COVID-19 STRESSORS ON WOMEN IN POLICE: PERSPECTIVES AND THE WAYS OUT

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Abstract: Started in November 2019, COVID-19 was proclaimed as a global pandemic by WHO on 11 March 2020 (Balkhair, 2020). Social distancing became the spread preventing norm. Police personnel were engaged to execute these norms, the engagement exposing them to open scrutiny of the pandemic. This engendered in them distress of high intensity. However, the stressors making particularly women police distressed during the second wave and the ways out in any such future eventuality seems missing in the existing literature. Therefore, this qualitative study was conducted to explore an empirical account of the stressors that negatively impacted the middle and low ranked women police who executed COVID norms on-field during the peak lockdown months in Bhubaneswar and Cuttack, Odisha. Since the taxing execution (both physical and mental) of their professional roles explicitly determined their distressful experiences, the findings have been seen through the lens of Goode's (1960) role strain theory. The results indicate that the pandemic-induced stressors negatively impacted both their professional and personal lives. Those specific stressors include over work-burden, alienation from family and community, fear of infection and infecting, withdrawal from providing family care services and linking health issues to the virus infection. Preventing such stressors as well as their consequent effects, in case any COVID like eventuality surfaces in future, is a need. This need can be fulfilled by the joint efforts of the government and the police administration by increasing the strength of civil policing and making situation appropriate policies and arrangements like providing appropriate training, kits and so on before and during the situation.

Keywords: COVID-19; Women Police; Stressors; Distress; Future Roadmap.

INTRODUCTION

Stress, as a personal and emotional experience, can arise in anyone, at any moment, and in any circumstance, depending on how they perceive and react to the surrounding situations. Workplace stress stems professional environment and work-related situations. It imposes various demands on employees. Stress has therefore become a striking content of organizational research now a day (Deschamps et al., 2003). If we look at policing, the profession is fiercely stressful because of particularly rotating shifts, increased hypervigilance, imminence of violence, lacking public support (Hartley et al., 2011; McCraty & Atkinson, 2012; Paoline III, 2003; Terrill et al., 2003), long working hours, inaccessibility to needed leaves, handling traumatic events, witnessing human sufferings, death and so on (Collins & Gibbs, 2003; Violanti et al., 2017).

Started in November 2019, the spread of corona virus and outstretched worldwide and the World Health Organization (WHO) proclaimed COVID-19 as a global pandemic on 11th March 2020 (Balkhair, 2020). More than 1.4 million people in 177 countries got infected by 9th April 2020 and more than 85,000 died during the period (WHO, 2020). The first COVID case in India was identified from Kerala in January 2020 (Ministry of Health and Family Welfare, 2020; Perappadan, 2021; WHO, 2020). The rate of infection, intensity of severity and death took a crescively trend and the situation worsened by March 2020. On 15th of March 2020, the first corona positive case in Odisha (Suffian, March 16, 2020) was scared up from Bhubaneswar, the second on 20th same month and the first COVID death was reported from the same city on 6th April, 2020. The infection rate intensified when the Odiyas headed back home from COVID hot-spots like Surat (Mohanty, 2020), Mumbai, West Bengal, Kerala, New Delhi, Chennai etc. (Shekhar, 2020). Henceforth, By October 2020, Odisha reported a total of 2,74,181 COVID-19 cases. In October alone, the state recorded 65,491 new infections and 456 deaths, accounting for approximately one-third of the total 1,331 deaths reported up to that point (Rout, 2020; Sahoo & Kar, 2021).

To arrest the spread and casualty in India, the Central Government took various stern measures since the mid-March 2020. One amongst the most such well-timed strategies was imposing lockdown, declared on 24th March 2020 and was

extended, phase-wise (Grover et al., 2020). The Government of Odisha started off the first lockdown on March 21st 2020 and mandated the spread precluding norms such as frequent hand sanitising, compulsory face masking, social distancing through clinging to stay-home norms, etc. in the line of the national directive for COVID-19 management (MHA, Order No. 40-3/2020-DM-I-A) and endorsed the police machinery to conscientiously effectuate these norms. Accordingly, the police administration entrusted its personnel to dissemble public crowding, restricting people's movements outside, rigorous patrolling, executing raids on counterfeit medicines/ masks production/sanitizers, supplying e-passes for emergency traveling, besides typical law enforcement and crime control.

