relationships between senior officers and their juniors presented mixed views. While some reported positive interactions, others admitted to strained relationships due to work pressure and hierarchical rigidity.

Senior Officer 1 stated,

“We try to maintain open communication, but the workload and pressure sometimes make it difficult to offer support.”

Conversely, Senior Officer 10 said,

“Some juniors feel intimidated or unsupported. They hesitate to speak up due to fear of reprimand.”

This is corroborated by the item in Table 4.16 related to strained relationships with senior officers, which had a mean of 3.55—moderately high, suggesting underlying relational challenges.

Poor interpersonal dynamics at work may compound the sense of accomplishment and increase mental stress. As highlighted by the ANOVA table (Table 4.18), the regression model was statistically significant ($F = 119.880$, $p < 0.001$), confirming that relational factors, along with recognition and work burden, are meaningful contributors to mental health outcomes.

4.7 Employee Mental Health

The findings on employee mental health among police officers in Starehe Sub-County, Nairobi, reveal concerning trends that suggest significant psychological strain. The results were presented in Table 4.20.

Table 4.20:

Employee Mental Health

Employee Mental Health	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Mean	Standard Deviation
	1	2	3	4	5		
M1. My well-being emotionally is low and sometimes I get emotional at the workplace.	0(0.0%)	0(0.0%)	17(16.8%)	50(49.5%)	34(33.7%)	4.17	.694
M2. I often feel struggle to cope with daily challenges.	0(0.0%)	0(0.0%)	0(0.0%)	50(49.5%)	51(50.5%)	4.50	.502
M3. The nature of my work has led to low social interaction with my family, colleague and senior officers.	0(0.0%)	8(7.9%)	33(32.7%)	53(52.5%)	7(6.9%)	3.58	.738
M4. I don't think sharp as usual.	0(0.0%)	24(23.8%)	39(38.6%)	30(29.7%)	89(7.9%)	3.22	.901

Table 4.20, a large proportion of officers reported experiencing emotional challenges and difficulties in maintaining psychological well-being. Notably, 83.2% of respondents agreed or

strongly agreed with the statement, “My well-being emotionally is low and sometimes I get emotional at the workplace” (mean = 4.17, SD = 0.694). This highlights a high level of emotional vulnerability and distress in the work environment.

Even more striking, 100% of the respondents agreed or strongly agreed that they often struggle to cope with daily challenges (mean = 4.50, SD = 0.502), which reflects the overwhelming nature of their duties and the mental toll such demands impose. This uniform agreement underscores the critical level of mental exhaustion faced by the officers.

In terms of social well-being, 59.4% of respondents agreed that their work negatively impacts social interactions with family, colleagues, and senior officers (mean = 3.58, SD = 0.738), suggesting a breakdown in essential support systems both within and outside the workplace. Additionally, the statement “I don’t think sharp as usual” recorded a lower mean of 3.22 (SD = 0.901), with a substantial number of respondents expressing neutrality (38.6%) or disagreement (23.8%). While this suggests cognitive effects are present, they may not be as pronounced as the emotional and social impacts.

Overall, the data points to a deteriorated state of mental health among police officers in Starehe Sub-County, primarily characterized by emotional instability, stress, reduced social engagement, and some cognitive strain. These findings call for urgent interventions by the Kenya Police Service, including mental health support programs, regular psychological assessments, improved working conditions, and access to counseling services to enhance officers' overall well-being and effectiveness.

A common observation among senior officers was that many junior officers exhibit signs of sadness and irritability while on duty.

Senior Officer 4 remarked,

“Some of them are visibly withdrawn. They don’t speak unless spoken to and seem to carry a burden even while performing normal tasks.”

Senior Officer 6 echoed this concern, stating,

“I’ve had to caution a few on their attitude, but I now realize it may be more about emotional issues than indiscipline.”

These narratives reflect the quantitative finding where 83.2% of officers agreed or strongly agreed that their emotional well-being is low and that they sometimes get emotional at work (mean = 4.17). Such emotional volatility not only affects performance but also interpersonal relations, and points to emotional instability being a critical challenge in the policing environment.

