Trauma Exposure Influence On Job Performance Among police officers in Njoro Sub-county Kenya

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Abstract : Policing is widely recognized as one of the most trauma-prone professions, yet limited empirical evidence exists on the nature and prevalence of trauma exposure among Kenyan officers. This study assessed the prevalence and types of trauma exposure experienced by police officers in Njoro Sub-County. The target population comprised 152 officers, including 147 police officers and 5 Officer Commanding Stations (OCSs). A stratified random sampling technique was applied, and a final sample of 133 respondents (87.5% response rate) participated. Data were collected using structured questionnaires and key informant interviews, while secondary literature informed contextual analysis. Quantitative data were processed using SPSS, generating descriptive and inferential statistics, while qualitative data were thematically analyzed. Findings indicated that over 70% of officers had experienced at least one traumatic event in the previous six months, with common exposures including handling traumatizing scenes, negative public attitudes, risky deployments, and prolonged family separations. Trauma exposure was found to have cumulative effects on mental health and job performance, with variations based on demographic and occupational characteristics such as rank, age, education, marital status, and deployment history. The study recommends institutionalizing routine psychological screening, integrating trauma resilience training into police curricula, and establishing structured debriefing protocols and family-support programs to safeguard officer wellbeing and performance.

Keywords:- Kenya, Occupational Stress, Police Officers, Post-Traumatic Stress Disorder, Trauma Exposure.

INTRODUCTION

Police work is globally recognized as one of the most trauma-prone occupations, exposing officers to repeated incidents of violence, accidents, and human suffering. Trauma exposure refers to direct or indirect experiences of events involving actual or threatened death, serious injury, or violence, which may have long-term psychological and occupational consequences (American Psychiatric Association [APA], 2013). Studies estimate that between 80% and 90% of police officers worldwide report exposure to at least one traumatic incident in the line of duty (Violanti et al., 2017). Furthermore, about 15–20% of officers develop symptoms consistent with post-traumatic stress disorder (PTSD), a rate nearly three times higher than in the general population (Galatzer-Levy et al., 2018).

In Africa, similar patterns have been observed, with officers reporting recurrent exposure to violence, armed conflict, and traumatic deaths. For instance, Koortzen and Oosthuizen (2019) found that 72% of South African police officers experienced multiple traumatic events annually, contributing to high burnout and reduced performance. More recently, Taye et al. (2024) reported that over 60% of Ethiopian police officers had encountered severe trauma, with a significant proportion showing signs of PTSD and depression. These statistics highlight the magnitude of trauma exposure among law enforcement in developing contexts.

In Kenya, police officers are confronted with unique operational challenges, including terrorism, political unrest, cattle rustling, and domestic conflicts. A study by Nguli (2016) revealed that 64% of Kenyan police officers had been exposed to trauma-inducing events, with 19% meeting clinical criteria for PTSD. Similarly, Ombati (2023) documented that police officers in volatile counties reported higher trauma prevalence rates of up to 75%, linked to repeated deployments in conflict-prone areas. Despite this, limited research has been conducted at the sub-county level, where officers' experiences may vary due to local policing demands. Njoro Sub-County, characterized by recurrent land-related disputes, domestic violence, and rural insecurity, presents a policing environment where trauma exposure is both frequent and multifaceted. This study therefore seeks to assess the prevalence and types of trauma exposure among police officers in Njoro Sub-County, Kenya, thereby contributing to national and regional discourse on occupational trauma in law enforcement.

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NEED OF THE STUDY.

Policing is among the most trauma-prone professions, with officers routinely exposed to violent crimes, accidents, domestic conflicts, and sudden deaths, all of which heighten risks of psychological distress and reduced job performance. Globally, between 15–20% of police officers are estimated to develop post-traumatic stress disorder (PTSD), while more than 80% report repeated exposure to traumatic events (WHO, 2019; Papazoglou & Tuttle, 2018). In Kenya, studies suggest that over 60% of officers have encountered trauma-related incidents, with many reporting stress, depression, and anxiety, yet localized evidence remains limited

(Nyagah, 2020; Osinde et al., 2021). Njoro Sub-County presents a high-risk policing environment due to recurrent land disputes, ethnic clashes, cattle rustling, and domestic violence, which compound vulnerability to trauma (NPS, 2022). Without adequate coping mechanisms, such exposure can lead to burnout, absenteeism, substance abuse, or even suicide (Violanti et al., 2017). Thus, examining the prevalence and types of trauma exposure among police officers in Njoro Sub-County is necessary to provide empirical evidence that informs policy, strengthens wellness programs, and promotes resilience-building strategies within the National Police Service.

