AN INVESTIGATION INTO THE EFFECTS OF PERSONAL AND OCCUPATIONAL PSYCHOSOCIAL PROBLEMS ON WORK PERFORMANCE AMONG UNIFORMED POLICE OFFICERS: A CASE STUDY OF WINDHOEK POLICE STATION

A THESIS SUBMITTED IN PARTIAL FULFILMENT OF THE REQUIREMENTS OF THE DEGREE OF MASTER OF ARTS (STRATEGIC AND SECURITY STUDIES)

OF

THE UNIVERSITY OF NAMIBIA

BY

ILONA NDJENDJA

9508279

November 2019

MAIN SUPERVISOR: Professor: Piet Van Rooyen (University of Namibia)
DECLARATION

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Ilona Ndjidja

Student Number: 9508279
ABSTRACT

The overall objective of this study was to investigate the effect of psychosocial problems on police personal to serve and protect at Windhoek Police Station in Windhoek, Namibia. The specific objectives of this study were to investigate the effects of personal and psychosocial problems on work performance among uniformed police officers at Windhoek police station, examine the types and causes of personal and work related psychosocial problems among police officers at Windhoek police station, and to recommend strategic policy remedies that can be adopted to address the effects of psychosocial problems on work performance in the Namibian Police Force (NAMPOL). To achieve the above research objectives, this study adopted qualitative research design. This study found out that the management of NAMPOL rarely promotes its employees; most police officers experience marital problems and have challenges other personal challenges such as loneliness, losing of the loved ones, excessive family demands, and little income which impairs their functioning at work; a combination of factors is responsible for the psychosocial problems experienced by police officers at Windhoek police station such as lack of promotion, poor pay, work overload, prolonged overtime work, exposure to traumatic scenes, poor management and leadership style, tribalism and discrimination at work, exposure to life threatening situations, and other factors are some of the factors causing police officers at Windhoek police station to experience psychosocial problems; and that psychosocial problems negatively affect employee performance. When employees are emotionally drained because of personal challenges that they go through, they may not be productive at work if appropriate remedies are remedies are not taken, it may negatively affect the performance of employees at work. This study recommends the management of NAMPOL should
ensure that all police stations across the country have mental health workers such as social workers and chaplains in order to render debriefing and diffusion sessions aimed at helping police officers who attend to traumatising scenes of crime; and the number of social workers should be increased in order to give all police officers access to professional help that will enable them to overcome psychosocial challenges that they are exposed to.
ACKNOWLEDGMENTS

Firstly, I would like to thank the Almighty God my Lord and my redeemer Jesus Christ, without His grace this would be impossible. In the same vein, I would like to acknowledge my children and my siblings for their support and months of sacrifices they made in order for me to complete this thesis. I sincerely thank you for your support.

I would also like to express my sincere appreciation and gratitude to my supervisor, Prof Piet Van Rooyen for his support and guidance throughout the writing of this project. I specifically thank you for your patience, motivation, and encouragement that kept the flames of excitement burning. Thank you so much for your academic support. In the same vein, I would also like to acknowledge and express my heartfelt appreciation to the editors of this thesis and specifically my sister Elizabeth Ndjendja.

Lastly, I want to acknowledge everyone whose words of encouragement and support helped me go through the journey of my studies.
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I would like to dedicate this thesis to my late mother - Wilhelmine Alubugaste for being a very caring and inspiring mother in my life in the course of her life on this earth. May your soul continue resting in eternal peace.
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<td>American Psychological Association</td>
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<tr>
<td>ILO:</td>
<td>International Labour Organisation</td>
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<tr>
<td>HIV/AIDS:</td>
<td>Human Immune Virus</td>
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<td>NAMPOL:</td>
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CHAPTER ONE
INTRODUCTION AND BACKGROUND OF THE STUDY

1.1. Introduction
This study sought to investigate the effects of personal and occupational psychosocial problems on work performance among uniformed police officers at Windhoek police station. This chapter gives the background information of the study, the statement of the problem, research objectives, research questions, significance of the study, and limitations and delimitation of the study.

1.2. Background of the Study

Generally, performance at workplaces is a critical factor in organizational success. However, performance in organisations is affected by a number of factors such as psychosocial factors. Psychosocial factors are problems experienced in human life and usually affect human psychosocial functioning negatively, hence hampering performance individual and organisational performance (Ornelas & Kleiner, 2003). According to Ornelas and Kleiner (2003), psychosocial factors take its toll when social problems transform into stressors, and hamper individual’s normal functioning in the society.

In their study, Bruce and Neild (2005) explicate that the first points of contact many citizens have with their governments are police officers. Thus competent, honest and effective police officers are the backbone of the rule of law. Ironically, inadequate or unproductive investment in the public security sector can result in weak or non-functioning security institutions - unable to respond and prevent crime and violence. When police officer’s mental health functioning is compromised, they may not be able to utilise their common sense and resilience as expected when executing their duties.

Regarding the Namibian Police Force, Article 118 of the Namibian Constitution (2010) provides for the establishment of the Namibian Police Force. The Act states that the Namibian Police Force
functions are to preserve the internal security of Namibia, to maintain law and order, to prevent crime, to investigate any offences or alleged offences and to protect life and property. The Namibian Police Force consists of administrative and operational units. For the purpose of this study, the researcher concentrated on the operational units that consist of trained police officers dealing with the most stressful events within the Namibian Police Force.

The Namibian Police Force has a total number of slightly above 16000 employees as provided by Human Resource Directorate and they are deployed at different stations in the fourteen regions across the country. For the purpose of this study, Windhoek Police Station was chosen out of the four main police stations in Khomas region. Windhoek police station was chosen because its monthly and annual reports recorded high cases of psychosocial problems.

According to Kula (2016), police officers are also referred to as law enforcement officers. Their functions are mainly to serve and protect internal security of the country as well as the community. These individuals work long hours and under difficult situations. Law enforcement personnel witness terrible, horrific scenes, maintain law and order in the midst of commotion and put their lives on the line on a daily basis. The work pressure experienced by police officers does not only affect their performance at work but also exerts pressure on law enforcers' outside relationships such as marriages and other relationships.

Warr and Wall (2005), stated that stress is one of the psychosocial problems which is described as state of physiological arousal which occurs when a stimulus is perceived as a threat to one's health and performance at the workplace. Parson (2004) describes the dynamics of policing as an occupation that creates opportunities for them to experience many psychosocial hazards such as stress, suicide, sexual harassment, and discrimination. Psychosocial problems may result in various kinds of stress which may cause police officers to start hating their work and may end up being
absent without official permission. In view of limited research on the effect of psychosocial problems within the NAMPOL, and given the nature of the work of police officers, there is a need to determine the effects of personal and job related psychosocial factors on their ability to serve and protect the nation. There is also a lack of information and policy regarding the best ways to deal with these psycho-social problems and its associated effects on police officers’ ability to serve and protect. This study therefore was prompted by the above gaps.

1.3. Statement of the Problem

The Namibia police force members are expected to maintain law and order, prevent and investigate alleged offences and to ensure internal security of Namibia. To be able to execute the above functions competently, there is need for police force members to be well – physically, mentally, and emotionally. This however is not case given the number of cases of police officers suffering from psychosocial problems. Social workers within the police force have in the past sounded warning bells about the alarming rate of psychosocial malfunctioning of police officers at Windhoek police station. The concern of social workers in NAMPOL about the alarming rate of psychosocial malfunction of police officers is strengthened by recent studies conducted in the police force. For example, a study by Haufiku (2015) found out the NAMPOL officers experience high level of stress. A study by Kangunga (2015) found that the social workers within the Namibian Police Force members are overworked because of attending to a large number of police officers seeking counselling. This study therefore sought to investigate the effects of personal and occupational psychosocial problems on work performance among uniformed police officers in Windhoek police station.

1.4. Research objectives

This study aimed at achieving the following research objectives:

i. To investigate the effects of personal and psychosocial problems on work performance among uniformed police officers at Windhoek police station.
To examine the types and causes of personal and work related psychosocial problems among police officers at Windhoek police station.

To recommend strategic policy remedies that can be adopted to address the effects of psychosocial problems on work performance in NAMPOL.

1.5. Research questions

To achieve the above objectives, this study sought to answer the following research questions:

i. What are the effects of personal and psychosocial problems on work performance among uniformed police officers at Windhoek police station?

ii. What are the types and causes of personal and work related psychosocial problems among police officers at Windhoek police station?

iii. What strategic policy remedies should be adopted to address the effects of psychosocial problems on work performance in NAMPOL?

1.6. Significance of the Study

This study is significant because the recommendations made could be used as a tool to direct the mental health workers and human resource practitioners at NAMPOL to assist members suffering from psychosocial problems. This will help to improve the personal performance of NAMPOL employees and the general performance of NAMPOL, hence, making it possible for NAMPOL to fulfil its prime objective of keeping law and order in Namibia, hence, maintaining peace and stability in the country.

This study is also significant to the management of NAMPOL because the study recommends the management of NAMPOL to construct rehabilitation units across the country with
multidisciplinary professionals such as medical doctors, psychiatrists, and psychologists in order to help members who witness traumatic events.

Additionally, future researchers may also make use of the findings of this study as a basis for further studies on psychosocial problems in the NAMPOL and other related workplaces.

1.7. Limitation of the study

The Namibian Police Force has a workforce of slightly sixteen thousand police officers but only a few employees were drawn to participate in this study. Therefore, a sample of only 124 employees out of a population of over 16000 was not representative enough since the findings from this study are generalised to infer to the population characterises of over 16000 police officers. Additionally, this study was limited by the time factor. This study was conducted in a short period of time which disallowed the researcher to collect detailed information. Thirdly, since police officers are always busy, it was difficult for the researcher to conduct face-to-face interviews which could have provided more detailed information about the issue under investigation.

1.8. Delimitations of the study

This study only focussed on charge office, operation, and crime investigation units at Windhoek police station. Other police stations in Windhoek fell outside the scope of this study.

1.9. Outline of the Study

The thesis is structured into six chapters as described below:

Chapter 1: This chapter provided the background information, statement of the problem, research objectives and research questions.

Chapter 2: This chapter presented a section that outline the theoretical framework in relation to the effects of work and personal psychosocial problems on police officers to protect and serve.

Chapter 3: This chapter looked at the effects of personal and work related psychosocial problems on the police officers to protect and serve in the Namibian Context.
Chapter 4: This chapter outlines the process by which the researcher conducted the research and ethical considerations that were observed when this study was conducted.