When asked if junior officers appear emotionally drained, nearly all interviewed senior officers confirmed this pattern.

Senior Officer 3 said,

“They report feeling tired even at the start of the shift. Many have expressed that the job is taking a toll on their emotions.”

Senior Officer 8 noted,

“Some officers have told me they no longer feel motivated. They do the work, but their hearts aren’t in it.”

These sentiments are strongly validated by the questionnaire item indicating that 100% of officers agreed or strongly agreed that they struggle to cope with daily challenges (mean = 4.50), signaling a critical level of emotional fatigue and mental exhaustion. The alignment

between qualitative and quantitative results underscores the urgent need for systemic solutions that address burnout among officers.

Social disengagement emerged as a third major theme. Several senior officers observed that their subordinates were becoming increasingly isolated from both family and colleagues. Senior Officer 2 observed,

“Most don’t attend social functions anymore, even birthday parties or off-duty gatherings. They say they are too tired or just want to sleep.”

Senior Officer 10 added,

“They complain about lack of time for their families. Some have marriage issues because they are never home.”

This corroborates the questionnaire item that showed 59.4% agreement that work negatively impacts their social interactions (mean = 3.58). This breakdown in social support systems can exacerbate feelings of loneliness and mental stress, further weakening officers' coping mechanisms.

On whether junior officers show signs of slowed thinking or deep introspection, the responses varied.

Senior Officer 1 noted,

“Some officers pause for long before responding or executing commands. They look like they’re somewhere else mentally.”

However, Senior Officer 7 cautioned,

“Not all show cognitive issues. Some are mentally alert, but maybe emotionally worn.”

These reflections match the item “*I don’t think sharp as usual,*” which had a mean of 3.22—indicating a moderate presence of cognitive strain with a high percentage of neutrality (38.6%) and some disagreement (23.8%). Thus, while cognitive decline is evident in some cases, it may be less widespread compared to emotional and social symptoms.

4.8 Overall effect of Burnout on Mental Health

The final analysis in this study aimed to assess the combined effect of burnout dimensions—Emotional Exhaustion (EE), Post-Traumatic Stress Disorder (PT), and Personal Accomplishment (PA)—on the mental health (MH) of Kenya Police Service officers in Starehe Sub-County.

Table 4.21:

Burnout Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.944 ^a	.891	.888	.20833

a. Predictors: (Constant), PA, PT, EE

The regression model showed a very strong relationship between burnout and mental health, with a correlation coefficient (R) of .944 and an R-squared value of .891. This means that 89.1% of the variance in mental health among police officers can be explained collectively by emotional exhaustion, PTSD, and personal accomplishment. The model's adjusted R² (.888) confirms that the results are robust and not due to random variation.

Table 4.22:*Burnout ANOVA*

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	34.489	3	11.496	264.895	.000 ^b
	Residual	4.210	97	.043		
	Total	38.699	100			

a. Dependent Variable: MH

b. Predictors: (Constant), PA, PT, EE

The ANOVA results showed that the model was statistically significant ($F = 264.895$, $p < .001$), indicating that the combination of burnout factors (EE, PT, PA) reliably predicts mental health outcomes. This provides strong evidence that burnout is a critical determinant of mental health status among police officers.

Table 4.23:*Burnout Coefficients*

Model	Unstandardized Coefficients		Standardized Coefficients		t	Sig.
	B	Std. Error	Beta			
1	(Constant)	.035	.189		.187	.852
	EE	.319	.067	.255	4.729	.000
	PT	.393	.029	.593	13.775	.000
	PA	.273	.060	.230	4.554	.000

a. Dependent Variable: MH

The coefficient analysis provides insight into the specific contribution of each burnout component Emotional Exhaustion (EE), Post-Traumatic Stress Disorder (PT), and Personal Accomplishment (PA) to the mental health of Kenya Police Service officers in Starehe Sub-County. All three predictors were found to have a statistically significant positive relationship with mental health outcomes, indicating that higher levels of burnout in each domain correspond with poorer mental well-being.