As the first responders to the pandemic, the police personnel they shouldered emerging unprecedented responsibilities, though remained were vulnerable to escalated risks of getting infected (Perry & Jonathan-Zamir, 2021). The officers tolerated overtime and intensified workloads and suffered elevated concerns about their health and the wellbeing of their loved ones (Frenkel et al., 2021). This situation made them both emotionally and physically taxing which enticed the attention of the scholars and some researchers studied policing the pandemic (See Catena et al, 2021; Kumar, 2021; Scalia, 2021; Terpstra et al, 2021) and some others, police stress during COVID-19 (See Aborisade & Ariyo, 2022; Frenkel et al., 2021; Grover et al., 2020; Huang et al., 2021; Rosario & Lofgren, 2020; Wu et al., 2021; Yuan et al., 2020). Although the pandemic is now behind us, it remains indispensable to study the distress being exclusively endured by female police during COVID-like situation (see: Bapna, et al., 2021; Nameirakpam, et al., 2021; Rabichuk, et al., 2024) and to take precautions to preclude them from the same or similar experiences in similar future situations. It is therefore crucial for the government and police administration to focus on equipping officers in advance and effectively managing them during such crises to minimize their stress levels. This paper therefore explores the COVID-19 stressors that distressed women police and presents the possible and actionable precautions that can be taken in advance and during such eventuality. As some the studies, linking policing to the pandemic set the inspiring ground

for the present study, the findings from those studies are comprehensively captured in the literature on deck.

LITERATURE REVIEW

Reviewing literature is essential as it helps establish the foundation for the study by identifying gaps and providing context for the research problem. A thorough literature review ensures that a researcher does not duplicate the prior works but rather build upon it, by refining methodology (Boote & Beile, 2005), analyzing past studies, recognizing trends, justifying the significance of research (Webster & Watson, 2002) and synthesizing relevant findings. This enables researchers to position their findings within the broader academic discourse and contribute meaningfully to the field (Hart, 1998). The landmark studies that correlated policing and COVID-19 are segmented into two themes, a) policing the pandemic and b) police stress during the pandemic.

POLICING THE PANDEMIC

The term "policing the pandemic" describes police roles in ensuring compliance with COVID-19 norms. It includes the professional, populist, and repressive strategies used by police officers to fulfill their duties.

Across the world, the police played atypical roles in executing the COVID norms in furthering prevention of the transmission by adopting three approaches; 1) professional, 2) populist and 3) repressive. To quote a professional approach, Kumar (2021) in his study of police role in Kasaragod and Kannur districts of Kerala divulged that police's special interventions such as maintaining checkpoints, police patrols, legal actions, home visits and quarantine enforcement downscaled the spreading rate. Moreover, the nature of COVID specific police activism in Catalonia was someway different that the officers managed the COVID-19 uncertainties by buckling down to police communication channels and official information (Catena et al., 2021). As a populist practice, in Italy, the local administration successfully enacted policing from below (i.e. active and sincere public support to the police) and policing from above (i.e. local administration utilizing the police force) during the lockdown.

This resulted in necessary policing of the pandemic (Scalia, 2021). In the same line, policing model in the Netherlands followed a novel strategy. Netherlands police engaged a pragmatic approach of responsibilizing the citizens through a communicative style. On the other hand France police adopted a strict and repressive approach such as strict imposition of fines (Terpstra et al., 2021) on the violators of COVID norms.

Police Stress during COVID 19: Police stress during COVID-19 refers to the heightened physical and psychological strain experienced by law enforcement officers as they adapted to unprecedented challenges during the pandemic. This stress stemmed from increased workloads, health risks, enforcement of new regulations, and the need to adjust to rapidly changing circumstances.

The spread of COVID-19 and the necessitous police roles in arresting the virus spread made policing an additionally stressful task. In India significant number of police personnel perceived whopping depressive symptoms, anxiety and endured substantial stress due to and during enacting COVID norms (Grover et al., 2020). The Chinese police officers agonized widespread and increased stress, the genesis of stress being fear of infection, changing workloads (Wu et al., 2021) and working hours, age, chronic disease, perceived health risk and work stress ominously contributed to leading edge police officers' mental distress during the outbreak of the pandemic (Huang et al., 2021). Officers who are older and married perceived escalated risk for anxiety. Officers having bachelor's degree or above, residing nearer to the city centers and using sleeping pills sensed considerable risk of anxiety and depression. Depression scores had strong correlation with that of anxiety (Yuan et al., 2020).

Catalonia police officers toiled in stress in the fear of infecting or being infected, dearth of preventive equipments, volatile work schedules and inconsistence between rules (Catena et al, 2021). Sex, stressor appraisal, work experience, preparedness and emotion regulation substantially determined strain among the police officers in Austria, Switzerland, Germany, Spain and the Netherlands. Infection risk and wanting communication surfaced as their cardinal stressors (Frenkel et al., 2021). In Portugal, police officers'

levels of psychological distress, posttraumatic stress (PTS) and burnout were greater than that of similar professionals in non-pandemic times and conditions. Officers having lesser years of service and experience demonstrated fewer PTS symptoms compared to those having longer experience. Women officers revealed enhanced burnout-disengagement scores compared to male officers. Married officers living with partner showed lower magnitude of PTS than officers reported divorced, single or widowed. Officers shouldering elderly care responsibility perceived increased PTS and psychological distress levels (Rosario & Lofgren, 2020). The senior police officers in Nigeria strived to execute COVID-19 mandates in the face of resistance, industrial action, conflict and even protests opposing police brutality (Aborisade & Ariyo, 2022) which would manifestly be stressful experiences for the officers.