Chapter 5: This chapter discusses how the data that was gathered from the participants through semi-structured questionnaire was analyzed and interpreted to make meaning and to draw valuable insights.

Chapter 6: This chapter concludes the study by giving key findings and recommendations for action.

1.10. Conclusion

This chapter provided the general introduction and background to the study. This chapter also stated the problem which promoted the researcher to conduct this study. This chapter also spelt out the research objectives and the research questions, explained the significance of the study, limitations and delimitations of the study. The next chapter reviews literature on the psychosocial problems and its effects on employee performance.
CHAPTER TWO

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

2.1. Introduction

The chapter before gave introduced the study by giving the background to the study, the problem statement and the research objectives and questions. This chapter reviews literature on psychosocial factors that impact on employee performance. This chapter covers the overview of psychosocial problems, psychosocial problems in the police force, the theoretical framework which includes the two theories: the trauma theory and the human security theory.

2.2. Overview of psychosocial problems

An online dictionary defines psychosocial problems as lack of development or diverse atrophy of the psychosocial self, often occurring alongside other dysfunctions that may be physical, emotional, or cognitive in nature. These problems include behavioural disorders, cognitive malfunctioning, and emotional instability which are the manifestations of stress in employees. Finn and Tomz (1998) observe that people working in occupations where they are required to deal with other people’s problems, may suffer more psychosocial problems than other professionals. Ongoro (2015) defines stress as a state of mental or emotional strain or tension resulting from adverse or demanding circumstances.

According to Malmin (2012), high levels of perceived stress are associated with increased feelings of anger and decreased likelihood of controlling anger in the work environment. Malmin further notes that the higher the stress level, the lower the engagement level of police officers. Although stress is
generally associated with negative effects, Malmin (2012) argues stress can be good depending on its level. Malmin (2012) argues that a reasonable amount of stress can help an individual increase his creativity and improve productivity. However, overall performance at work may deteriorate if employees experience protracted exposure to high level of stress.

Stinchcomb (2004) is of the view that psychosocial problems experienced by employees at workplace are caused by work-related factors and social factors. Work-related factors cause organizational stress. According to Stinchcomb (2004), organisational stress is caused by certain characteristics of the organization and behaviour of its employees that may create stress for the employees. For example, bureaucratic processes, perceived lack of support from managers, and lack of promotional opportunities in the organization. Toch et al. (2002) identifies features of organisational as inconsistent disciplinary procedures and management style, unfair promotion, level of pay, excessive workload, and lack of administrative support as organisation. According to Ongoro (2015), policies and practices that law enforcement organizations require their employees to follow when doing their jobs in the field are potential organizational stress factors.

The social factors that cause psychosocial problems are family demands, marital distractions, the state of family relationships, divorce, domestic violence, and extramarital affairs (Dempsey & Frost, 2009). According to Dempsey and Frost (2009), employees are subjected to domestic violence or who are undergoing certain challenges at their homes are more likely to exhibit psychosocial dysfunction which ultimately affects their performance at work.
2.3. Psychosocial problems in the police force

Ongoro (2015) argues that, although psychosocial problems exist in all professions, its magnitude is high in the police force and in other law enforcement bodies. In the same line of mind, Harpold and Feemaster (2002) state that police officers experience a considerable level of stress because of the nature of their work. For example, police officers witness horrible and traumatizing scenes such as murder, rape, accidents, and violent crimes which make police officers to experience a lot of emotional stress. Exposure to the above may lead to numerous behavioural, cognitive and emotional disorders in police officers. Police officers interact with criminals and they have relationship with other community members. Some studies on law enforcement such as Miller (1999) reveal that work and personal related factors are the main sources of psychosocial stress in police officers. Miller reveals that stress experienced by police officers is directly related to their psychological, emotional and physiological well-being. Barlow and Durand (2005) identify favouritism, lack of supervision, lack of positive rewards, restrictive policies, excessive paperwork, and poor equipment as some of the possible stress factors for police officers.

2.4. Theoretical Framework

This study is based on two theories: the Trauma Theory and Human Security Theory. These theories provided the researcher a systematic way of observing, questioning, and interpreting behaviour so as to have conceptual infrastructure of how to conduct assessments and justify practice. The Trauma Theory guided the researcher to understand the causes of personal and occupational related psychosocial problems on police officers and the human security theory enabled the researcher to understand the importance of individual security on national security.
2.4.1. The Trauma Theory

The American Psychological Association (APA), (2016) describes trauma as an emotional response to a terrible event like an accident, rape or natural disaster which causes shock and denial. Long-term reactions include unpredictable emotions, flashbacks strained relationships and even physical symptoms like headaches or nausea. In agreement with APA (2016), Barlow and Durand (2005) stated that although the above feelings are normal, some people have difficulty moving on with their lives. This therefore requires that such people should be assisted by psychologists who can help them to find constructive ways of managing their emotions. Failure to come to terms with trauma at work causes operational stress in employees.

Given the nature of work that police officers are engaged in, it is likely that operational stress is becoming a daily factor in their lives (Violanti and Panton, 1999). Some of the traumatising events that police officers are exposed to are murder, assaults, shootings as revealed by Violanti and Paton (1999). By dealing with crime victims and perpetrators as an effort of instilling the criminal justice system within societies, working in shifts is also cited as inherent contributing factor in policing as confirmed by Ellison (2004) as well as Burke and Mikkelsen (2006). A study by Dowler and Arai (2008) also stated that operational stressors, or inherent stressors, in police life also include boredom, the continual exposure to citizens and their complaints, the use of force, and the sense of working under the strong possibility of violence, dangerous events, and death affects police officers psychologically and physically. In addition to inherent police stressors within organisation like the ones mentioned above, police officers are exposed to critical and potentially dangerous incidents and their working conditions (Ongoro, 2015). Such stress factors range from excessive work overload and excitement to boring routine particularly when dealing with the criminal justice system and courts, and media attention on law enforcement agencies.
It is commonly recognized that prolonged stress harms individuals’ health and that one possible outcome of work stress is burnout (Martinussen, Richardsen & Burke 2007:239). Martinussen et al. (2007) point out that although every person is subject to psychosocial issues, police officers are at greater risk of burnout than other people. According to the above authors, burnout is a psychological syndrome in response to work-related stressors. Factors like dangerous missions, overloaded shift hours, hierarchical and disciplined structure are some factors that affect police officers’ psychology, physiology, and their family relations. APA (2016) defines stress as people’s reaction to excessive pressure. Although stress is not a disease, prolonged stress leads to mental and physical health problems and may transition into depression, nervous breakdown and heart diseases (Martinussen, 2007).

Ornelas and Kleiner (2003) argued that stress is a by-product of modern life that results from peoples’ efforts of trying to balance the demands of the workplace and of family life. This view is supported by Barlow and Durand (2005) who argues that stress is caused by unsympathetic organisational culture, poor communication between managers and employees, lack of involvement in decision-making, bullying and harassment, continual or sudden change, insufficient resources, conflicting priorities and lack of challenges. Negative workplace relations are also an effect of psychosocial problem. A workforce with broken relations may affect job performance and communication in terms of work allocation and giving feedback of work done. Both views are cited in the International Labour Office and World Health Organization (1984) which confirm that, occupational accidents are frequently associated with psychosocial factors.

The work by Ongoro (2015) as well as Dowler and Arai (2008) seems to claim that officers of any age may struggle with issues of depression, suicidal ideation, anger, aggression, separation issues, relationship problems, or childhood physical or sexual abuse. As such, psychosocial problems freeze
a person’s ability to concentrate which may result in poor judgments. It may further limit the police officers to perform to the best of their ability. It is therefore observed that a support system that allows the workforce a platform to vent out at workplace is vital in improving member’s psychosocial functioning, and it can enhance individual’s ability to cope with stress related factors better. Furthermore, Trauma Theory emphasises that most people who suffer mental and emotional distress have been injured within their social environment. Violent experiences have confrontational effects on individual and human systems. Moreover, the interactions of an individual and his or her environment and community plays a significant role in determining whether that person is able to cope with the traumatising experience.

Dempsey and Forst (2009) stated that, most of police officers suffer of posttraumatic stress disorder as psychological effect after attending or witnessing critical incidents such as shooting or horrific accidents as they perform their work. Hepworth et al., (2006) also stated that trauma emanates from unfavourable life practices that overpower a person’s ability to cope and to adjust completely to whatever danger he or she faces. These authors further highlight that traumatic events are able to cause severe harm and lasting changes in a human being’s physiological stimulation, emotion, cognition, and memory. Additionally, Dempsey and Forst (2009) believe that the period that the person is exposed to traumatic events’ impact may show a combination of events becoming uncontrollable to the point of threatening physical and psychological integrity.

Osman (2009) affirms that Trauma Theory represents an essential paradigm shift in the mental health fields. Instead of tracing problems with individuals who are sick and need to be healed as these disciplines have historically done, psycho-traumatology suggests that most persons who suffer mental and emotional distress have been injured within their social environments. Osman (2009) further states that this revolution was as a result of changes from the fundamental question of ‘what
is wrong with you to what happened to you? Osman’s (2009) work also postulates that Trauma Theory assumes that violent experiences, especially of an interpersonal nature have confrontational effects on individuals and human systems. The author states that those confrontational effects are included in the term psychological trauma by highlighting that Trauma Theory challenges the assumption that has been believed for so long by mental health practitioners that the world is basically a safe dwelling for the majority of people, and instead recognises that all human societies are at present controlled by violence.

Traumatic effects can range from minimal to severe weakening. Various authors compare it to be very similar to an event where a person is exposed to severe violence that occurs on a continuum. Individuals, families and cultures will suffer more or less harmful effects of violence depending on a combination of factors: strengths, such as existing coping skills and social support; and vulnerabilities, like cumulative trauma and an ideology that attributes negative beliefs to the experience of violence. The greater the strengths and the lesser the vulnerabilities, the more mildly the reaction tends to be (Osman, 2009). On contrary, a study by Gonzalez (2009) highlights that the origin of Trauma Theory is positioned in three historically divided lines of examination into the effects of violence: these are the study of shell-shock or combat neurosis between World War I and the Vietnam War, and the study of sexual and domestic violence in the last three decades. Gonzalez (2009) further states that psychological trauma is an expression that includes physical, cognitive, emotional, social and behavioural effects of violence. Therefore, it is not a purely psychological phenomenon. The author says that the statement is usually used in the field, and it helps us to distinguish between trauma that is purely physical or medical, and trauma that includes all of the stated systems, although the two are obviously related.
Furthermore, Gonzalez (2009) stressed two important revolutions in the study of psychological trauma. The first stage included the Post-traumatic Stress Disorder (PDS) as a diagnostic label during 1980 and the second one is when the establishment of the International Society for Traumatic Stress Studies in 1985 was accomplished. Moreover, twenty years since then, the field has experienced notable improvements in knowledge production and numerous disciplines are now joining in their findings and contributing to their proficiency to the discussion of trauma. Gonzalez (2009) further highlights that the fourth basis of Trauma Theory which is critical to the understanding of the intergenerational transmission of trauma, is the literature that was developed from the Jewish Holocaust experience. Gonzalez (2009) further argues that in recent times, the development of post-colonial or historical Trauma Theory has emerged as a fifth force. Race scholars and indigenous theorists join in the trauma field to pronounce the experience of populations historically excluded from the mental health literature.