Post-Traumatic Stress Disorder (PT) had the strongest standardized beta coefficient ($\beta = .593$, $p < .001$) among the three predictors. This suggests that PTSD is the most influential burnout factor affecting mental health in this context. A unit increase in PTSD-related experiences, such as emotional detachment, avoidance, and trauma from exposure to violence or death, results in a substantial decline in psychological wellness. The significant impact of PTSD underscores the psychological burden that operational stressors impose on police officers, highlighting the urgency of trauma-informed interventions and psychological debriefing practices in policing environments.

Emotional Exhaustion (EE) also had a significant effect ($\beta = .255$, $p < .001$) on mental health, indicating that chronic feelings of being emotionally drained and overwhelmed by work demands adversely affect officers' mental states. Although its impact was lower than PTSD, it still plays a critical role. Officers reporting high emotional fatigue are more likely to experience irritability, mood fluctuations, and reduced coping capacity, which compromise their overall emotional resilience.

Personal Accomplishment (PA) had the least but still significant effect ($\beta = .230$, $p < .001$) on mental health. The negative interpretation of this relationship implies that when officers perceive low levels of achievement, lack of recognition, or feel they are not fulfilling their professional goals, their mental health deteriorates. Feelings of underappreciating and a lack of career growth opportunities contribute to stress and emotional dissatisfaction, reinforcing the psychological toll of their job.

In summary, all three components PTSD, emotional exhaustion, and low personal accomplishment exert significant and cumulative negative effects on the mental health of police officers. Interventions aimed at mitigating PTSD and emotional exhaustion, while

promoting a sense of accomplishment and recognition, are essential for sustaining the mental well-being of officers in high-stress assignments.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

The chapter provides the discussions, conclusions and recommendations based on the study findings. It also provides the recommendations for further research areas.

5.2 Discussion

The discussion highlights the significant impact of burnout, emotional exhaustion, PTSD, and lack of personal accomplishment on the mental health of Kenya Police Service officers. These factors contribute to high levels of stress, trauma, and job dissatisfaction, which can undermine officers' performance and well-being. The findings call for urgent institutional reforms, including the introduction of mental health support systems, stress management programs, trauma counseling, and recognition schemes to address the psychological toll of police work.

5.2.1 Prevalence of burnout among the Kenya Police Service Officers

The findings of the present study, which revealed that over 80% of Kenya Police Service officers in Starehe Sub-County experienced symptoms of emotional exhaustion, post-traumatic stress, and diminished personal accomplishment, highlight the serious prevalence of burnout in this high-demand law enforcement environment. These results strongly align with existing literature such as Ugwu and Idemudia (2024), who argue that the nature of police work inherently subjects officers to chronic emotional and psychological exhaustion due to persistent occupational stressors. Similarly, Shoman et al. (2021) emphasized the importance of standardized tools like the Maslach Burnout Inventory (MBI) and Copenhagen Burnout Inventory (CBI) in effectively identifying core components of burnout, which the current study employed to reveal severe levels of emotional exhaustion among officers.

The current study also concurs with findings by Bezie et al. (2024), who reported a 45.7% burnout prevalence among police officers in the Central Gondar zone of Ethiopia. However, while Bezie et al. focused primarily on demographic and structural contributors such as high job demands, poor sleep quality, and organizational stress this study in Starehe Sub-County goes further to explore the mental health consequences, especially post-traumatic stress symptoms and feelings of reduced accomplishment. This local context offers a richer narrative, especially given Starehe's high-crime environment and unique operational pressures, and addresses Bezie et al.'s acknowledged limitation in generalizing their findings beyond their Ethiopian setting.

Moreover, the findings of Mwasala, Stephen, and Muasa (2024), which showed high emotional exhaustion and significant burnout among police officers in Nairobi County, resonate with the current study. However, while Mwasala et al. focused on the general Nairobi context, the present study narrows its lens to Starehe Sub-County, offering a more granular understanding of how localized environmental stressors, such as increased crime and public expectations, exacerbate burnout. Unlike Mwasala et al., who mainly assessed prevalence, the present study delves into the psychological implications of burnout, thus enhancing the depth of analysis and relevance for targeted interventions.

