

Original Research Article

Influence of Social Support on Mental Health among Police First Responders in Benue State, Nigeria

Damian Igbasue Attah^{1*}, Joyce Mcivir Terwase¹, Pauline Aingona Atsehe¹¹Department of Psychology, Rev. Fr. Moses Orshio Adasu University, Makurdi, PMB 102119, Makurdi, Benue State

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Abstract: Mental health encompasses the emotional, psychological, and social dimensions that influence decision-making, relationships, and the ability to navigate everyday environments. Among police first responders who are the initial law enforcement personnel who arrive at emergency scenes to secure areas, assess risks, and provide immediate aid before specialized teams arrive, mental health challenges are particularly pronounced due to disproportionate exposure to traumatic events, including violence, accidents, and human suffering. In regions plagued by conflict and insecurity, such as Benue State, Nigeria, these officers face chronic occupational stressors that significantly elevate risks for mental health disorders, including post-traumatic stress disorder (PTSD), depression, and anxiety. This paper adopted the cross-sectional study to examine the influence of social support on mental health among 365 police first responders in Benue State, Nigeria. Data were collected using two validated instruments: The Mental Health Inventory-38 (MHI-38) and the social support subscale of the Job Demand-Control Questionnaire, which assessed levels of support from friends and family members. Multiple linear regression analysis was employed to test the hypothesis, revealing a significant positive influence of social support on mental health among police first responders in Benue State, Nigeria ($R^2 = .642$, $F(2, 362) = 161.087$, $P < .050$), with social support emerging as a positive predictor of mental health ($\beta = .155$, $t = 1.965$, $P = .050$). These findings highlight the protective role of social support in high-risk occupational environments and advocate for peer-led interventions to enhance resilience among police first responders. Limitations of the study include potential self-report bias and the cross-sectional design. Future research should explore longitudinal methods to better understand the long-term dynamics of social support and mental health in this population.

Keywords: Occupational Characteristics, Social support, Mental Health, Police First Responders.

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INTRODUCTION

Mental health has been conceptualized in various ways over time. A foundational perspective, often attributed to Sigmund Freud, describes it as the ability to love and work effectively, reflecting a balance between instinctual drives, rational decision-making, and moral standards. This view has evolved, with modern definitions emphasizing positive mental health as a protective factor against psychopathology, a driver of adaptive functioning, and a resource for resilience in high-stress environments (Phua and Chew, 2025; Keyes and Simoes, 2023). The World Health Organization (2022) portrays mental health as a vibrant continuum of

well-being, characterized by emotional vitality, psychological flourishing, and social connectedness that enables individuals to thrive amid life's complexities. Contemporary psychology, building on positive psychology frameworks (Seligman, 2011), highlights strengths-based approaches and the influence of environmental and social factors in maintaining mental equilibrium, particularly in occupations exposed to chronic stress.

Police first responders operate in environments marked by unpredictability, danger, and repeated trauma exposure. Globally, these professionals show heightened vulnerability to mental health disorders due to

*Corresponding Author: Damian Igbasue Attah

Department of Psychology, Rev. Fr. Moses Orshio Adasu University, Makurdi, PMB 102119, Makurdi, Benue State

cumulative occupational stress (Shabear *et al.*, 2019). Studies indicate elevated prevalence rates: meta-analyses suggest around 14-15% experience probable PTSD from routine duties, with higher rates post-major incidents (example, Global PTSD Prevalence Study, 2024). Comprehensive reviews note that one in seven police officers worldwide may suffer from PTSD or depression, often accompanied by alcohol misuse (Mental Disorders and Mental Health Promotion in Police Officers, 2024). Other research reports that up to 20% exhibit PTSD or complex PTSD symptoms, with 90% exposed to trauma, making officers two to four times more likely to develop PTSD than the general population (Police workforce: almost one in five suffer with a form of PTSD, 2020; Perspective: The Impact of Life Experiences on Police Officers, 2023). In the United States, heightened scrutiny post-2020 has underscored issues like depression and suicidal ideation, with reports showing 25% of first responders seeking treatment for conditions such as PTSD (Mental Health Conditions in First Responders, 2025; NPR, 2025).