Studies by Gonzalez (2009) and Osman (2009) describe the parallel physical, cognitive, emotional and behavioural effects of trauma on individuals and groups while physical responses to trauma in individuals involve chronic hyper arousal; groups can respond with a fear-based social organisation. The above authors noted that individuals suffer cognitive impact through dissociation, while groups, families and cultures undergo a loss of history. Trauma distracts the relations of individuals and breaks the family and social networks of individuals. As asserted by Osman (2009), trauma can only be treated when there is a belief that healing is possible. This can be done by neutralizing the effects of violence in their original domain. As a result, the answer to fear is the construction of safety and the way to overcome detachment is the incorporation of memories and history into a coherent story. Although the specific interventions used to achieve these goals may have been developed outside of the psycho-traumatology framework, they become trauma-focused when applied in this way (Osman, 2009).
Gonzalez (2009) also revealed that the cultural flexibility of Trauma Theory is boundless. The author states that all individuals and societies are subject to the effects of violence and similar responses to it are largely related to common biological trauma focused interventions and must be adapted to the specific cultural, historical, political and ideological context of clients. The author emphasises that those who design and apply the interventions must have extremely high cultural competencies. Part of their task is to pinpoint the strengths and vulnerabilities to trauma of each individual, family or community they serve. Gradually, members of traditionally traumatised groups are developing interventions specific to their own culture, resulting in a highly effective and accurate viewpoint. This phenomenon has placed marginalised populations at the centre of production of knowledge in the fields of mental health.

2.4.2. Human Security Theory

Human security theory is a paradigm that focusses more on individual rather than national security. The theory asserts that real security exists when employees are free from want and have freedom from fear. This theory is a people-centred which assumes that when individuals have security, it provides a pathway to global security. Therefore, to successfully tackle global security, there is need to pay attention to individual security. The human security discourse came as a result of convergence of factors at the end of the Cold War in 1994. The increasingly rapid pace of globalisation; the failure of liberal state building through the instruments of the Washington Consensus; the reduced threat of nuclear war between the superpowers, the exponential rise in the spread and consolidation of democratisation and international human rights led to the birth of human security theory (UN, 2005). The United Nations recognises the role that security agencies such as the police play in ensuring human security. The police provide economic freedoms that are important for people to seek employment and to move freely, and interact to seek mutually advantageous outcomes in terms of consumption and production. Although the state can provide political freedoms such as the
freedom of speech, freedom of the media, civil liberties, and the freedom to vote for parties, leaders and policies, security agencies such as the police ensure that not any of these provisions are violated. As police officers are involved in providing human security, their ability to serve and protect must be outstanding all the time. The competence of the police force is however affected by a myriad of psychosocial problems which impair their ability to execute their duties effectively which leads to a threat to human security.

UN report (1994) points out that a feeling of insecurity among people today arises from worries about daily life than from the dread of tragic world events. According to the same report, job security, health security, environment security, security from crime and violence are the emerging concerns of human security all over the world. In order to understand the effects of personal and work related psychosocial problems on police officers better, the Trauma Theory and Human Security give a clear map for quality intervention. These theories form a basis on which interventions should be recommended for police officers. They assist in understanding human beings and their relationship with the environment, society and with others. They also assist in understanding the human self and the development of mind, conscious and sociability from within a social context. Evaluating and appreciating these theories' relationships can help professionals understand their own behaviour as well as that of other people. Additionally, these theories provide systematic ways of observing, questioning, and interpreting behaviour, hence, helping professionals to have a conceptual infrastructure of how they conduct assessments and justify their practice.

2.5. Conclusion

This chapter reviewed literature on psychosocial problems experienced by employees at their workplaces with specific focus on the police force. The chapter covered two theories which were of interest to the researcher. The two theories discussed in this chapter the trauma and human security theory. The next chapter gives an overview of psychosocial problems faced by the police officers in the Namibian context.
CHAPTER THREE

THE NAMIBIAN CONTEXT

3.1. Introduction

This chapter looks at the Namibian situation in relation to the effects of work-related and personal problems on Namibian police officers. Article 118 of the Namibian Constitution (2010) provides for the establishment of the Namibian Police Force. The same ACT spells out the functions of NAMPOL Force as preservation of internal security of Namibia, maintaining law and order, prevention of crime, investigating any offences or alleged offences and to protect life and property. The Namibian Police Force is not different from other Police Forces in the world regarding stress experience as described above and their members need to seek suitable counselling.

Informal discussions by Kangunga (2016) with some police officers revealed that many police officers live under intense immense stress compared to other employees working in other formal organisations. A study by Kangunga (2016) found that police officers at the charge offices and police stations are burdened by lack of personnel who are capable of taking statements. The same study also found out that the police force is faced by lack of resources such as transport, communication radios, and office equipment among others. Lack of the above resources is one of the stress factors faced by police officers in Windhoek. Other stress factors among police officers in Windhoek include work overload, and working long hours without remuneration.

In execution of their duties police officers are also exposed to personal and job related psychosocial problems for instance, force members at the border posts are exposed to poor conditions, living in tents during the rainy seasons, and staying far away from their families or spouses for long periods of
These choices form part of the career as noted by Coetzee and Schreuder (2010:1). Since the Namibian Police Force plays a critical role in regional peace security, the effects of the personal and job-related psychosocial factors (job attitudes, occupational psychosocial stress) is worth studying because they have a detrimental effect of their personal’s ability to serve and protect. Haufiku (2015) also identified two major sources of stress: organizational stress and operational stress. Work-related dissatisfaction depicts employees’ attitude towards their job which could have an effect on their level of involvement and commitment to organisational objectives as indicated by Coetzee and Schreuder, (2010) as well as Ongoro (2016).

In Namibia, occupational safety, health, and welfare are provided for in Chapter 4 of the Labour Act 11 of 2007. This chapter is divided into Part A (dealing with the rights and duties of employers and employees) and Part B (which includes provisions concerning health and safety representatives and joint OSH committees). Furthermore, Labour General Regulations No. 261 of 2008 is the implementing regulations of the Labour Act 11 of 2007. In addition, there are other safety and health provisions contained in other regulations and codes such as the Guidelines for the Implementation of the National Code on HIV/AIDS in Employment No. 78 of 1998 (the Code). The Code makes provisions for, among others, risk management, first aid, and compensation of occupational benefits in respect of the contraction of HIV/AIDS in the workplace.

There are a number of provisions addressing psychological health. See for instance: 49 (3)(d), 220(a). Psychological support in crisis intervention is part of the content of the course of first aid training required for first aid attendants by the Regulations (231 (3)(a)(b)). In trying to address psychosocial problems in the Namibian Police (NAMPOL) established the Gender and Welfare Directorate to render professional services to the members of the Namibian Police Force, addresses the psycho-social, spiritual and health related issues which includes HIV/AIDS. That consisted of Health Services, Chaplaincy Service, Social Service, Gender Networking and, HIV Coordination.
As cited in Kangunga (2016), the 2010 Namibian Police annual report by Hamufungu described how many members of the Namibian Police Force resigned, became guilty of misconduct, were medically unfit, or passed away. Hamufungu’s (2010) report did not, however, give reasons for the resignations. It is assumed that resignations are one of a number of symptoms of stress. But this is a clear indication that the psycho-spiritual growth which relate to a police mantra ‘to accept Jesus as your personal Savoir, put the focus on Him through reading the bible, meditation, and be part of the church every Sunday’. Yet, majority of the Police Force members has been affected by stress. According to Kadhila (2011) the Namibian Police Force Annual Report of 2009/2010, mentioned that the country’s law enforcement members experience serious psychosocial problems such as family disorganisation, where police officers experience marital or relationship problems, as well as domestic violence.

On contrary, NAMPOL has an internal Social Services Sub-division, where the researcher is working as a Chief Social Worker. This Sub-division renders psychosocial services to members of the Force and their immediate families it recorded 29 cases of family disorganisation in the year 2009/2010 as noted by Hamurungu (2010). It was followed by substance abuse with 24 cases reported. Psychosocial problem such as depression was also one of the highest phenomena recorded; with 22 cases reported. Finally, HIV/AIDS and health related issue were significant issues among this population. Similarly, Kanguatjivi (2012) found out the following were typical stressful incidents that were common reported within the Namibian Police Force: such as shooting incidents where an individual has been shot or has shot another person. Attempt suicide or and complete suicide were also observed. Other stressful incidences were motor vehicle accidents, armed robberies, rape, murder physical attack on a person or family member, friend or colleague.

Kanguatjivi (2012) further revealed that in the Namibian situation, Police Officers seems to be exposed to a range of stressful and traumatic incidents that range from suicide, shooting incidents, murder cases, rape cases and domestic violence cases. In addition to that findings in the research
done by the Namibian Police Force; Force Policy and Planning Directorate, (2010) explicated that the excessive usage of alcohol among members of the Namibian Police Force had a negative effect on their productivity and discipline. According to Afunde (2006) suicide is common in police service. The author argue that religious people were less suicide prone to commit suicide than those who do not adhere to religious systems, due to the point that (believers) integrated people into groups. In groups people felt less lonely and isolated, and suicidal thoughts were softened among them. This prompted the Office of Chaplaincy to think about the introduction of the Religious Support Groups to be established in the Force. This is likely to help members of the force to share their personal problems with others (Afunde, 2006). This intervention strategy was also recommended (verbal communication) by former Social Workers in the NAMPOL as noted by Cloete and Mukundja (2001). The authors stated that the better the support system of the members internally as well as externally the healthier it will help the employees to deal with personal matters.