This study amplifies the discourse on burnout in law enforcement by highlighting its intensity in one of Nairobi's most demanding areas. The study results emphasize the urgency of implementing context-specific mental health support mechanisms and institutional reforms. As such, these findings contribute new knowledge by highlighting the intertwined relationship between emotional exhaustion, trauma exposure, and mental well-being among officers. Policymakers and police reform agencies should prioritize interventions that address not only burnout symptoms but also systemic issues such as workload management, trauma counseling, and organizational support systems.

5.2.2 Emotional exhaustion and mental health

The results of the current study, reveal that emotional exhaustion accounts for over 62% of the variance in mental health scores among Kenya Police Service officers in Starehe Sub-County. These results are consistent with a growing body of empirical literature underscoring the centrality of emotional exhaustion in occupational stress. Stormer (2021) and Sheng et al. (2023) define emotional exhaustion as a key indicator of burnout, describing it as a state of chronic depletion of emotional and physical energy due to sustained exposure to high-stress environments—conditions that are endemic in law enforcement. Officers in this study reported feeling drained, overwhelmed, and disengaged from their duties, highlighting how prolonged emotional fatigue directly affects psychological and social well-being. This aligns with Sheng et al.'s (2023) assertion that such exhaustion leads to diminished motivation and coping capacity, thereby deteriorating mental health.

Furthermore, the study's findings reinforce previous research by Haldorai et al. (2023) and Yang & Hayes (2020), who found that emotional exhaustion impairs decision-making and intensifies psychological symptoms like anxiety and depression. The indication that emotional exhaustion plays a dominant role in shaping officers' mental health resonates with Wu et al.'s (2023) conclusion that emotional exhaustion mediates the relationship between work detachment and depression, with the added insight that self-compassion can moderate these effects. Although the current study did not investigate self-compassion, it adds to this conversation by emphasizing structural interventions such as workload management and rest periods to mitigate the psychological toll on officers—practical solutions that extend beyond individual coping mechanisms.

This study also diverges from some existing literature by broadening the scope of mental health impacts to include not only emotional and psychological consequences but also social

dimensions. While studies like those by Oyekanmi (2021) and Ntuli & Kaba (2023) focused primarily on anxiety and depression among law enforcement and healthcare workers respectively, the current research acknowledges the social disengagement that often accompanies emotional exhaustion in policing. It also aligns with García-Rivera et al.'s (2020) findings that physical activities can reduce mental exhaustion, further reinforcing the need for comprehensive wellness programs. However, unlike García-Rivera et al., this study addresses the interplay between emotional exhaustion and various facets of well-being, making it a more holistic contribution to the field.

Notably, local studies by Kimani and Mwangi (2022) and Ndero, Kimamo, and Mwaura (2024) support the conclusion that emotional exhaustion is closely tied to poor mental health outcomes among Kenyan workers. However, their focus on educators and general burnout respectively limits their applicability to police officers, who operate under uniquely high-risk conditions. The study proposes actionable interventions such as mental health programs, rest scheduling, and stress-relief strategies, positioning itself as a pragmatic and evidence-based approach to mitigating burnout among frontline officers.

5.2.3 Post-traumatic stress disorder (PTSD) and mental health

The findings of this study, which revealed that post-traumatic stress disorder (PTSD) accounted for a significant 76.5% of the variance in mental health outcomes among police officers, underscore the profound psychological impact of trauma exposure in law enforcement. This result is consistent with existing literature, such as Omopo (2024), who emphasized that PTSD is a common affliction among officers regularly exposed to traumatic incidents. The present study adds critical value by quantifying the extent of PTSD's influence on mental health and providing localized insights specific to the Kenyan context, particularly in high-risk areas like Starehe Sub-County. Such trauma often manifests through intrusive thoughts, emotional

detachment, and avoidance behaviors, which compromise not only individual well-being but also organizational functionality and morale.