The aforesaid studies conducted on policing the pandemic bank on policing strategies adopted by the states or police administration during the pandemic or lockdown. The studies focusing on the police stress during the pandemic emphasize; a) the correlation between executing covid mandates and police stress, b) the exact sources, nature and intensity of such stress and c) correlation between the personnel's socio-demographic characteristics and stress.

However, all these studies suffer a drawback that the gendered stress experienced by exclusively women police seems under scored. Besides, these studies were conducted during or after the first wave and before the second wave of COVID-19 which was much more cataclysmal than the first wave. Considering this, there arises an intellectual essentiality to investigate into stress experienced by women police personnel during the second wave. Thus, this study proceeds with the following research objectives (RO)

RO1: Exploring the profession produced gendered stressors distressing women police during the second wave of COVID 19.

RO2: Recommending the road map to reduce the effects of such stressors in case of any such future eventuality.

Research questions are typically mentioned after research objectives because the objectives define the broad goals and purpose of the study, while research questions provide a specific direction for inquiry. By first establishing the objectives, researchers can ensure that their questions align with the study's purpose and contribute to addressing underlined identified gaps (Kumar, 2019). This structured approach enhances clarity and coherence in academic writing. This study therefore has the following research questions (RQ).

RQ1: Which factors engendered stress in women police during COVID 19?

RQ2: What need to be done by the government and police administration to alleviate stress during similar eventuality?

THEORETICAL BACKGROUND

In recent years, workplace stress has gained attention as a critical issue (Kazmi, et al., 2024; Sharma, 2024; Sheikh, 2023), particularly among women police (Vivek, et al., 2018; Bourassa, et al., 2024; McCarty, et al., 2007) who often navigate multiple responsibilities across professional and domestic spheres. To understand the social mechanisms contributing to stress during COVID-19, it is important to ground the analysis in an appropriate theoretical framework. This section presents the theoretical background underpinning the study, focusing on Role Strain Theory. Originally proposed by William J. Goode (1960), this theory examines the tensions that arise from competing social roles and the limited resources individuals have to meet these demands. By applying this framework, the study aims to explore how structural and societal expectations contributed to the stress experienced by women police due to executing COVID specific norms and what mechanisms need to be adopted to suppress stressors, in case of such similar eventuality. The key arguments of the theory are as follow.

1. Every individual occupies multiple roles each with its own set of expectations.

2. Stress can result from intra-role conflict (conflicting expectations within the same role) and/or inter-role conflict (conflicts between different roles).

3. Strain occurs when people lack the resources to meet all role expectations with the use of finite resources.

4. When individuals deviate from social norms to meet the role expectations or struggle to meet them, stress increases.

5. Role strain is not just an individual problem—it is embedded in social structures and norms.

MATERIAL AND METHODS

The study was conducted in the Commissionerate Police Cuttack and Bhubaneswar, Odisha during July-September, 2021. Qualitative paradigm has been adopted for this study because the study intended to explore the stressors based on the lived distressful experiences of women police. I used exploratory-cum-descriptive research design as the issue with respect to women police is not studied exclusively and amply. For collecting data, the respondents were selected through purposive sampling and their in-depth telephonic interview was administered.

Purposive sampling was used because the study intended to include; a) those who had frequent field exposure during the second wave of the pandemic and b) out of them who agreed to participate in the study. To my advantage, I have a handful of friends, students and acquaintances working in Odisha Police. I requested them to discuss about my study and its purpose with their friendly female colleagues working in the capital cities of Bhubaneswar-Cuttack and were frequently engaged in field intervention during the second wave of COVID-19 and convince them to participate in the same. They did accordingly and gave me the contact numbers of twenty seven female police of Inspectors, Sub-Inspectors and constables ranks. Then I called them one by one and very honestly, humbly and clearly re-explained them about my study. Out of the total, eighteen agreed to discuss and gave me their convenient time to converse. The well timed slot for all these respondents fell within the range of 7.30-9.00pm. It is because in the day time, the clients were remaining busy in executing post Covid normalization duties on-field and off-field as well. I perceived these respondents would be enthusiastic, appropriate, potential and active contributors for the purpose. Telephonic interview became an actionable technique because the immediate post-COVID hangover did not allow executing any other qualitative techniques face-to-face.

Then I administered the structured interview of these respondents in conversational style. I made the key points of the responses of a particular respondent black and white during the conversation and made a comprehensive draft of it immediately after its completion. At the end of each interview, I requested each of these eighteen respondents to discuss about the study with their close colleagues who were working mostly on the field during the pandemic and convince them to participate in the study and give me their contacts numbers, if agreed. Some of them did accordingly and by this I got six more contacts with whom I discussed the issue and got cooperative responses. Through this, I interviewed twenty-four respondents (N=18+6=24). I stopped with 24 samples because no new information, themes, or insights emerged after 20 interviews. Last four interviews determined the saturation. Finally, I explored the distressing factors that I present in the succeeding sections.