Similarly, Haufiku (2015) stated that symptoms of post-traumatic situations may include numbed responsiveness, impaired memory alternating with instructive, disturbing images of the incident, irritability, hyper vigilance, impaired concentration, sleep disturbing, anxiety, depression, phobic avoidance, social withdrawal, and substance abuse. The author stated that in most cases there may be no particular trauma; however the mental breakdown limits the increasing load of everyday stress over the course of the police officer’s profession. Arguably, there is no society that is critically linking citizens to the state like policing, because the arm of the state defends against anarchy and preserves the rule of law in a democratic society as pointed out by Finn and Tomz (1998) and Martinussen et al., (2007). The state of exhaustion is therefore considered an extreme reaction to stress, using social intervention to anticipate such events as recommended by Cloete and Mukundja (2001).
Since the consequence of stress is a person’s inability to accomplish work-related goals or implement the available solutions for work-related problems, it is necessary for polic officers to deal with emotional instability immediately. As stated by Toch et al., (2002) and Osman (2009), positive working environment is a social-driven factor that require individual to be conscious. Due to the ostensibly functional nature of their work, employees should not just do the routines required, but seek to interact and actually engaged in their work in terms of improving their performance and service quality. Various sentiments discussed seem to agree with Ongoro (2016) and Bulker (2007) who stated that sources of police stress include stressors derived from critical incidents, general work, family, gender and the organisation. These experiences are referred to critical incidents events that are beyond the realm of usual experiences, igniting the emergence of a crisis reaction in those adversely affected.

Characteristically, a critical incident is an unexpected occurrence disrupting an officer’s control, beliefs, and values. It represents a life threat, triggering emotional or physical vulnerability, and might include events such as a fellow officer being killed or assaulted, barricaded subjects, apprehending emotionally disturbed offenders, or harming or killing an innocent person. In addition, Bulker (2007) says that events represent stressors, and reactions represent critical responses, which can be seen as an attempt at psychological homeostasis or a mental balance as a result of the experience of a stressor. The degree an officer is affected depends on the intensity, duration, and unexpectedness of the event. Besides the above it also depends on the officer’s involvement, previous experiences, and mental health.

Nietzsche (2016) also agrees with Bulker (2007) that professional crisis intervention with officers experiencing critical events enhances self-esteem and discourages abusive behaviour and substance abuse. Both work mentioned that effective crisis intervention requires an immediate mandatory debriefing: a short term psychological method of stabilising and guiding an officer towards independent functioning. Debriefing includes ventilation and abreaction, social support, and adaptive
coping. However, in Namibia such services are not rendered on time to officers. Accordingly, it is evidence that, debriefing provides a standard of care, which may include making tactical plans to adapt to the incident, communication of coordinated actions, and avoidance of independent action or separation of partners during felony pursuits.

Notwithstanding, officers resilience suggest that same factors contributing to an officer's vulnerability to stress are the factors that contribute to the resilience or intuitive policing represents a decision-making process learned through critical incident experiences. Critics of debriefing contend that while it would aid in immediate stress responses to some extent, it would not help resolve long term psychological disturbances, it would accentuate stress responses which could be post-traumatic stress disorder as elaborated next.

3.2 Post-Traumatic Stress Disorder

In general, some of the police officers had directly experienced Post Traumatic Stress, as some of the members of the Namibian Police Force are war survivors, and some experienced prolonged, maladaptive stressful reactions, such as posttraumatic stress disorder. The war events in various occasions could affect the Force members emotionally in one way or another. The Force members’ ability to recover from the war or calamity will be determined by the maturity of individual and the resources of counselling at their disposal. They need psycho-spiritual support (to be taken care and be given psycho-spiritual healing and counselling), time, and a strong belief in God. This is a challenge that comes in the form of potentially traumatic experiences, such as life-threatening physical assault, or witnessing disturbing images of death. Others spent days and nights chased by military vehicles and helicopters, sleeping in the bush, suffering under cold and heavy rain, going without food and water for several days, sometimes surviving on unusual food, staying many years away from their families.
CHAPTER FOUR

RESEARCH METHODS

4.1. Introduction

This chapter presents the methodology that was used during the study. It describes the research design, location of study, and population of study. It also gives a description of sampling procedures and sample size, data collection instrument and data collection and analysis procedures. Finally, this chapter discussed the ethical issues that were considered when this study was conducted.

4.2. Research Design

There are two research designs available for researchers to use when conducting research studies. Research design spells out the type of the research that would be suitable, the persons or situations from which to collect the data, the type of data needed, and how to collect and analyse the data (Leedy and Ormrod, 2012). These are qualitative and quantitative research designs. The research design that was adopted for this study was qualitative research design. Qualitative research design is analysis of non-numerical data (Leedy and Ormrod, 2012). Since this study aimed at investigating the effects of personal and occupational psychosocial problems on work performance among uniformed police officers at Windhoek Police Station, qualitative research design was the most appropriate because it helped the researcher to understand the feelings of the research participants.

4.3. Population

According to Saunders, Lewis and Thornhill (2016), the population of a research study refers to the members who share the same characteristics and deemed to be able to provide data needed for
drawing the conclusions and recommendations from the study. The target research population for this study was police officers in the operational unit at Windhoek Police Station. The population consisted of 366 police officers holding different ranks as per Namibian Police Human Resources Directorate’s statistics.

4.4. Sample

This study utilised non-probability sampling as a sampling procedure. From the population size of three hundred and sixty six at the ninety five present confidence interval, such a population results into a sample size of one hundred and twenty four respondents. From a population of 366 police officers targeted, a sample of 70 police officers was selected as the sample. Out of the 70 police officers who were selected, 63 participants completed the require instrument and therefore analysis was done based on the responses obtained from a sample of 63 police officers.

4.5. Research Instruments

Data collection instrument refers to a series of interrelated activities aimed at gathering rich information to answer emerging questions. A semi structured questionnaire was utilised as the main method of data gathering. This method of data collection falls under general interviewing but in this case there were pre-formulated questions that serve to guide the process. The data in this form of study could be converged or it could be ordered sequentially with one building on the other. The data instrument was distributed to the selected sample to complete the questions contained in the questionnaire.

4.6. Procedure

The research procedures define the structures of detailed steps that were followed in the given research study. Therefore, this part of the study outlines the process that was followed in collecting
data as well as analysing the data as proposed by Welman, Kruger and Mitchell (2011). The permission letter was written to the Inspector General of the Namibian Police Force to seek permission to conduct a research study at Windhoek Police Station. Upon receipt of the permission letter, the Windhoek Police Station management was notified by letter of the possible dates and time. The researcher reviewed the informed consent letter which was produced by the University of Namibia with the Station Commander and participants.

4.7. Data Analysis

Data analysis comprises the examination of meanings people attach to certain words and actions. This process involves descriptions and interpretations of raw material. Throughout the process of data collection, the researcher identified and listed the categories and reduced them into themes, as data analysis includes breaking up the data into manageable themes, trends and relationships. In this study Microsoft Excel was use as a data analysis tool.

4.8. Research Ethics

The researcher factored in the issue of ethics when conducting this study. First of all, permission to conduct the study was obtained from the Inspector General of the Namibian Police Force. Before permission was obtained from the Inspector General of Police, introduction letter from UNAM was submitted to the Inspector General to seek permission to conduct the study. Additionally, a written consent was obtained from the research participants with regard to their participation in the study. Participants were fully informed about the tasks that are expected of them. This was done in a clear manner using simple language which the participants understood. As recommended by Babbie (2008), Creswell (2014) as well as Welman, Kruger and Mitchell (2011), the basic elements of informed consent are: a brief description of the study and its procedures as they involve participants; full identification of the researcher’s identity, including an address and
telephone number for future contacts.; an assurance that participation is voluntary and the respondents have the right to withdraw at any time without penalty; an assurance of confidentiality; and disclosure of any risks or benefits associated with participation in the study. All the above aspects were observed in this study.

4.9. Conclusion

In this chapter, the researcher discussed the methodology utilised from the beginning of the study. The research approach adopted in this study was qualitative research design and the instrument for data collection used was qualitative questionnaire. The next chapter presents and analyses the results obtained from a sample drawn from Namibia police force employees, Windhoek police station.
CHAPTER FIVE

DATA PRESENTATION AND ANALYSIS OF THE FINDINGS

5.1 Introduction

This chapter presents the results and analyses data that was obtained from a sample of sixty-three (63) research participants drawn from Windhoek police station. This study aimed at achieving three specific objectives. The specific objectives of this study were to investigate the effects of personal and psychosocial problems on work performance among uniformed police officers at Windhoek police station, examine the types and causes of personal and work related psychosocial problems among police officers at Windhoek police station, and to recommend strategic policy remedies that can be adopted to address the effects of psychosocial problems on work performance in NAMPOL. The data is presented in tables, graphs and qualitative description. This chapter covers the response rate, socio-demographic information of research participants, presentation and analysis of data, and discussion of research results in relation to literature.

5.2 Response Rate

<table>
<thead>
<tr>
<th>Questionnaires distributed</th>
<th>Questionnaires returned</th>
<th>Percentage</th>
<th>Questionnaires not retrieved</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>70</td>
<td>63</td>
<td>90%</td>
<td>7</td>
<td>10%</td>
</tr>
</tbody>
</table>

*Table 1: Response rate*

A total of 70 inquiry forms were distributed to the selected participants from NAMPOL at Windhoek police station. The table above shows that most of the questionnaires distributed to the selected police officers in Windhoek were answered
and successfully retrieved. From a total of 70 questionnaires distributed, 63 were retrieved representing a response rate of 90% and the remaining 7 questionnaires representing 10% of the questionnaires were not retrieved. The analysis is therefore based on 63 questionnaires that were retrieved. Since the response rate was 90%, the sample of questionnaires retrieved was large enough to provide answers that were needed for the completion of this study.

5.3. Presentation of Socio-Demographic Characteristics of Study Participants

5.3.1. Gender of research participants

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of participants</td>
<td>21</td>
<td>42</td>
<td>63</td>
</tr>
<tr>
<td>Percentage</td>
<td>34%</td>
<td>66%</td>
<td>100%</td>
</tr>
</tbody>
</table>

*Table 2: Gender of respondents*

Table 2 above reveals that the majority of participants who took part in this study female. From a sample of 63 police officers who took part in this study, 66% were female while the remaining 34% were male.

5.3.2. Age groups of participants
The majority of the research participants who took part in this study were aged between 31 and 40 years. From a sample of 63 research participants, 5% were aged between 20 and 24 years of age, 17% were aged between 25 and 30 years, 41% were aged between 31 and 40 years and the remaining 37% were aged 41 years and above.