Similarly, findings by Isabirye, Namuli, and Kinyanda (2022) in Uganda align with the current study's conclusions, though their study noted a lower PTSD prevalence rate of 7.4% and 62.5% for sub-threshold symptoms. Despite the different figures, the link between PTSD and psychiatric comorbidities such as depression and substance abuse remain evident across studies. The present research builds on this by adopting a more inclusive approach spanning different police ranks and using both quantitative and qualitative data thereby offering a more holistic picture of PTSD's impact on Kenyan police officers. Moreover, while Isabirye et al. focused on field patrol officers, the current study captures the broader spectrum of officers affected, hence enriching the discourse on trauma-related mental health outcomes.

This study's findings also echo the conclusions of Akoth and Njiru (2023), who identified PTSD risk factors such as marital status among Nairobi police officers. However, Akoth and Njiru's work did not thoroughly examine how PTSD translates into diminished mental health or job performance. In contrast, the current study emphasizes how PTSD symptoms directly contribute to psychological distress and affect work-related behavior and cohesion within the police force. This expanded scope strengthens the argument for institutional mental health interventions, including trauma-informed care, regular psychological evaluations, and peer support systems.

Furthermore, this study critically addresses the limitations highlighted in studies like those of Ndero, Kimamo, and Mwaura (2024), who identified severe PTSD cases in Kenyan police officers through secondary data sources. While they emphasized the detrimental effects of a repressive police culture that discourages vulnerability, their reliance on media accounts restricted empirical depth. By employing primary data collection, the current study not only

corroborates the existence of PTSD but also links it to measurable mental health outcomes, offering actionable recommendations for mental health policy within the police service. These include integrating psychological resilience programs and dismantling stigma around mental health a much-needed shift in police institutions with a traditionally stoic culture.

5.2.4 Personal accomplishment and mental health

The current study's finding that personal accomplishment significantly predicts mental health among police officers strongly concurs with the broader literature which identifies personal accomplishment as a pivotal component of occupational well-being. Levin, Roziner, and Savaya (2022) assert that personal accomplishment reflects one's sense of purpose and efficacy, and when diminished, it contributes to emotional distress, reduced motivation, and higher burnout. This aligns with the finding that low personal accomplishment, driven by factors such as limited recognition and stagnant career opportunities, resulted in poorer mental health outcomes among officers in Starehe Sub-County. The study emphasizes that enhancing recognition and providing opportunities for advancement could significantly improve officers' psychological resilience and workplace satisfaction, an insight echoed in Edú-Valsania et al. (2022), who argue for proactive interventions to prevent burnout and restore well-being.

However, a nuanced contrast arises when comparing the current study with Makris et al. (2020), who found no direct statistical relationship between perceived social support and personal accomplishment among mental health professionals. Although both professions involve high stress, the context of policing with its hierarchical command structures, exposure to violence, and limited psychological support differs markedly. The current study's focus on the Kenyan police service uncovers unique socio-organizational dynamics such as institutional neglect and systemic overwork, which more directly suppress the feeling of accomplishment. These conditions suggest that unlike in mental health settings, perceived recognition and career

advancement opportunities are even more critical determinants of police officers' mental health in Kenya.

The relationship between empowerment and burnout further supports the current findings. Gong, Li, and Niu (2021) demonstrate that psychological empowerment can buffer against burnout, especially the dimension of reduced personal accomplishment. Their person-centered analysis found that officers who felt more empowered were less likely to fall into high-burnout categories. Though their study did not examine mental health directly, the parallels with the current findings are evident: empowerment through career development, role clarity, and institutional support can lead to greater personal accomplishment and, consequently, better mental health. The present study builds on this by showing that low personal accomplishment not only signals burnout but directly undermines overall mental wellness, including cognitive, emotional, and social dimensions.

Finally, the work of Ndero, Kimamo, and Mwaura (2024) aligns closely with the present study in its concern over the psychological well-being of Kenyan police officers. Their findings of widespread psychological disorders, linked to high incidences of suicide and homicide, reinforce the urgency of institutional reforms. Their conclusion that psychological well-being enhances workplace harmony and retention highlight the present study's call for structured recognition programs and career support mechanisms. Unlike many past studies, however, the current research moves beyond general well-being to isolate personal accomplishment as a core driver, thus offering a targeted approach to improving mental health outcomes among Kenyan police officers.