CONCEPTUALIZATION

Stress, a non-specific mental and/or physiological response to the changing situations, can be of two types; distress and eustress. Eustress is beneficial stress that enhances function, such as the invigorating challenge of a demanding task, while distress refers to harmful stress that can lead to adverse physical and psychological effects when unresolved (Selye, 1976). Long-term exposure to distress can lead to serious health problems like raised blood pressure, suppression of the immune system, increasing risk of heart attack and stroke, infertility, expedites the aging process and can make one more vulnerable to anxiety and depression. There are certain common external as well as internal determinants of stress. External causes are major life changes, financial problems, extreme busyness, risk of being killed etc. The internal causes are inability to accept uncertainty, pessimism, negative self-talk, unrealistic expectations, lack of assertiveness, fear etc. According to many researchers organizational stressors prove more dominant than innate stressors (Graf, 1986; Norvelle et al., 1988 and Martelli et al., 1989).

In case of women police, the causes of job stress are responding to battered families, dealing with vehicle crash (Herron, 2001), threat of violence, tragedy exposure, danger (Brown & Fielding, 1993 and Bartol et al., 1992) and lacking control over life and working environment (Greenberg, 2003). Some researches explored that women police experience more stress than police men (Wexler & Logan, 1983; Pendergrass & Ostrove, 1984 and Wertsch, 1998) and some other researches identify few gender disparities relating to stress outcomes (Haarr & Morash, 1999; Pole et al., 2001 and Patterson, 2003). The gender grounded distress of women police while executing COVID-19 mandates during the second wave is presented in the section on deck.

FACTS IN CONTEXT

Scholars view police profession as largely stressful (Violanti & Aron, 1994; He et al., 2005; Manzoni & Eisner, 2006) and policing as an exceedingly stressful task (Toch, 2002 & Peak, 2003). Unlike the factors producing stress among the police personnel in general, the stressors for women police during the pandemic were different. Those stressors are presented below.

a) Social Isolation- Social isolation means the physical and emotional condition of any social group which makes it harder for the group to connect and interact with other group members (Kappeler et al., 1998). Isolation of this kind is ingrained as one of the key elements of police sub-culture (Kesic and Zekavica, 2019). This isolation is weighed by either the police officers (Loftus, 2010; Skolnick & Fyfe, 1993; Coombe, 2013) or their professional mandates (Kappeler et al., 1998; Clark, 1965) or inflicted from the external environment (Marier & Moule, 2018; Paoline III, 2003; Kappeler et al, 1998; Marier & Moule, 2019). This is the manner, there develops 'we vs. they' attitude in the police personnel towards the general public (Kappeler et al., 1998), police officers being considered as 'the insiders' and the citizens as 'the outsiders' who are seen with suspicion (Kappeler et al., 1998).

During executing COVID norms, police personnel as COVD warriors were frequently exposed to the outside world against the sty-home norms. Therefore, people perceived them as infecting agents and distanced from them. There are instances that due to this, people did not allow even to receive the emergency services offered by the police. One of the respondents shared the

reaction of a lady. The lady was returning from a hospital in a bike. Due to some imbalance, she fell down from the bike. The incident happened in front of a lady constable. The constable ran to the sick woman to pick her up from the ground. But the woman reacted with a negative and distancing expression.

> *Do not come near me. Do not touch me. You are moving outside always. You may be bringing corona with you.*

Another lady sub-inspector shared a sentimentally aggrieved experience.

> *In my family, only my old parents are there and they are living in my village. During lock-down, I could not go to them and see them for six months due to excessive professional engagements. Once I managed and went to my village in May 2021. The sarapanch of our Panchayat who belongs to my village came to know about my visit. When I reached the village, he accompanied with some other villagers obstructed me to enter inside the village because I was working in Cuttack and that to as a police officer and the rate of infection was very high in the city and police personnel were openly exposed to the virus infection. Somehow, I convinced them and entered into the village. When I reached near my house, our neighbors did not allow me to enter into my house for the same reason. I stood outside my house, my parents came near the door of my house and I talked to them and came back. My parents were not keeping well that day. They seemed physically pale and psychologically very broken. That day I felt extremely distressed.*

This isolation is inflicted from the external environment because of their likelihood of carrying the virus and the people's apprehensive vulnerability to infection and/or death. Covidisation reproduced their alienation from the general public and produced the alienation from the beloved ones. Before the pandemic, the distance between the police and the public was fear-driven, which remained the case during the pandemic, albeit with a different underlying cause. Previously, public fear stemmed from the stereotypical perception of police coercion, whereas during the pandemic, it shifted to a more pragmatic concern-the fear of infection. This fear distressed women

police more because one of the objectives of inducing women in policing across the globe is to convert police force to police service (UN Women, 2009; Rabe-Hemp, 2008; IACP, 1998). The objective got somehow dismantled. They tried to play instrumental role in expressive style which got rejected by the service consumers. More distressing was their forced distancing from the near and dear ones because enacting expressive role in families involving positive emotions and sentiments is one of the primary concerns more for a woman than a man.

b) Leave Constrictions and Prolonged Absence from Family- The study informed an astonishing account of their constricted leave entitlements and its extremeness during the pandemic. Usually, the police administrators put implicit restrictions on sanctioning leaves to the staffs due to; a) meager strength of women police (BPR&D, 2023, 2022, 2021, 2020, 2019), b) need of time bound accomplishment of police assignments and c) uncertain need for field interventions. How can the authority then sanction the leaves? A respondent revealed a pathetic reality during the field work.