5.3.3. Level of education of research participants

<table>
<thead>
<tr>
<th>Level of education</th>
<th>Response</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 10</td>
<td>12</td>
<td>19%</td>
</tr>
<tr>
<td>Grade 12</td>
<td>27</td>
<td>43%</td>
</tr>
<tr>
<td>Tertiary</td>
<td>14</td>
<td>22%</td>
</tr>
<tr>
<td>Postgraduate</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Others</td>
<td>10</td>
<td>16%</td>
</tr>
<tr>
<td>Total</td>
<td>63</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 3: Level of research participants of education

The majority of participants who took part in this study had Grade 12 level of education. From the table above, 19% of the research participants had Grade 10 level of education, 43% had grade 12 education, 22% had tertiary education, and the
remaining 16% had other forms of education. None of the research participants selected had postgraduate qualification. This statistics suggest that most of the participants selected occupied operational positions at NAMPOL.

5.3.4. Years of work experience at NAMPOL

<table>
<thead>
<tr>
<th>Service years</th>
<th>Response</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>4</td>
<td>9</td>
<td>14%</td>
</tr>
<tr>
<td>5</td>
<td>9</td>
<td>14%</td>
</tr>
<tr>
<td>6</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>7</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>8</td>
<td>12</td>
<td>19%</td>
</tr>
<tr>
<td>9</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>10</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>11</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>12</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>14</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>15</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>16</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>18</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>20</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>21</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>22</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>23</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>24</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>25</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>63</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

*Table 4: Years of working experience*

Most of the participants selected had worked for NAMPOL for a period of between 6 and 10 years. From the table above, a total of 30% had working experience of between 1 and 5 years, 35% had working experience of between 6 and 10 years, 15% had working experience of between 11 and 15 years, 8% had working experience of between 16 and 20 years and the remaining 14% had working experience of between 21 and 25 years.

5.3.5. Ranks of research participants

<table>
<thead>
<tr>
<th>Respondents profile</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rank</td>
<td>No.</td>
<td>Percentage</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-----</td>
<td>------------</td>
</tr>
<tr>
<td>Constable</td>
<td>27</td>
<td>43%</td>
</tr>
<tr>
<td>Sergeant (2)</td>
<td>16</td>
<td>25%</td>
</tr>
<tr>
<td>Sergeant (1)</td>
<td>6</td>
<td>10%</td>
</tr>
<tr>
<td>Warrant officer (2)</td>
<td>10</td>
<td>16%</td>
</tr>
<tr>
<td>Warrant officer (1)</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Inspector</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>Chief inspector</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Deputy Commissioner</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Commissioner</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>63</td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

**Table 5: Ranks of research participants**

The most represented position in this study was the rank of the police constable. From the sample of 63 participants, 43% were at the rank of police constables, 25% were at the rank of Sergeant 2, 10% were at the rank of sergeant 1, 16% were warrant officers 2, 2% were warrant officers 1, 3% were at the rank of inspector and the remaining 2% were at the rank of chief inspector. Commissioners and deputy commissioners were not represented in this study.

### 5.3.6. Number of years serving the current rank

<table>
<thead>
<tr>
<th>No. of years in current rank</th>
<th>No indication</th>
<th>1</th>
<th>2</th>
<th>2.5</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>12</th>
<th>21</th>
<th>22</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of people</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>9</td>
<td>11</td>
<td>22</td>
<td>5</td>
<td>2</td>
<td>4</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>
Table 6: Number of years spent in one position

The majority of research participants had served in the same position for a period of five years and longer. From table 5 above, a total of 38 research participants representing 60% of the total sample had served in the same positions for a period of five years or longer. The above statistics show that NAMPOL rarely promotes its employees. Failure to promote employees may lead to stress, hence, undermining the productivity of employees since employees are demotivated.

5.4. Data Presentation and Analysis

5.4.1. Personal psychosocial problems experienced by police officers

Research participants were asked about the personal psychosocial problems experienced by police officers outside the work environment. The responses obtained are summarised in the table below.

<table>
<thead>
<tr>
<th>Types of psychosocial problems</th>
<th>Numbers</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marital problems</td>
<td>32</td>
<td>50.8%</td>
</tr>
<tr>
<td>Alcohol</td>
<td>13</td>
<td>20.6%</td>
</tr>
<tr>
<td>Health issues</td>
<td>11</td>
<td>17.5%</td>
</tr>
<tr>
<td>Others (loneliness, loss of loved ones, family demands)</td>
<td>15</td>
<td>23.8%</td>
</tr>
</tbody>
</table>

Table 7: Personal psychosocial problems experienced by participants

Based on table 7 above, it can be seen that most police officers experience marital problems and other personal challenges such as loneliness, losing of the loved ones, excessive family demands, and little income which impairs their functioning at work. From a sample of 3 research participants, 50.8% indicated that they experience marital problems, 20.6% indicated that they struggle with alcohol, 17.5% indicated
that they have diverse health issues and the remaining 23.5% indicated that they have experienced other challenges in their lives such as loneliness, loss of loved ones, and excessive demands and limited incomes to meet personal and family needs. When employees are emotionally drained because of personal challenges that they go through, they may not be productive at work if appropriate remedies are not taken, it may negatively affect the performance of employees at work.

5.4.2. Types of work related psychosocial problems experienced by police officers

The research participants were asked to list some of the problems that they encounter at work which make them to be less productive because of emotional stress caused by the unfavourable factors at their work place. Research participants identified a number of factors which according to them make their work less appetising. The graph below shows a summary of the responses obtained from the research participants.
This study reveals that a combination of factors is responsible for the psychosocial problems experienced by police officers at Windhoek police station. As depicted from the figure above, lack of promotion, poor pay, work overload, prolonged overtime work, exposure to traumatic scenes, poor management and leadership style, tribalism and discrimination at work, exposure to life threatening situations, and other factors are some of the factors causing police officers at Windhoek police station to experience psychosocial problems. As depicted by the figure above, a total of 10% of the respondents were dissatisfied with their level of pay, 15% indicated that the main stress factor they face at NAMPOL is work overload, 10% are stressed because of exposure to traumatic situations and event at work, 6% find the management and leadership style employed at NAMPOL as a stressful factor, 15% are stressed because of discrimination and tribalism which is evident at NAMPOL, 6% indicated that prolonged overtime work causes them to have stress, 17% indicted that exposure to life threatening events and situations causes them to have stress, and the remaining 5% indicated that other factors other than the ones cited above makes them to have stress.

Besides singling out some of the above factors as stressors in the police force, one of the respondents went ahead to state that “...the Namibian Police will be killed by favouritism one day. Commanders must reframe from befriending with subordinates at work. Now they become close friends with subordinates and these subordinates start using them against us who are not their friends. They create hatred in a workplace. At the end we develop resentment towards them; even if they did nothing wrong it is just in our minds because we know their patterns and trends. If
commanders reframe from favouritism and treat each member equal work will be done properly”.

5.4.3. Effects of psychosocial problems on the psychosocial functioning of the Police Officers

The researcher wanted to determine from the participants how they react towards psychosocial problems. Results obtained from the respondents indicate that psychosocial problems experienced by police officers makes them to feel frustrated, stressed, depressed, confused, and some feel suicidal thoughts. In relation to this Parson (2004) describes the dynamics of policing as an occupation that creates opportunities for them to experience many psychosocial hazards such as stress, suicide, sexual harassment, and discrimination. Parson (2004) notes that psychosocial problems may result in various kinds of stress which may cause their victims to hate their work because of loss of interest.

<table>
<thead>
<tr>
<th>Respondents views</th>
<th>Numbers</th>
<th>Percentage</th>
</tr>
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<tr>
<td>Depression</td>
<td>15</td>
<td>24%</td>
</tr>
<tr>
<td>Put leave</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>Stress</td>
<td>25</td>
<td>39%</td>
</tr>
<tr>
<td>Thinking of suicide</td>
<td>8</td>
<td>13%</td>
</tr>
<tr>
<td>Excessive drinking</td>
<td>2</td>
<td>3%</td>
</tr>
<tr>
<td>Frustrated</td>
<td>3</td>
<td>5%</td>
</tr>
<tr>
<td>Staying away AWOL</td>
<td>8</td>
<td>13%</td>
</tr>
<tr>
<td>Total</td>
<td>63</td>
<td>100%</td>
</tr>
</tbody>
</table>

*Table 8: Effect on psychosocial functioning*

Table 8 above shows the summary of the responses about the effects of psychosocial problems on the social interactions of police officers. As depicted by the table above,
24% of the police officers indicated that they psychosocial problems make them to suffer from depression, 39% get stressed, 13% develop suicidal thoughts, 3% engage in heavy drinking in order to relieve their selves from stress, 5% put on leave in order to get some rest, 5% feel frustrated, and the remaining 13% stay away from work without official leave. The above emotions and actions greatly affect the performance of police officers and undermine their ability to keep law and order in society besides providing security to the citizens. High rate of absenteeism affects the reputation of the police force. In agreement with the above findings, Parson (2004) describes the dynamics of policing as an occupation that creates opportunities for them to experience many psychosocial hazards such as stress, suicide, sexual harassment, and discrimination. Parson (2004) notes that psychosocial problems may result in various kinds of stress which may cause their victims to hate their work because of loss of interest.

5.4.4. Effects of psychosocial problems on work performance

The researcher wanted to find out from the participants whether or not employees experiencing personal and work-related psychosocial have challenges in carrying out their duties.
The majority of research participants indicated that psychosocial problems negatively affect employee performance. From a sample of 63 research participants, 81% indicated that personal and work-related psychosocial problems negatively affect employee performance while only 19% of the participants indicated that personal and psychosocial problems of employees have no effect on employee performance. These findings are consistent with what was revealed by an earlier study done by Finn and Tomz. A study by Finn and Tomz (1998) found out that psychosocial problems has an impact on individual’s well-being because it affects a person’s ability to concentrate which would result in poor judgments. Therefore, since psychosocial problems affect the ability of police officers to make informed judgments, their ability to maintain law and order in society gets affected.