5.3 Conclusions

The study confirmed that burnout is a significant concern among Kenya Police Service officers in Starehe Sub County, Nairobi. High levels of emotional exhaustion (83.5%), post-traumatic

stress (70%), and personal accomplishment (83.1%) were found to negatively affect their mental health. The findings underscore the need for mental health interventions, such as counseling services, stress management programs, and workload management to mitigate burnout among police officers.

Emotional exhaustion was shown to have a significant negative impact on mental health. The regression analysis revealed that emotional exhaustion explains over 62% of the variance in mental health scores, which indicates that officers experiencing emotional exhaustion are at a higher risk of mental health deterioration. This calls for addressing the psychological toll of overwork and stress in the police force through targeted mental health support and workload management initiatives.

The study also demonstrated a strong relationship between PTSD symptoms and the mental health of police officers. PTSD accounted for 76.5% of the variance in mental health outcomes, with symptoms such as emotional detachment and stress-induced avoidance affecting officers' social and psychological functioning. These findings call for urgent implementation of trauma counseling services, stress management programs, and institutional reforms focused on trauma recovery to support officers in dealing with the psychological impact of their work.

Personal accomplishment emerged as a significant factor affecting mental health, with officers reporting that heavy workloads and lack of recognition contributed to a diminished sense of achievement. Over 90% of respondents reported low personal goal attainment due to demanding work, and this affected their overall well-being. The study advocates for reforms to improve recognition and support the officers in realizing their professional goals, which would likely enhance their mental health and performance.

5.4 Recommendations

Given the high prevalence of emotional exhaustion (83.5%) and PTSD symptoms (70%), the Kenya Police Service should prioritize structured mental health programs. Regular psychological counseling services, trauma debriefing sessions, and mandatory mental health assessments should be institutionalized. These interventions will help officers process work-related stress, reduce burnout, and prevent long-term psychological deterioration. Additionally, confidential and stigma-free access to mental health professionals should be ensured to encourage officers to seek help without fear of professional repercussions.

Since emotional exhaustion was found to explain 62% of mental health deterioration, immediate measures should be taken to regulate workloads. This includes reviewing shift durations, minimizing unnecessary overtime, and ensuring adequate rest periods between assignments. Implementing flexible scheduling where possible and promoting leave utilization can help officers recover from fatigue. Furthermore, policies should be enacted to discourage a culture of overwork and instead emphasize productivity within reasonable working hours.

Considering that PTSD accounted for 76.5% of mental health variance, specialized trauma resilience training should be introduced. Officers should receive training in stress management, emotional regulation, and coping mechanisms for repeated exposure to distressing incidents. Programs such as Critical Incident Stress Debriefing (CISD) and mindfulness-based stress reduction (MBSR) can equip officers with practical tools to manage trauma. Additionally, periodic resilience workshops should be conducted to reinforce long-term psychological endurance.

The study revealed that low personal accomplishment significantly affects officers' mental health, with over 90% reporting diminished goal attainment due to excessive workloads. To counter this, the police service should establish structured recognition programs, such as

awards for exemplary service, public commendations, and performance-based incentives. Career development opportunities, including promotions, skill-building workshops, and further education sponsorships, should be expanded to enhance officers' sense of professional growth and fulfillment.

A supportive work environment is crucial in mitigating mental health struggles. Peer support groups—where officers can share experiences and coping strategies—should be formalized within police stations. Additionally, supervisory staff should undergo sensitization training on empathetic leadership, mental health awareness, and early detection of burnout symptoms. Supervisors must be trained to foster open communication, encourage help-seeking behavior, and provide appropriate referrals when needed.

To ensure long-term impact, mental health and wellness should be embedded into the National Police Service's strategic policies. This includes revising personnel management frameworks to prioritize psychological safety, integrating wellness metrics into performance evaluations, and allocating dedicated budgets for mental health programs. Legislative advocacy for better working conditions, insurance coverage for mental health care, and occupational safety standards should also be pursued to institutionalize these reforms.