> *The Director General of Police (DGP), Odisha once called a meeting of all the IICs and announced that, the IICs will sanction one day-off in a week to each staff. However, its practice remained far from the reality. Sanctioning leaves in such model used to be maintained in the station record and the record was being submitted to the office of the Superintendent of Police (SP), but we were not getting such leaves in practice.*

The factor engendering this pathos is the dichotomy that; the pressing assignments to be carried off within a fixed time bracket by less than necessary number of personnel. The implementation of the spread preventing norms during COVID-19 added fuel to the live fire of this dichotomy of which and women personnel became the worst victims. During the lock-down months, i.e. March-July 2020 and April-June 2021, they were instructed strictly not to even think of availing leaves. So those who were posted far away from their homes could not visit their families. Many of them got to know their family members being infected and hospitalized and urged to see them and vice versa. But they could not make it because their duty accountability was highly straight jacketed. One respondent lamented over the leave restriction.

'I was posted in a far-off place from my home. My mother was infected with corona. I requested my senior officer to grant me at least one day leave, so that I can go home and see my mother. But he did not allow and I cried.'

Even, those who were staying with their families could afford to be in the family only from 10.00pm to 5.00am every day. Absence from the family created significantly higher stress among women police in terms of its intensity and nature in comparison to police men because the nature of women's involvement with the family members and domesticity is much more intense and sensible than police men. Their attachment with mainly their husband, children and parents is highly sensitive and emotional. The women specific minimum contents of family involvement are parenting, providing care services, maintaining the household and specifically preparing food and serving others. They remained stressed because they could not share these family tasks because of long absence from or restricted presence in the family and their emotional involvement with other members was severely blemished. One lady constable said,

I am staying in Bhubaneswar with my husband and a baby son. My husband is working as a clerk in a private hospital. My parent-in-laws are staying in their village in Sundergarh (A district in Odisha). My mother-in-law came and had been staying with us since July, 2019 because I needed urgent care on completing 6 months of my pregnancy and we retained her for taking post birth care of the child. Because my husband having a private job, that to in a hospital and me in police job having quite uncertain work engagements could not spare required care time for the child. During the second wave of COVID when huge number of infection and covid casualty occurred in Bhubaneswar, she got infected with common cold and cough in June, 2021. She got well by medication. But we got afraid and did not allow her to come close to the child and she became frightened of infection and death. So my husband's brother came to Bhubaneswar by a car and took her back.

After she left, I as a mother felt frustrated regarding the care service for my son. Neither I nor my husband had any chance to take leave during that time. With desperation, we requested one of our relatives who is staying in Bhubaneswar with his family to leave the child in their custody during our duty hours. Initially, his wife became quite reluctant to take this burden because I and my husband remained exposed to the public every day and our child may carry the virus to them too. But finally we convinced them our situation and every day after properly sanitisatising the child, we used to leave the child with them before going for duty and brought him back on reaching back home. During this period my stress reached such a height that, I got my blood pressure level imbalanced.

Leave constraints and prolonged absence from family as a stressor contradicts with the theory because it restricted their expressive roles for the family members not due to role conflict, lack of resources, .

c) Over Work Burden- Odisha has 67 police officers per 100,000 population, significantly lower than the United Nations' recommended standard of 222 per 100,000 (Dash, 2025). Police personnel in Odisha work more than 18 hours a day, making them the most overworked in the country (Rout, 2019), far from the ideals set out by the Model Police Act, 2006, of fixed shifts of eight hours (The Model Police Act, 2006). That means though they are obliged to shift duty, they have to be on duty beyond the shift hours to address unforeseen exigencies.

During COVID lockdown the shifts were-from 7.00am to 2.00pm (first shift) or from 2.00pm till 10.00pm (second shift). They had to accomplish three sets of tasks; a) the pandemic essential, b) regular and c) domestic. The tasks essential to implement COVID norms were dispersing public gatherings, vehicle control, ensuring closure of public places (religious places, dance bars, brothels, cinema halls, night clubs, etc.) and shut down of business units (markets, shops, shopping malls, bars, hotels, restaurants etc.), regulating the openings of shops selling essential products (grocery and vegetable shops), watching COVID hospitals and quarantine centers, coordinating hospitalization of serious covid patients and

guarding covid casualties till cremation. The regular police tasks were drafting case records, law and order duty etc. Many of them said that they were not getting time to even change the uniform after coming back from the field and starting desk works. Those who were staying alone or out of family had to accomplish all their domestic works. Availing paid services like washing and ironing cloths, house cleaning, cooking and all other works were restricted by the service providers because they, being in policing were remaining exposed as virus carriers and they disapproved these services because of the fear of infecting the service providers or being infected via them. A lady Sub-Inspector said shared an account of her overburdened professional engagement.