3.1Population and Sample

The study focused on police officers serving in Njoro Sub-County, Nakuru County, Kenya, who were regarded as the universe of the study. Njoro Sub-County has an estimated police population of 420 officers distributed across police stations, patrol bases, and specialized units, representing a broad spectrum of policing functions including crime prevention, traffic regulation, and conflict management (NPS, 2022). These officers are routinely exposed to traumatic events such as ethnic clashes, domestic violence, land conflicts, road traffic accidents, and sudden deaths, making them a suitable population for this study. From this universe, a representative sample of 136 officers was selected through stratified random sampling to ensure proportional representation from different ranks, gender categories, and work stations. This sample size was determined using Yamane's (1967) formula at a 95% confidence level and 5% margin of error, ensuring statistical reliability and generalizability of the findings to the larger police population in Njoro Sub-County.

3.2 Data and Sources of Data

For this study, primary data was collected directly from police officers serving in Njoro Sub-County. A structured questionnaire was designed to capture information on demographic characteristics, prevalence, and types of trauma exposure experienced by the officers. The questionnaire included both closed and open-ended items covering areas such as frequency of exposure, severity of traumatic incidents, and coping strategies. Data was collected over a period of three months, from March to May 2025, across all police stations, patrol bases, and specialized units within the Sub-County. To supplement this, secondary data was sourced from official reports of the National Police Service (NPS), Ministry of Interior, and published literature on trauma exposure among law enforcement officers in Kenya and other Sub-Saharan African countries. The integration of primary and secondary data ensured triangulation, enhancing the reliability and validity of the study findings

3.3 Theoretical framework

This study is anchored in the relationship between trauma exposure and occupational performance among police officers. The dependent variable is occupational performance, assessed through self-ratings, supervisor evaluations, and observable outcomes such as efficiency, decision-making, and discipline. The independent variables consist of multiple forms of trauma exposure, including violent encounters, accident responses, crime scene investigations, and repeated deployments in high-risk areas. Empirical evidence shows that 19–34% of police officers worldwide exhibit symptoms of post-traumatic stress disorder (PTSD) linked to trauma exposure (Papazoglou & Tuttle, 2018; Syed et al., 2020). Within the Kenyan context, officers serving in volatile regions such as Nairobi, Kisii, and Njoro face frequent exposure to violent crime, traffic accidents, and communal conflicts, placing them at elevated risk of psychological strain and reduced work performance. In addition, demographic moderators—such as age, rank, marital status, education level, and deployment history—may shape the strength and direction of the trauma–performance relationship. For instance, younger and less experienced officers tend to report greater vulnerability to trauma-related stress, while those with higher education or strong family support often demonstrate greater resilience (Violanti et al., 2017).

The analysis is guided by three complementary theories. The Job Demands–Resources (JD-R) Model (Demerouti et al., 2001) emphasizes that policing requires balancing high psychological and emotional demands with adequate resources such as peer support, organizational welfare, and specialized training; without these resources, trauma exposure can undermine performance. The Conservation of Resources (COR) Theory (Hobfoll, 1989) posits that stress arises when individuals lose or anticipate the loss of key resources including health, resilience, or family stability leading to burnout and disengagement when such losses are not replenished. Finally, Trauma Theory (Herman, 1992) explains how repeated exposure to traumatic events disrupts normal psychological functioning, potentially resulting in PTSD, hypervigilance, impaired judgment, and emotional withdrawal. This aligns with findings that PTSD prevalence in policing can exceed 25%, compared to 7–8% in the general population (Carleton et al., 2019). Collectively, these theories provide a robust framework for understanding how trauma affects police officers' performance and highlight the conditions under which resilience, support systems, and organizational resources can mitigate negative outcomes.