5.4.5. Coping measures to overcome psychosocial problems by police officers

The researcher wanted the participants to share their coping mechanisms after experiencing psychosocial problems. Table 9 below shows how police officers at Windhoek Police Station cope with psycho-social problems.
<table>
<thead>
<tr>
<th>Respondents coping strategies</th>
<th>Numbers</th>
<th>%</th>
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<tbody>
<tr>
<td>Put leave</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>Go for counselling</td>
<td>8</td>
<td>13%</td>
</tr>
<tr>
<td>Try to talk to someone</td>
<td>11</td>
<td>17%</td>
</tr>
<tr>
<td>Visit psychologist/social workers</td>
<td>34</td>
<td>54%</td>
</tr>
<tr>
<td>Drinking or go to cash loan</td>
<td>3</td>
<td>4%</td>
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<tr>
<td>Talk to my commander</td>
<td>6</td>
<td>10%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>63</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>

| Table 9: Coping measure with psychosocial problems |

This study reveals that the majority of police officers go to psychologists or social workers within NAPOL for help. As indicated by table 9 above, 2% of the research participants always opt to put on leave in order to deal with stress, 13% go for counselling, 17% try to talk to someone one for help, 54% visit psychologists, 4% resort to drinking or go for cash loans to ease their stress while the remaining 10% talk to their commanders about their situations. International Labour office and World Health Organization (1984) identify excessive alcohol consumption and escapist drinking behaviour as one of the several pathogenic mechanisms in response to psycho-social stressors at work. Cloete and Mukundja (2001) also identify alcohol and drug use as major stress consequences for police officers which could force them to seek for counselling, yet majority never attempt to admit their compulsive habits.

5.5. Discussion of Results

The overall objective of this study was to investigate the effect of psychosocial problems on police personal to serve and protect at Windhoek Police Station in Windhoek, Namibia. The specific objectives of this study were to investigate the effects of personal and psychosocial problems on work performance among uniformed police officers at Windhoek police station, examine the types and causes of
personal and work related psychosocial problems among police officers at Windhoek police station. This study had two main objectives. The discussion of results is therefore done per objective.

**5.5.1. Personal psychosocial problems faced by police officers at Windhoek police Station**

This study revealed that personal psychosocial problems faced by most police officers working at Windhoek police station are marital problems, health problems, broken love relationships, loneliness, losing of the loved ones, excessive family demands, and little income which impairs their functioning. These findings are consistent with findings in literature. For example, a study by Dempsey and Forst (2009) affirmed that marital or family distractions for instance extramarital affairs, divorce or domestic violence impair the normal functioning of police officers.

**5.5.2. Work-related psychosocial problems faced by police officers at Windhoek police Station**

This study revealed that a combination of work-related factors is responsible for the psychosocial problems experienced by police officers at Windhoek police station. This study found out that lack of promotion, poor pay, work overload, prolonged overtime work, exposure to traumatic scenes, poor management and leadership style, tribalism and discrimination at work, exposure to life threatening situations, and other factors are some of the factors causing police officers at Windhoek police station to experience psychosocial problems. These findings are consistent with findings in literature. A workforce with broken relations may affect job performance and communication in terms of work allocation and giving feedback of work done (Hogos, 1980). According to Hogos (1980), occupational accidents are frequently
associated with psychosocial factors. Hence, officers of any age may struggle with issues of depression, suicidal ideation, anger, aggression, separation issues, relationship problems, or childhood physical or sexual abuse.

5.5.3. Effects of psychosocial problems on the psychosocial functioning of the Police Officers

This study established that indicate that psychosocial problems experienced by police officers makes them to feel frustrated, stressed, depressed, confused, and some feel suicidal thoughts. In relation to this Parson (2004) describes the dynamics of policing as an occupation that creates opportunities for them to experience many psychosocial hazards such as stress, suicide, sexual harassment, and discrimination. Parson (2004) notes that psychosocial problems may result in various kinds of stress which may cause their victims to hate their work because of loss of interest.

5.6. Conclusion

This chapter presented, analysed and discussed results obtained from a sample of 63 research participants. This study has revealed that a combination of work-related factors is responsible for the psychosocial problems experienced by police officers at Windhoek police station. This study found out that lack of promotion, poor pay, work overload, prolonged overtime work, exposure to traumatic scenes, poor management and leadership style, tribalism and discrimination at work, exposure to life threatening situations, and other factors are some of the factors causing police officers at Windhoek police station to experience psychosocial problems.

Additionally, this study revealed that personal psychosocial problems faced by most police officers working at Windhoek police station are marital problems, health
problems, broken love relationships, loneliness, losing of the loved ones, excessive family demands, and little income which impairs their functioning.

The next chapter concludes the study by giving a summary of key findings, recommendations for actions and finally conclusion of the study.
CHAPTER SIX

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

6.1. Introduction

This chapter looked at the discussion, it also looked at limitation of the study, and recommendations were also made to various divisions of the Namibian Police and finally conclusions.

6.2. Summary of key findings

The overall objective of this study was to investigate the effect of psychosocial problems on police personal to serve and protect at Windhoek Police Station in Windhoek, Namibia. The specific objectives of this study were to investigate the effects of personal and psychosocial problems on work performance among uniformed police officers at Windhoek police station, examine the types and causes of personal and work related psychosocial problems among police officers at Windhoek police station, and to recommend strategic policy remedies that can be adopted to address the effects of psychosocial problems on work performance in NAMPOL. To achieve the above research objectives, this study adopted qualitative research design. A sample of 70 research participants were selected using purposive sampling but only 63 answered the research instrument and returned back to the researcher. This study found out that:

i. The management of NAMPOL rarely promoted its employees since the majority of research participants had served in the same position for a period of five years and longer.
ii. Most police officers experience marital problems and have personal challenges such as loneliness, losing of the loved ones, excessive family demands, and little income which impairs their functioning at work.

iii. This study reveals that a combination of factors is responsible for the psychosocial problems experienced by police officers at Windhoek police station such as lack of promotion, poor pay, work overload, prolonged overtime work, exposure to traumatic scenes, poor management and leadership style, tribalism and discrimination at work, exposure to life threatening situations, and other factors are some of the factors causing police officers at Windhoek police station to experience psychosocial problems.

iv. The researcher wanted to determine from the participants how they react towards psychosocial problems. Results obtained from the respondents indicate that psychosocial problems experienced by police officers makes them to feel frustrated, stressed, depressed, confused, and some feel suicidal thoughts.

v. The majority of research participants indicated that psychosocial problems negatively affect employee performance. When employees are emotionally drained because of personal challenges that they go through, they may not be productive at work if appropriate remedies are not taken, it may negatively affect the performance of employees at work.

vi. This study reveals that the majority of police officers go to psychologist or social workers within NAPOL for help.
6.3 Conclusion

This study aimed at investigating the effect of personal and work-related psychosocial problems on police personnel to serve and protect a case of the Windhoek Police Station in Windhoek, Namibia. The studies revealed that police officers at Windhoek Police Station in Windhoek, Namibia, are also affected by personal and work-related psychosocial problems that they are experiencing on a daily basis. They claimed that they had suffered frustration, depression due to psychosocial problems they experience on a daily basis. Hence, some of the respondents’ believed that psychosocial problems have a negative effect on their minds and in the way they performing their national duties that of serve and protect the nation.

Psychosocial effects continue to have a big effect on Police officer’s work performance. It is suggested that more research need to be done that may guide in the establishment of psychosocial wellness programs in the Namibian Police Force. This may assist in coming up with devices and strategies in addressing productivity issues. It will further help employees and employers to identify and measure the effects of psychosocial problem. Effects of psychosocial problems such as alcohol abuse, relationship, marital, stress, depression, anger, anxiety, and trauma were the independent variable, while job performance as affected by psychosocial problems is the dependent variable.

6.4 Recommendations

Based on the findings from this study, the following recommendations are made to various stakeholders within the police force:
i. The management of NAMPOL should ensure that all police stations across the country have mental health workers such as social workers and chaplains in order to render debriefing and diffusion sessions aimed at helping police officers who attend to traumatising scenes of crime.

ii. The number of social workers should be increased in order to give all police officers access to professional help that will enable them to overcome psychosocial challenges that they are exposed to.

iii. The management of NAMPOL should come up with quarterly employee performance management template which makes it mandatory for all police officers to attend debriefing sessions. This will help professionals such as medical doctors, psychiatrists, and psychologists to monitor and evaluate police officers' wellness.

iv. The management of NAMPOL should construct rehabilitation units across the country with multidisciplinary professionals such as medical doctors, psychiatrists, and psychologists in order to help members who witness traumatic events.

v. Advanced training can be conducted to all mental health workers in the Namibian Police Force to be able to deal with issues such as diffusion and crisis interventions as well as employee wellness programs advanced training.

vi. Management of NAMPOL should encourage communication and social support to affected officers in order to help them overcome psycho-social problems.

vii. Police officers should learn how to live a balanced life of work and home and to stay away from stressors that might add to the psycho-social problems and traumas that they are exposed to in the course of discharging their duties.
References


48


Young, M., Koortzen, P., & Oosthuizen, R. M. (2012). Exploring the meaning of trauma in the South
APPENDIX A: RESEARCH ETHIC LETTER

UNAM UNIVERSITY OF NAMIBIA

APPLICATION FORM

(INFORMATION SHOULD BE TYPED)

RESEARCH ETHICS COMMITTEE

Original UREC Trails Application Forms must be made available to the Centre for Research and Publications upon request

SECTION 1: DETAILS OF APPLICANT/PRINCIPAL INVESTIGATOR

<table>
<thead>
<tr>
<th>Title, First name, Surname:</th>
<th>Student number:</th>
<th>PROJECT ID NUMBER (Official Use)</th>
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</thead>
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<tr>
<td>Mrs. Ilona Ndjendja</td>
<td>9508279</td>
<td></td>
</tr>
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</table>

Professional Status:

University DIVISION: Faculty of Science/ School of Military Science

University DEPARTMENT: Security and Strategic Studies

Complete Postal Address: P. O. Box 9638, Windhoek

Telephone No.: 264812602016

E-mail address: indjendja@yahoo.com

Registration with MOHSS* □ Yes □ No x

Registration #:

*Note:

- or equivalent statutory health council registration no. as appropriate
- if registration is pending, submit proof of application
- if a non-medically trained PI is overseeing research which involves medical procedures, the application must
Include a medical doctor registered with the MOHSS as a co-investigator.