I was administering my police station during COVID because the Inspector in Charge (IIC) of the station had retired recently and there was no new appointment. Even being freshly appointed, I had to manage the station with very less number of staffs, addressing family disputes, doing raids, maintaining law and order, doing covid duties like administering checking etc. In the course of handling all these, I got infected by the virus. I was allowed by my higher authority to go for home quarantine. But during my quarantine period, I had to work from home. However, very often I had to come to office and work. While coming to office, I was working by sitting in the office garden with following all the COVID restrictions. I was remaining tensed to manage the station and the COVID situation at that time.

Another SI explained one of critical work burden during the pandemic.

Once I was doing COVID duty on the field. A phone call came informing the sudden death of an old man in a nearby village. I with my team members reached the spot immediately. We found that a small quarrel took place between the old man and some other people and a consequent physical tussle. In that tussle, someone pushed the old man and he fell down and died. As we came to know later, the old man died not because of being pushed but because he had heart attack problem in the last stage.

While we were handling this case, another phone call came from a nearby hospital named, Sadguru Hospital under the jurisdiction of our police station. The hospital was converted into a COVID hospital specially meant for the treatment of pregnant and immediate post-natal women, infected with the virus. The call was to inform us that the hospital caught fire due to electronic cross connections and a large number of patients with their lactating infants are inside the hospital. The distance of the hospital from the place where we were dealing with the death issue was five kilometers. We rushed to the spot forthwith. On reaching there, we found infants, pregnant and lactating women and their relatives were inside the hospital and there was a huge crowd outside, all shouting and crying for help. The hospital inside was filled with fire and smoke. The most frightening part was that, I was the only lady staff in the team. When I saw the situation, I got down the jeep right off and the relatives of the patients surrounded me and requested with fear and cry to rescue the patients and their infants. I could not decide what to do and I entered inside the hospital without thinking much. When entered, I forgot to put on hand gloves though I had put a mask. I started to rescue the children and women and police administration sent more police staffs to the spot after thirty minutes of our arrival. I had to hold the children in my lap and get them out amidst smoke and fire with wearing only one mask.

The physical and mental tiredness produced by accomplishing all these assignments coupled with the stress generated by the pandemic used to heighten their distress more than policemen. This stress was again supplemented by the fear that, disciplinary actions might be taken against them or the higher authority might scold, if the assigned tasks are not accomplished within the instructed time bracket. They had to dwell between the devil and deep sea.

d) Food and Drink Related Constraints- Merino and Agustin (2020) suggested that if the life-style is healthy, it reduces stress which debatably informs that unhealthy life style is a stressor. Food habit being a key part of life style, the major

stressors of women police during the pandemic were linked to the food related difficulties in terms of the timing and types of food. They did not have minimum schedule elasticity needed to have their breakfast and lunch. Due to early reporting, delayed departing and over working particularly during the lock-down, the specific difficulties they ran upon were; a) failing to have food on time, b) failing to find food outside, c) not getting food at the time of even extreme hunger and d) not getting the type of food they usually take. They had to manage these difficulties by; a) relieving hunger with food stuff supplied by NGOs, b) indemnifying the food deficiencies after coming back home and c) eating bread, fruits and biscuits during lunch time. A revelation by a respondent presents their food related difficulties.

During peak lockdown months, I could hardly have breakfast because I had to reach the office at 6.00am and make the strategy for the works to be executed on the day and being on the field by 7.00am. I used to take my lunch after 4.00pm when I had morning shift duty and dinner after 11.30pm when on afternoon shift. I was getting very upset with tolerating hunger during the duty hours. Every day I had to cook food after coming late from duty and then eating.

Not only food related irregularity, they also remained stressed due to scarcity of scope for getting drinking water while on field. The stress causing factors were; a) water could not be obtained from the market and b) they did not feel safe to get it from public drinking water supply points. An astonishing thing happened during this time. The volunteers of some NGOs started distributing sealed water bottles to police personnel. The local administration as well as the police administration revealed two concealed unwelcome intentions behind these initiatives. Those are; a) the NGOs using the police for their newscasting and b) their volunteers used the work as a safe track to roam outside. Thus the Director General of Police (DGP) denied the police staffs to receive water from these volunteers.