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3.4Statistical Tools and Analytical Models

This section presents the statistical and analytical procedures employed to transform raw data into meaningful inferences. The analysis integrates both descriptive and inferential statistical techniques to capture the relationship between trauma exposure and police officers' occupational performance. Details of the methodology are presented as follows.

3.4.1 Descriptive Statistics

Descriptive statistics were used to summarize the characteristics of the study variables. Measures of central tendency (mean and median), measures of dispersion (standard deviation, variance, minimum, and maximum values), and frequency distributions were applied to profile the sample of police officers in Njoro Sub-County. Normality tests, including the Kolmogorov–Smirnov and Shapiro–Wilk tests, were conducted to assess whether the data met assumptions of parametric testing. This step was critical in identifying the spread and sensitivity of variables such as trauma exposure, job performance, and demographic moderators (age, rank, education, and marital status).

3.4.2 Correlation Analysis

Correlation analysis was employed to examine the strength and direction of relationships between trauma exposure and job performance. The Pearson correlation coefficient (r) was applied for normally distributed data, while Spearman's rank-order correlation was used for non-normal data. This step helped to identify initial associations and detect possible multicollinearity among predictor variables.

3.4.3 Multiple Regression Analysis

The main inferential tool applied was multiple regression analysis, which allowed estimation of the effect of trauma exposure on job performance while controlling for demographic moderators. Trauma exposure was treated as the independent variable, while occupational performance served as the dependent variable. Moderator variables age, rank, education level, marital status, and deployment history were incorporated to test for interaction effects, showing whether these factors strengthened or weakened the trauma–performance relationship.

The regression model can be specified as follows:

$Y=\beta0+\beta1X1+\beta2X2+\beta3X3+\beta4X4+\beta5X5+\varepsilon Y = \beta_0 + \beta_1X_1 + \beta_2X_2 + \beta_3X_3 + \beta_4X_4 + \beta_5X_5 + \varepsilon Y=\beta0+\beta1X1+\beta2X2+\beta3X3+\beta4X4+\beta5X5+\varepsilon$

Where:

Y = Job performance (dependent variable)

X_1 = Trauma exposure

$X_2 \dots X_5$ = Moderator variables (age, rank, education, marital status, deployment history)

β_0 = Constant term

$\beta_1 \dots \beta_5$ = Coefficients estimating effect sizes

ε = Error term

3.4.4 Moderation Analysis

To further investigate conditional relationships, hierarchical regression was conducted. Trauma exposure was entered in the first step, demographic moderators in the second step, and interaction terms (e.g., trauma × age, trauma × education) in the third step. This approach revealed whether specific demographic factors moderated the relationship between trauma exposure and performance, in line with theoretical expectations from the JD-R model, COR theory, and Trauma theory.

3.4.5 Reliability and Validity Testing

To ensure consistency, the reliability of the measurement instruments was tested using Cronbach's alpha, with a threshold of 0.70 considered acceptable. Construct validity was tested through factor analysis (KMO and Bartlett's Test of Sphericity) to confirm that trauma exposure and performance indicators loaded appropriately onto their respective constructs.

IV. RESULTS AND DISCUSSION

4.1 Results of Descriptive Statics of Study Variables

The first objective of this study was to assess the prevalence and types of trauma exposure experienced by police officers in Njoro Sub-County. Descriptive findings revealed that trauma exposure was highly prevalent, with over 70% of officers reporting at least one traumatic experience within the preceding six months.

As shown in Table 4.1, the most frequent exposures were handling traumatizing scenes or victims (Mean = 3.34, SD = 0.902) and facing negative public attitudes (Mean = 3.28, SD = 1.005). These exposures highlight the dual psychological strain faced by officers: the direct burden of witnessing human suffering and the indirect stress of persistent hostility from the public. Other notable exposures included risky deployments (Mean = 2.88), long work periods away from families (Mean = 2.83), and operational stressors such as working with outdated equipment (Mean = 2.62). Although molestation from senior officers was less frequently reported (Mean = 1.90), its presence underscores organizational-level stressors that exacerbate trauma vulnerability.