**SECTION 2: TITLE OF STUDY**

Title of Research Project:

An investigation of personal and occupational psychosocial problems effects on work performance: Case study of Windhoek Police Station

Sponsor’s Protocol No (if applicable)

Sponsor’s Details (if applicable)

Is this a sub-study (new research question) linked to an existing/main study? [ ] Yes [ ] No

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<td>Name of Degree: Master of Arts in Security and Strategic Studies</td>
<td>Supervisor: Prof. Piet van Rooyen</td>
<td></td>
</tr>
<tr>
<td>Division: School of Military Science</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department: Security and Strategic Studies</td>
<td>E-mail: <a href="mailto:rooi@unam.na">rooi@unam.na</a></td>
<td></td>
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</table>
## SECTION 4: DETAILS OF COLLABORATING INVESTIGATORS

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<th>Position and role</th>
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## SECTION 5: DETAILS OF SUB-INVESTIGATORS

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<td>2.</td>
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<tr>
<td>3.</td>
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</tbody>
</table>

## SECTION 6: WHERE WILL THE STUDY BE CONDUCTED?

1. Windhoek Central Hospital
2. Oshakati Hospital
3. ....... Hospital
4. Faculty of Medicine and Health Sciences
5. Other: please list

## SECTION 7: HUMAN SUBJECTS RESEARCH PROTECTION

1. Does the Research involve Human Subjects who are Alive?
   - [ ] Yes  [ ] No
   - Dead (includes identifiable tissues specimens)?
     - [ ] Yes  [ ] No
   - Medical records only?
     - [ ] Yes  [ ] No
   - Students, staff or alumni of the University of Namibia
     - [ ] Yes  [ ] No

2. Will any medicine be tested during the investigation?
   - [ ] Yes  [ ] No
   - 2.1 If Yes to question 2, is the medicine approved by the Medicines Control Council?
     - [ ] Yes  [ ] No
   - 2.2 If yes to question 2.1, is the medicine registered for the dose which will be used in this specific project?
     - [ ] Yes  [ ] No
   - 2.3 If Yes to question 2.1, is the medicine registered for the indication(s) which will be used in this specific project?
     - [ ] Yes  [ ] No
   - 2.4 If No to question 2.1, is the medicine approved by the Medicines Control Council for your use in this specific project?
     - [ ] Yes  [ ] No
   - 2.5 If No to question 2.2 and/or 2.3, is the medicine approved by the Medicines Control Council for your use in this specific project?
     - [ ] Yes  [ ] No

3. Will any radioactive material be administered to the patient during the investigation?
   - [ ] Yes  [ ] No
4. Is any biohazardous material (*) involved in the project?

(*) "Biohazardous material" refers to recombinant DNA molecules, viruses, fungi, parasites, bacteria and all other potentially biohazardous material or products that are dangerous to both the experimental patient and the researcher.

| □ Yes | □ No |

SECTION 8: RESEARCH WITH CHILDREN

1. Does your research involve children? (A child is defined as a person younger than 18)

| □ Yes | □ No |

If no, please continue to section 9

If yes, please specify the age range of potential child

1.1 Indicate whether the child research is Therapeutic or Non-therapeutic (Please check [✓] the appropriate box below and provide a brief justification)

1.1.1 Therapeutic research = Interventions that hold out the prospect of direct health-related benefit for the child participant; OR

1.1.2 Non-therapeutic research = Interventions that do not hold out the prospect of direct health-related benefit for the child participant but results may be produced that significantly contribute to generalisable knowledge about the child participant's condition.

1.1.3 Brief justification:

1.2 Indicate which risk category is applicable to your research involving children (Please check [✓] the appropriate box below and provide a brief justification)

1.2.1 "The research poses no more than minimal risk to the child (that is, the risk commensurate with daily life or routine medical or psychological examinations — referred to as 'negligible risk' in some guidelines);"

1.2.2 The research poses more than minimal risk but holds out the prospect of direct benefit for the child participant.

1.2.3 The research poses a minor increase over minimal risk, with no prospect of direct benefit to the child participant, but will likely yield generalisable knowledge about the condition under study;

1.2.4 The research does not meet the conditions for the risk categories above but presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of children.

1.2.5 Brief justification:

1.3 This research is essential research for children and presents a reasonable opportunity to further the understanding, prevention, or alleviation of a serious problem affecting the health or welfare of children.

| □ Yes | □ No |

SECTION 9: STUDY TYPE

| 1. Industry Sponsored Clinical Trial | 2. Self Initiated Clinical Trial |
| 3. Retrospective Record Review | 4. Laboratory-Based Research |
| 5. Qualitative Research | 6. Prospective Descriptive Study |
| 7. Other | Please state type if 'Other': |

SECTION 10: HOW IS THIS RESEARCH FUNDED? (State approximate total budget)
<p>| | | |</p>
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<th></th>
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<tbody>
<tr>
<td>1.</td>
<td>Industry</td>
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<td>2.</td>
<td>NIH/US government funded research, etc.</td>
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<td>3.</td>
<td>Other international grant funded research (e.g. Welcom Trust)</td>
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</tr>
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<td>8.</td>
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### SECTION 11: DISCLOSURES

1. Have you acquainted yourself with the code of conduct regarding the Ethics of research at this Institution and do you undertake to fully comply with it at all times? □ Yes □ No

2. Has this study been, or is it likely to be, submitted to any other Research Ethics Committee? □ Yes □ No

2.1 If yes, please name the Committee(s) and provide outcome i.e. approved/rejected. (If approved, attach approval letter)

3. Has the Principal investigator or any of the co-investigators been previously/or are presently being investigated for alleged research misconduct? □ Yes □ No

3.1 If yes, please provide details and dates

4. Are any of your intended research participants in other research studies and/or trials? □ Yes □ No

4.1 If yes, please provide details

5. Are you presently a Principal Investigator (PI) in other research and/or clinical trial activities? □ Yes □ No

5.1 If yes, please provide details and % of your time allocated to each

6. Have you completed a Payment instruction form: Health/Human or Payment instruction form: Clinical trial AND attached proof of payment to this application (Health/Human research)? □ Yes □ No

7. Does this protocol comply with the Helsinki Declaration of 2013? (See [http://www.wma.net/en/30publications/10policies/b3/](http://www.wma.net/en/30publications/10policies/b3/)) □ Yes □ No

7.1 If no, please explain with full justification

8. Does the protocol provide insurance for research-related adverse events? □ Yes □ No

8.1 If yes, please describe:

8.2 If no, please justify:
8.3 Is there provision for insurance?  

| Yes | No |

8.4 If no, please justify:

9. **Does the project involve the use of diagnostic test results (e.g. those obtained by imaging or by laboratory testing)?**

| Yes | No |

9.1 If yes, has the applicant consulted a professional from a relevant diagnostic discipline (e.g. radiology or pathology, as applicable)?

| Yes | No |

9.2 Please provide the name, position, and discipline of person consulted:

**SECTION 12: SIGNING OF APPLICATION**

<table>
<thead>
<tr>
<th>Applicant</th>
<th>Supervisor</th>
<th>Head of Division</th>
</tr>
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<td>(only for student research)</td>
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APPENDIX B: RESEARCHER'S PROFILE AND CONSENT LETTER

UREC NUMBER: (Official Use)

INVESTIGATOR'S DECLARATION
(INFORMATION MUST BE TYPED)

The Principal Investigator, Supervisor, as well as all Sub- and Co-Investigators must each sign a separate declaration.

SECTION 1: INVESTIGATOR'S DETAILS AND ROLE IN THIS RESEARCH (For Official Use)

Title: First Name, Surname  Staff/Student #9508279  CRP Project #
Ilona Ndjendja
Professional Status: Chief Social Worker/ Student Master in Security and Strategic Studies
Faculty /Department/Division: Security and Strategic Studies
Telephone No: 264812602016  Email: indjendja@yahoo.com

Role (mark with x)

☐ Principal Investigator  ☐ Co-Investigator  ☐ Sub-Investigator  ☐ Supervisor

X

SECTION 2: PROJECT TITLE
An investigation of personal and occupational psychosocial problems effects on work performance: A Case study of Windhoek Police Station

SECTION 3: CONFLICT OF INTEREST (OBLIGATORY) PLEASE INDICATE

I, Ilona Ndjendja declare that:

☐ I have no financial or non-financial interests, which may inappropriately influence me in the conduct of this research study; OR
☐ I do have the following financial or other competing interests with respect to this project, which may present a potential conflict of interest (attach a separate detailed statement)

Signature: ___________________  Date: __________________________

57
I, .................................. declare that:

- That I have read through the submitted version of the research protocol and all supporting documents and I am satisfied with their contents.
- I am suitably qualified and experienced to perform and/or supervise the above research study.
- I agree to conduct or supervise the described study personally in accordance with the relevant protocol and will only change the protocol after approval by the UREC, except when urgently necessary to protect the safety, rights, or welfare of subjects. In such case, I am aware that I should notify the UREC without delay.
- I agree to timeously report to the UREC serious adverse events that may occur in the course of the investigation.
- I agree to maintain adequate and accurate records and to make those records available for inspection by the appropriate authorized agents when necessary.
- I agree to comply with all other requirements regarding the obligations of clinical investigators and all other pertinent requirements in the Declaration of Helsinki (2013), as well as Namibian and ICH GCP Guidelines and the Ethical Guidelines of MOHSS, as well as applicable regulations pertaining to health research.
- I agree to comply with all regulatory and monitoring requirements of the UREC.
- I agree that I am conversant with the above guidelines.
- I will ensure that every patient (or other involved persons), shall at all times be treated in a dignified manner and with respect.
- I will submit all required reports within the stipulated timeframes.

Signature .................................................................
Date .................................................................
APPENDIX C: PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM

UNIVERSITY OF NAMIBIA

TITLE OF THE RESEARCH PROJECT: AN INVESTIGATION OF PERSONAL AND OCCUPATIONAL PSYCHOSOCIAL PROBLEMS EFFECTS ON WORK PERFORMANCE: CASE OF WINDHOEK POLICE STATION

REFERENCE NUMBER:

PRINCIPAL INVESTIGATOR: ILONA NDJENDJA

ADDRESS: ERF 746 BRAVA ISLAND ROAD ROCKY CREST

CONTACT NUMBER 264-812602016

You are being invited to take part in a research project. Please take some time to read the information presented here, which will explain the details of this project. Please ask the study staff or doctor any questions about any part of this project that you do not fully understand. It is very important that you are fully satisfied that you clearly understand what this research entails and how you could be involved. Also, your participation is entirely voluntary and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part.

This study has been approved by the Research Ethics Committee at The University of Namibia and will be conducted according to the ethical guidelines and principles of the international Declaration of Helsinki, South African Guidelines for Good Clinical Practice and Namibian National Research Ethics Guidelines.

1. What is this research study all about?

I am Ilona Ndjendja and I am conducting a research that investigates the effects of personal and occupational psychosocial problems on the performance of Police officers. The study is done in fulfilment of the requirement of a Master of Art in Security and Strategic Studies at the University of Namibia.
a) Where will the study be conducted; are there other sites; total number of participants to be recruited at your site and altogether. This study will be conducted only at Windhoek Police Station with the population of 366 at the sample size of 124.

b) Explain in participant friendly language what your project aims to do and why you are doing it?