The covidisation negatively impacted the food habit of women in police. During COVID. they had to have better food with improved regularity because the extremeness of physical as well as mental strains experienced by them got abnormally amplified during the lockdown months compared to non-covid times. However, the reality was opposite to the need.

e) Frequent Phone Calls- Campedelli and others (2021) in their study of COVID-19 containment policies in Los Angeles divulged that overall calls for assistance may have marginally downsized during the peak pandemic. However, this study explored contrasting findings. Frequent phone calls all-day asking about the crisis, complaining against non-compliance to covid norms by people and business units, seeking help in case of covid casualty or hospitalization and commotions in quarantine canters kept women police irritated all days during the second wave lock-down. During duty hours and even after, they were getting phone calls over and over from police authorities, the public, social activists and political leaders to visit multiple places even during their engagement with public/situations in one site. Sometimes they got calls complaining people opening shops and some other times regarding people gathering outside, playing cards etc. In many occasions, they were not becoming in a position to take calls because of their tight engagement, but the phone was keeping on ringing. They were feeling mentally unstable when the phone was ringing because if the call was from the public or political leader or NGO activists, and it is not responded, they were making it viral on the social media exaggeratedly criticising police non-response. And if the call was from any police authority, and not attended, the authority would take disciplinary action. The synchronized accountability to respond to these multiple agents and situations at the same time heightened their stress level because these situations needed time bound aggressive approach to accomplish which could hardly be possible at their end.

f) The Fear of Infection- Police personnel as the most frontline executers of covid norms to fight against the pandemic were mostly vulnerable to infection. Along with the police, there were two other state-sponsored groups; a) health workers and b) the Para-military forces and a non-state agency i.e. civil society. The infection risk for the activists of these three groups was lesser compared to the police personnel. The health workers had sound technical knowledge regarding strategically avoiding infection and the Para-military forces had lesser vulnerability because; 1) their exposure to the general public was much lesser and 2) they were being provided with improved precautionary kits. Providing necessary assistance during the peak-pandemic months was an option for the civil society activists.

However, implementing covid norms was mandatory for police personnel. The protection equipments, provided to the police personnel were perceived as largely insufficient. Therefore, they were openly and widely exposed to all the infecting agents, both human and non-human and thus most vulnerable to infection and death. They suspected their colleagues, the public and everything they touched even the mask and hand globes would carry the virus. Women are comparatively more sensitive to fear as a human emotion than men. Thus women police were always working on the field with very high degree of fear which amplified their distress. A lady sub-inspector revealed her scary state.

I have heart related major health problem. The doctor, who treats me, suggested even not getting out of home during the lock-down months. However, I had to do covid duty. I was scared of being infected and death and got corona infected too. But by God's grace, I could survive.

g) Fear of Infecting- Chinese police officers' stress and anxiety was dramatically elevated out of their concern about the well-being and health of their loved ones (Wu, et. al, 2021). Similarly, this study revealed that, those who were staying with the family had high fear of infecting other members of the family. On reaching home after accomplishing duty with mental and physical exertions, they were having intrinsic urge to sit together with their family members and interact. But they used to hesitantly refrain from this because they were highly serious about their family members' and particularly children's safety and their children in the family also saw police mothers as fear objects of infection.

This distancing compelled them to withdraw from extending care services such as preparing food, serving food, washing their cloths and utensils etc. This situation created stressor of different nature and intensity among police women particularly during the second wave lock-down months that; i.e. failure of women as mother and/or daughter and/or wife who are conventionally treated as better care-givers.

h) Health Stressors- COVID-19 introduced and exacerbated fatal vulnerabilities and health dangers worldwide (Pirlea & Suzuki, 2023; Pollard et al., 2020). Such vulnerability was extreme in case of

the executers of these measures particularly police personnel. Blood pressure imbalance became a common phenomena among them due to prolonged stress ensued out of the fear of and vulnerability to infection. They became extremely frightened based on the assumption that people having blood pressure related problem are more prone to infection and death. On the other hand, they had no chance to escape the essential contacts with infecting agents. Moreover, due to food and drinking water related abnormality, many of them developed gastric problem too.

One astonishing fact is that in case they were having minor health issues like common cold, sneezing, cough, fever etc before the pandemic, most of them were usually not getting afraid. In case of most of them, the things were improving impulsively and if not, they were doing some traditional medication like drinking hot water boiled with ginger and black peeper twice a day, rubbing mustard oil boiled with garlic at the feet before sleeping at night etc. But during the peak pandemic months, in case they were experiencing even any symptoms of these health problems, they were going for medication like taking Sinarest, D-cold, Azithromicene etc and making blood, urine and cough tests. Even some of them who are highly health conscious and/or had major health issues were doing these tests once in a week or fortnight even experiencing no such symptoms because they had a strong assumption that one may be infected at any moment. Some preventives and curatives were being provided to them by the government which they did not think of adequate quality. One respondent explained her experience of physical pain leading to stress.

'Due to constant physical movement in the street from 7.00am to 2.00pm in one go and constant exposure to the sun light, dust and highly hot waves during April-June 2021, I was feeling severe leg pain and acute headache regularly. All these things were adding adversely to my stress level.'

FUTURE ROADMAP

The future roadmap outlines strategies recommended based on the insights gained from this study to mitigate stressors or lessen the severity of their distressing effects if a COVID-like situation arises in the future. The materialization of

the recommendations firstly needs the initiatives, be taken by the government and police administration, and their implementation by the same institutions involving women police. Particularly, the implementation needs to take

place at specific timelines. The stressors, the recommended roadmaps, the institutions to strategies these, the agencies to implement the strategies and the timeline for implementation are presented in table 1 and explained henceforth.