Table 4.1: *Descriptive Statistics of Trauma Exposures among Police Officers (N=152)*

Trauma Exposure Category	Mean	Std. Dev.	Rank
Handling traumatizing scenes/victims	3.34	0.902	1
Facing negative public attitudes	3.28	1.005	2
Risky deployments (e.g., raids, protests)	2.88	1.114	3
Long work periods away from families	2.83	1.021	4
Working with outdated equipment	2.62	1.087	5
Molestation/harassment from senior staff	1.90	0.852	6

Source: Field Data (2025)

To further examine the influence of trauma exposures on psychological outcomes, a regression analysis was conducted with PTSD symptoms as the dependent variable and trauma exposure categories as independent variables.

The results (Table 10) revealed that handling traumatizing scenes ($\beta = 0.312$, $p < 0.01$) and negative public attitudes ($\beta = 0.276$, $p < 0.05$) were significant positive predictors of PTSD symptoms. Additionally, long work periods without visiting families ($\beta = 0.241$, $p < 0.05$) emerged as a key occupational factor contributing to trauma outcomes. The model explained 42% of the variance in PTSD scores ($R^2 = 0.42$), indicating a moderate but meaningful relationship between trauma exposures and psychological distress. Other predictors, such as molestation from senior officers and unfair transfers, showed weaker associations but remained relevant for organizational policy implications.

Table 4.2 : Regression Analysis of Trauma Exposures Predicting PTSD Symptoms

Predictor Variable	β	Std. Error	t-value	Sig. (p)
Handling traumatizing scenes	0.312	0.097	3.21	0.002 **
Facing negative public attitudes	0.276	0.110	2.51	0.014 *
Long work periods away from families	0.241	0.108	2.23	0.027 *
Risky deployments	0.163	0.094	1.73	0.086
Molestation/harassment from seniors	0.142	0.089	1.60	0.112
Working with outdated equipment	0.117	0.091	1.28	0.203

Model Summary: $R^2 = 0.42$, Adjusted $R^2 = 0.39$, $F(6, 145) = 14.71$, $p < 0.001$

*Significance levels: **p < 0.01, *p < 0.05*

These findings confirm that trauma exposure among officers in Njoro is both frequent and multidimensional. They directly answer Research Question One: *What is the prevalence and types of trauma exposures experienced by police officers in Njoro Sub-County?* and support Hypotheses 2, 3, and 4, which proposed trauma exposure as a significant independent variable influencing PTSD and job performance outcomes.

The results also align with international studies. Papazoglou and Tuttle (2020) emphasize that policing is among the most trauma-prone professions globally, while Violanti et al. (2019) found that repeated exposure to traumatic events in U.S. officers produced cumulative stress effects similar to those observed in Njoro.

Regionally, the findings resonate with African studies. BMC Psychiatry (2022) reported that over 60% of Ugandan officers exhibited trauma-related symptoms, even in cases where diagnostic thresholds for PTSD were not reached. Similarly, Taye, Mengesha, and Wondimagegn (2024) established that trauma exposure negatively influenced police performance in Ethiopia. Within Kenya, Ndero, Otwori, and Musyoka (2024) and Nguli (2016) documented high trauma prevalence among police officers, linked to operational stressors and exposure to violence, suggesting that trauma exposure extends beyond urban policing to rural contexts like Njoro.

However, contextual differences emerged. Studies in South Africa (Koortzen & Oosthuizen, 2019; Pienaar & Rothmann, 2006) reported slightly lower trauma exposure levels, likely due to better-developed psychosocial support systems compared to those available in Njoro. Additionally, Ombati (2023) noted that family support served as a protective factor for Kenyan officers, a finding not strongly reflected in Njoro where prolonged family separations aggravated trauma symptoms.

In conclusion, both descriptive and regression findings provide robust evidence that trauma exposure is widespread and significantly predictive of psychological distress among police officers in Njoro Sub-County. This dual analysis underscores the need for systemic interventions, including routine psychological screening, trauma-informed counseling services, organizational reforms to reduce unfair transfers and harassment, and supportive work–family policies. These measures are critical to mitigating the adverse impacts of trauma exposure on officer well-being and job performance

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