5.5 Suggestion for Further Areas of Study

Future studies could focus on exploring the long-term effects of these burnout dimensions on the overall career longevity and performance of police officers. Additionally, research could investigate the effectiveness of specific mental health interventions in reducing burnout and improving police officers' mental health. It would also be useful to compare the burnout prevalence across different regions and departments to determine if there are differences in the psychological strains experienced by police officers in other parts of the country.

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APPENDICES

Appendix I: Letter of Introduction

My name is **TERESIA MUMBI KAHURA**. I am a Master of Arts in Counseling Psychology student in Africa Nazarene University. As a requirement for the completion of the course I am conducting a study on the **EFFECT OF BURNOUT ON MENTAL HEALTH AMONG POLICE OFFICERS IN STAREHE SUB-COUNTY, NAIROBI COUNTY, KENYA**.

I wish to inform you that you have been chosen as a respondent in this study; hence you are requested to give a bit of your time and to kindly give your honest information on this area. Please note that your honesty in answering the questions is vital in understanding the effect of burnout on mental health among police officers in Starehe Sub-County, Nairobi County, Kenya.

Any questions that you may find uncomfortable or intimidating may be left unanswered. You may as well withdraw from taking part if you don't wish to participate. The information collected from you will be treated with confidentiality. Your identity will not be revealed both during and after the interview. Please note that your honesty in answering the questions on this questionnaire and during the interview is vital in understanding these perennial conflicts.

Thank you.

Participant's Statement

The above information regarding my participation in the study is clear to me. I have been given a chance to ask questions, and my questions have been answered to my satisfaction. My participation in this study is entirely voluntary.

Code of participant.....Signature-----Date: -----

Appendix II: Questionnaire

SECTION A: GENERAL INFORMATION

Answer by ticking appropriately on the choices provided.

1. What is your gender;

☐ Male ☐ Female

2. Indicate your age;

☐ 20 – 29 years ☐ 30 – 39 years ☐ 40– 49 years ☐ 50 – 59 years ☐ Above 59 years

3. Provide the highest level of education attained?

☐ Secondary ☐ Certificate ☐ Diploma ☐ Undergraduate ☐ Postgraduate

4. How long have you worked in this police station?

☐ Less than 1 year ☐ 2 – 4 years ☐ 5 – 7 years ☐ 8 – 10 years ☐ Above 10 years

5. Which rank are you in the kenya police service?

☐ Police Constable ☐ Corporal ☐ Sergeant ☐ Senior Sergeant ☐ Inspector

☐ Chief Inspector ☐ Superintendent ☐ Senior Superintendent of police

SECTION B: Burnout

Part 1: Emotional Exhaustion

Rate the extent to which the following statements describe how you feel by using the following scale 1 = Strongly Disagree; 2 = Disagree; 3 = Neutral; 4 = Agree; 5 = Strongly Agree.

Emotional Exhaustion	1	2	3	4	5
E1. I am overwhelmed with work requiring overtime, leading to overworking.					
E2. Emotional exhaustion has led to self-doubt (cynicism) and inability to conduct my duties.					
E3. I am physically and emotionally depleted leading to low employee performance.					
E4. I am short-tempered and irritable due to emotional exhaustion.					
E5. Physical tiredness increases emotional exhaustion among the police officers.					

Part 2: Post-traumatic stress disorder (PTSD)

Rate the extent to which the following statements describe how you feel by using the following scale 1 = Strongly Disagree; 2 = Disagree; 3 = Neutral; 4 = Agree; 5 = Strongly Agree.

Post-traumatic stress disorder (PTSD)	1	2	3	4	5
PT1. I sometimes avoid people because of the stress that affect me.					
PT2. I sometimes feel emotional detachment due to the nature of our work.					
PT3. Trauma due to violence, handling death bodies and other work have led to detachment from friends and family.					
PT4. I am sometimes disconnected with our family, friends and environment.					
PT5. Burnout has affected my personality and sometimes I feel odd from other people.					