The project is being done as partial fulfillment of the requirement of the study and in the same vain the result will fill the lack of the literature study and it will benefit you as an individual participant and all police officer in creating awareness of personal and work related psychosocial problems. It will further benefit policy makers and it will also direct psychosocial profession intervention in the NAMPOL and it will create any awareness to police officers as individual on ways how to address and deal psychosocial problems.

c) Explain all procedures.

I am going to administer questions to you and at the same time I will be filling the interview guide and I would ask you to allow me to use the tape-recorder which will help me when I am compiling a report.

d) Explain any randomization process that may occur.

The sample size will be normally distributed and randomly redistributed from which 1 chief Inspector, 2 inspectors, 1 W/O (1), 10 W/O (2), 6 Sgt (1) 16 Sgt(2) 27 constables will be purposively selected for a normally distributed targeted sample of sixty three (63) and you are chosen as one of that number.

e) Explain the use of any medication, if applicable. As the question might be sensitive to you as some of them might address a specific problem that you are going through, I am available to give you counselling as part of my professional support as a Social Worker working in the Namibian Police.

2. Why have you been invited to participate?

a) Explain this question clearly.

You are invited to take part in this research to help in answering questions that are looking and aim to explore the effects of psychosocial problems on performance of police office that might affect them to serve and protect.

3. What will your responsibilities be?

a) Explain this question clearly.

I am going to ask you some questions there are some words or question that are not clear to you, please ask me to stop so we go through and I will take time to explain. And if you have some questions later please ask me to explain.

b) Explain the duration the participant is expected to participate in the study (i.e. 2 hours, 4 days, etc.) Our interview will take us 45 minutes.

4. Will you benefit from taking part in this research?
a) Explain all benefits objectively. If there are no personal benefits then indicate who is likely to benefit from this research e.g. future patients. The research will benefit the researcher in terms of archiving the requirement of the University, the individual/the participant will benefit as he/she will get an opportunity to address psychosocial problems and also looks at way to address them and the outcome will further benefit the whole NAMPOL in coming up with tools to deal with psychosocial problems that are affecting Police Officers.

5. Are there in risks involved in your taking part in this research?

a) Identify any risks objectively. You may find yourself being emotional to the questions.

6. If you do not agree to take part, what alternatives do you have?

Taking part in this study is completely voluntary. You do not have to participate if you do not want to. You may also withdraw at any time without penalty. If you withdraw before we finish it will not affect any services you receive or are entitled to.

a) Clearly indicate in broad terms what alternative treatment is available and where it can be accessed, if applicable who will have access to your medical records? The results and information obtained from you will remain highly confidential; your name will not be quoted during the reporting in order to limit the possible bridge of confidentiality.

c) Explain that the information collected will be treated as confidential and protected. If it is used in a publication or thesis, the identity of the participant will remain anonymous. Clearly indicate who will have access to the information.

Confidentiality for the research participants is an important aspect of any type of research; therefore the informed consent form that you will sign is to ensure anonymity of your participation should the results of this study being published. Furthermore, I will conduct this interview at the times that is on your convenient. You and I need to agree upon the venue to be used. Your name will not be quoted during the reporting. The recorded interview will transcribed and both the recorded interviews and transcripts will be stored in a safe and secure place. Information gathered from you will only be used for the purpose of this study and it will not use for other purposes of personal gain.

7. What will happen in the unlikely event of some form injury occurring as a direct result of your taking part in this research study?

A) Clarify issues related to insurance cover if applicable. If any pharmaceutical agents are involved will compensation be according to ABPI guidelines? (Association of British Pharmaceutical Industry compensation guidelines for research related injury which is regarded as the international gold standard). If yes, please include the details here. If no, then explain what compensation will be available and under what conditions.
The possibility of you breaking down or willing to be counselled may occur during this process. I am employed as Chief Social Worker of the Namibian Police Force, therefore, I will assured you as a participant my support in deal with the here and now situation and also arranging for appointments for further counselling sessions or any other required treatment that may arise.

8. Will you be paid to take part in this study and are there any costs involved?

There is no cost involve, the purpose for this research is to assist the researcher to fulfil the requirement of her study with the University of Namibia for her master Degree in Security and Strategic studies.

9. Is there anything else that you should know or do?

a) You should inform your family practitioner or usual doctor that you are taking part in a research study. (Include if applicable) N/A

b) You should also inform your medical insurance company that you are participating in a research study. (Include if applicable) N/A

c) You can contact Dr ................................ at tel ..................... if you have any further queries or encounter any problems.

d) You can contact the Centre for Research and Publications at +264 061 2063061; pcaassen@unam.na if you have any concerns or complaints that have not been adequately addressed by the investigator.

e) You will receive a copy of this information and consent form for your own records.

10. Declaration by participant

By signing below, I ............................................ agree to take part in a research study entitled (insert title of study).

I declare that:

a) I have read or had read to me this information and consent form and it is written in a language with which I am fluent and comfortable.

b) I have had a chance to ask questions and all my questions have been adequately answered.

c) I understand that taking part in this study is voluntary and I have not been pressurised to take part.

d) I may choose to leave the study at any time and will not be penalised or prejudiced in any way.

e) I may be asked to leave the study before it has finished, if the study doctor or researcher feels it is in my best interests, or if I do not follow the study plan, as agreed to.
Signed at (place) ........................................ on (date) ......................... 2018.

<table>
<thead>
<tr>
<th>Signature of participant</th>
<th>Signature of witness</th>
</tr>
</thead>
</table>

11. Declaration by investigator

I (ILONA NDJENDJA) declare that:

- I explained the information in this document to ........................................
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above
- I did/did not use a interpreter. *(If a interpreter is used then the interpreter must sign the declaration below.)*

Signed at (place) ........................................ on (date) ......................... 2018.

<table>
<thead>
<tr>
<th>Signature of investigator</th>
<th>Signature of witness</th>
</tr>
</thead>
</table>

12. Declaration by interpreter

I (name) declare that:

a) I assisted the investigator (name) ........................................ to explain the information in this document to (name of participant) ........................................ using the language medium of (Oshiwambo, Oshiherero, Afrikaans, etc.)
APPENDIX D: RESEARCHER APPLICATION FOR DATA COLLECTION

MS. Ilona Ndjendja
P.O. Box 96368
Windhoek
12 November 2018

Office of the Inspector General
Namibian Police Force
Private Bag 12024
Ausspannplatz
WINDHOEK

General Sir

REQUEST TO BE GRANTED PERMISSION TO CONDUCT RESEARCH ON THE EFFECT OF EXPOSURE TO PERSONAL AND JOB RELATED PSYCHO-SOCIAL PROBLEMS ON NAMPOL PERSONNEL'S ABILITY TO PROTECT AND SERVE: WINDHOEK POLICE STATION

This letter serves as a request to be granted permission to execute my research on the above mentioned topic as requirement to complete my masters in Security and Strategic Studies (MASSS). This will also further benefit this office where the researcher works, as the Namibian Police Force will benefit in terms of findings recommendations that will direct the Force with strategies to dealing with psychosocial intervention to addressing workplace issues.

Kindly attached is the confirmation letter from the University of Namibia.
Your usually support is highly appreciated

Ilona Ndjendja
Chief Social Worker, (NAMPOL)
APPENDIX E: LETTER GRANTING STUDY PERMISSION

CENTRE FOR POSTGRADUATE STUDIES

University of Namibia, Private Bag 13301, Windhoek, Namibia
340 Mondume Ndemufayo Avenue, Pioniers Park
Tel: +264 61 206 3275/4662; fax: +264 61 206 3270; URL: http://www.unam.na

RESEARCH PERMISSION LETTER

Student Name: Ms. I. Ndjendjo

Student number: 9508279

Programme: Master of Arts in Security and Strategic Studies

Approved research title: An investigation of personal and occupational psychosocial problems effect on work performance: Case study of Windhoek Police Station

TO WHOM IT MAY CONCERN

I hereby confirm that the above mentioned student is registered at the University of Namibia for the programme indicated. The proposed study met all the requirements as stipulated in the University guidelines and has been approved by the relevant committees. Permission is hereby granted to carry out the research as described in the approved proposal.

Best Regards

Name: Prof. M. Hedimbi

Director: Centre for Postgraduate Studies

Tel: +264 61 2063275

E-mail: directorpgs@unam.na

02 NOV 2018
APPENDIX F: DATA COLLECTION INSTRUMENT

AN INVESTIGATION OF THE EFFECTS OF ON THE PERSONAL AND WORK RELATED PSYCHOSOCIAL FUNCTIONING OF THE POLICE OFFICERS IN WINDHOEK POLICE STATION NAMIBIA.

RESEARCH QUESTIONNAIRE: SEMI STRUCTURED INTERVIEW GUIDE

Data Collection Instrument

PURPOSE: The purpose of this research instrument is to gather data for a research project this questionnaire will be administered to a sample of employees in the Namibian Police Force

SECTION A: DEMOGRAPHIC

1. Identifying information

1.1 What is your age?

1.2 Gender

1.3 Educational background

1.4 Years employed as a police officer?

1.5 What is your current rank?

1.6 How many years have you been holding the current rank?

1.7 Types of psychosocial problems you experience in your personal life?
   Marital problem
   Relationship problem
   Alcohol
   Health
   Others (specify)

1.8 Types of work related psychosocial problems you experience?
   Transfer
   Relationship problem
   Work related (specify)
   Trauma related (specify)
   Others (specify)
SECTION B
A description of personal and work related psychosocial problems experienced by members of the Namibian Police Force.

1. How do you understand psychosocial problems?
2. What causes work related psychosocial problems?
3. What type of psychosocial problem did you experience in your personal and career live?

SECTION C
This section intends to explore the impact of personal and work related problem on the psychosocial functioning of police officers

1. How do you react towards psychosocial problems?
2. Does experiencing personal and work related psychosocial problem have any impact on your work performance?

SECTION D:
This section aim to explore how police officers cope with the effects of psychosocial problems

1. How do you cope after experiencing psychosocial problems at work and in personal live?
2. What services are in place within the Namibian Police Force that will help you deal with psychosocial problems?
3. Did you ever utilize the Social Services of the Namibian Police Force, and if so how did it assist you?

We have reached the end of the interview guide, is there anything you would like to add to our discussion?

Thank you for your time we came to the end of the questionnaire.

END