Table 1: The Future Roadmap

Stressors	Future Roadmap	Provisioning Unit	Implementing Unit	Implementation Time-Line
Social Isolation	Instruction for frequent self-sanitization in service consumers' knowledge	Police administration	Police administration & self	During the situation
Leave constrictions and prolonged absence from family	Increasing appointment	The Government	The Government	At present
Over work burden				
Food and drink related constraints	Provision for packaged food and water	The Government	Police administration	During the situation
Frequent Phone Calls	Establishing special complaint unit	The Government	Police administration	During the situation
The Fear of Infection	Providing full-body safety kits and properly sanitized personal articles	The Government	Police administration	During the situation
Fear of Infecting				
Health stressors	Health training	The Government	The Government & police administration	Initial stage of the situation
	Medical consultation and medication		Police administration	During the situation

Firstly, to reduce social isolation in case any such situation surfaces in future, there is need to take necessary precautions before coming in contact with the people. The police administration needs to instruct them to self-sanitize themselves in the knowledge of their service consumers before providing the service. These efforts should be made during the situation.

Secondly, to address leave constraints, prolonged absence from family and over work burden, the government should at least fill-up the gap between the sanctioned strength and the actual strength on immediate basis. Filling the gap between the required strength and the actual strength may be considered in due course.

Thirdly, food and drink related constraints can be suppressed, if the government makes provisions for food and water supply with payment in subsidized price, executed by the police administration during such situations. A special and temporary food preparation unit may be established and be functional during the span. The food need to be prepared with all the precautionary measures taken with serious note.

Fourth, in such situations, the government should establish centralized complaint units in each police district designed in consultation with IT experts and its contact number/s be available in the public domains. The police administration has to erect a system in the unit to quickly track the phone

number of any personnel's locations and complaints be assigned to one in the nearest location. Staffs should be instructed to respond to the messages at the possible earliest.

Fifth, the fear of infection and infecting can be minimized if the government provide them full-body safety kits items designed with inputs from the health experts. The police administration need to supply them the kits and personal items like water bottles, tissues to be used while deploying them on field duty. The personal items must be stored at police stations, regularly sanitized, and supplied as needed with payment. Distribution should be contactless, using instruments, sanitized in front of them before each use.

Sixth, to reduce the health related stressors, the government should offer them short-term health management training and counseling, executed by health experts during the initiation of the situation. Moreover with the permission of the government, the police administration should make arrangement for providing them free medical consultations and medicines during the situation to manage existing and prevent potential illnesses effectively. Prevention need to be prioritiesd over cure.

CONCLUSION

The results present a strong indication that the pandemic engendered distressors encountered by women police were potentially escalated during the second wave of the pandemic. Their professional as well as the personal lives had to go through a terrible ordeal. The colossal, inconsistent and atypical assignments, particularly women police were entrusted with, lost sight of any clear boundaries. The particular factors distressed them were; a) controlling unruly crowds, b) momentous switch in their care commitments, c) health issues and d) sensing isolation. These were compounded with the stress and anxiety, the pandemic crafted in common. The adverse effects of such stressors were more intense on police women compared to their male counterparts because of their stronger emotional sensitivity and more accountability to domesticity and social and family care commitments than police men.

The study extends the theoretical framework by identifying key stressors such as social isolation, restrictions on leave, extended separation from family, fear of contracting illness, and fear of transmitting it to others. According to the theory, role conflict and limited resources hinder effective role performance, leading to distress. These identified stressors reflect the female police officers' struggle to fulfill their expressive roles within their families and to carry out their instrumental duties in socially supportive ways. As a result, these factors serve to enrich and supplement the existing theory.

The literature on policing linked to the pandemic present the strategies adopted by the police to execute the COVID specific norms in order to mainly prevent the spread. Some other studies emphasized the stress police personnel experienced due to plying police roles during the pandemic. As an addition to this stock, the present study explored the above stressors exclusively from gender perspective.

Based on the solutions they suggested during the study, some actionable measures need to be taken in collaboration of the government and the police administration, in case any COVID like future exigency. These measures should be pragmatic, situation and stressor specific and the willingness of the stakeholders to implement those must be need-driven than peripheral circumstance-driven.

The prolonged psychological impact of COVID-19-related stressors on women in law enforcement warrants closer examination, as these effects may influence their job performance, career retention, and overall quality of life. Future research could also investigate the specific coping mechanisms and resilience strategies adopted by male and female police officers differently during the pandemic and make comparisons and the usefulness of such strategies during future eventualitie Gaining insight into effective approaches can inform the development of tailored training programs and mental health support systems for similar crises in the future. Additionally, it is important to explore how these stressors differed among women officers across various regions or countries, particularly in relation to disparities in socioeconomic development and public health responses. Such comparative analysis would shed light on how cultural, institutional, and systemic factors shape the experiences and stress levels of women in policing roles.

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