Part 3: Personal Accomplishment

Rate the extent to which the following statements describe how you feel by using the following scale 1 = Strongly Disagree; 2 = Disagree; 3 = Neutral; 4 = Agree; 5 = Strongly Agree.

Personal Accomplishment	1	2	3	4	5
PA1. My work demands too much resulting in low personal goal attainment.					
PA2. I have low skill development due to demanding work at our stations.					
PA3. The society and senior officers rarely recognize our effort and risk that we take in our duties.					
PA4. I have a hostile work relationship with my senior officers based on high demand for work.					
PA5. I am not able to accomplish a lot in our work.					

Section C: Employee Mental Health

Rate the extent to which the following statements describe how you feel by using the following scale 1 = Strongly Disagree; 2 = Disagree; 3 = Neutral; 4 = Agree; 5 = Strongly Agree.

Employee Mental Health	1	2	3	4	5
M1. My well-being emotionally is low and sometimes I get emotional at the workplace.					
M2. I often struggle to cope with daily challenges.					
M3. The nature of my work has led to low social interaction with my family, colleague and senior officers.					
M4. I don't think as sharp as usual.					

Thank You for Your Cooperation

Appendix III: Interview Schedule (Senior Officers)

Section A: Emotional Exhaustion

1. Do your junior officer present with signs of lack of self-confidence, irritability and cynicism?

Explain.

2. What do you think could make your junior officers emotionally exhausted in workplace?

3. Does the nature of work lead to physical depletion of the junior officers? Explain how?

4. Does the nature of work overwhelm the junior officers? Explain how?

Section B: Post-traumatic stress disorder (PTSD)

5. Are your junior office shown signs of avoidance? Explain.

6. Have you witnessed your junior officers present signs of emotional detachment, trauma and disconnect? Explain.

7. Do you have cases of officers showing symptoms of post-traumatic stress disorder (PTSD)? Explain.

Section C: Personal Accomplishment

8. Are your officers able to achieve the desired goals in life? Explain.

9. Do you recognize and reward the effort of officers who do well in their duties and how do you develop their skills? Explain.

10. How is the work relationship with your junior employees? Explain?

Section D: Employee Mental Health

11. Do your junior officers seem sad, irritable in their duty? Explain.

12. Do your junior officers feel emotionally drained? Explain.

13. Are you junior officers complaining of not having sufficient time for socialization? Explain.

14. Do your junior officers think slow with time and often in deep thoughts? Explain.

Appendix IV: Africa Nazarene University



P.O.Box: 53067 – 00200
Nairobi, Kenya.
Tel: 020 252 7170/1 – 5
Email: vc@anu.ac.ke
www.anu.ac.ke

19th February 2025

TO WHOM IT MAY CONCERN

RE: RESEARCH PERMIT: TERESIA MUMBI

Teresia Mumbi Reg. No. (18J03EMCP010) is a Bonafide postgraduate student at Africa Nazarene University pursuing a master's degree in Counseling Psychology. This program entails Coursework and Thesis. She has successfully completed her coursework and defended her thesis proposal entitled:

"Effect of Burnout on the Mental Health among Police Officers in Starehe Sub County, Nairobi, Kenya."

Any assistance accorded to her to facilitate data collection and complete her thesis will be highly appreciated.

Sincerely,

Prof. Orpha K. Ongiti
Dean, Postgraduate Studies & Director, Institute of Research

Appendix V: NACOSTI

 REPUBLIC OF KENYA	 NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY & INNOVATION
Ref No: 379140	Date of Issue: 20/March/2025
RESEARCH LICENSE	
	
This is to Certify that Ms. TERESIA KAHURA MUMBI of Africa Nazarene University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Nairobi on the topic: EFFECT OF BURNOUT ON THE MENTAL HEALTH AMONG POLICE OFFICERS IN STAREHE SUB COUNTY, NAIROBI, KENYA for the period ending : 20/March/2026.	
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Appendix VI: Map of Starehe Sub-County