In Africa, resource limitations intensify these risks. A South African study of police and paramedics found high rates of probable depression (47.3%), anxiety (37.8%), and PTSD (48.5%), exceeding general population norms (Ward *et al.*, 2025). Ethiopian research links work-related burnout to job demands and low support (Prevalence of Work-Related Burnout, 2024). Systematic reviews highlight elevated suicidal behaviors among disaster responders, including police (Systematic Review of Suicidal Behaviors, 2025).

In Nigeria, police first responders face unique stressors from insurgency, communal violence, and underfunding. Studies identify excessive workload and inadequate resources as key factors leading to anxiety and depression (Causative Sources and Stress Management, 2025). Mental health awareness remains low (around 30%), with stigma impeding help-seeking (Mental Health in Nigeria, 2021). In northern regions, occupational stress correlates with health issues like hypertension (Managing Occupational Stress, 2024). Benue State exemplifies these challenges, with ongoing farmer-herder conflicts displacing hundreds of thousands and causing significant casualties since 2018 (Armed Conflict Location and Event Data Project, 2025). Police first responders endure mass casualties, ambushes, and resource shortages, heightening PTSD risks amid escalating violence (Sunday, 2024; Farmer-Herder Conflict and International Crimes in Benue, 2025; Stopping Nigeria's Spiralling Farmer-Herder Violence, 2018; The Moral Economy of the Agatu "Massacre", 2023).

The Job Demand-Control (JDC) model (Karasek, 1979) offers a framework for understanding these issues, positing that high job demands paired with low control lead to strain and mental health problems. In policing, demands encompass shift work, violence

exposure, and administrative pressures, while control involves decision-making autonomy. Applications to police indicate that demands heighten stress, with autonomy sometimes failing to buffer or even exacerbating effects (Impact of job demands on police stress response, 2022; Association of work-related stress with mental health problems, 2013).

Social support, encompassing emotional, instrumental, informational, and appraisal aid from networks buffers stress and fosters resilience (Thoits, 2011). Among first responders, it mitigates PTSD and depression by promoting belonging and coping (Peer Support Programs Review, 2025). Reviews emphasize peers as "trusted others" for post-trauma processing (Turning to Trusted Others, 2022) and highlight peer programs' effectiveness in preventing deterioration (Prevention and Treatment Umbrella Review, 2024). Social support is especially protective for public safety personnel facing psychological trauma (Mental health and social support among public safety personnel, 2020). In Africa, cultural interdependence enhances its effects, with colleague support linked to lower PTSD in South Africa (Mental Health Symptoms and Coping, 2025). In Nigeria, familial and peer support reduce burnout, though stigma restricts access (Police Job Stress in Nigeria, 2024). The Job Demand-Control-Support model extends the JDC framework, suggesting support moderates high demands and low control to reduce strain (Karasek, 1979). Maladaptive coping, such as alcohol use, worsens outcomes when support is low (Bobade and Obosi, 2024; Alcohol Misuse and Correlates with Mental Health Indicators, 2024; Alcohol use in firefighters, 2022).

This study addresses gaps in localized research by examining social support's influence on mental health among police first responders in Benue State, Nigeria. The hypothesis tested whether social support would significantly and positively influence mental health in this population.

METHOD

Design

A cross-sectional survey design was used to facilitate data collection on current mental health and social support without longitudinal tracking of participants over a period of time. This design is suitable for resource-constrained settings as it allows for efficient assessment of associations but limits causal inferences.

Population

The population included 4,903 active police first responders in Benue State Police Command (Police Nominal Roll General, 2024). Inclusion criteria was for at least one year of service in tactical units while retirees and/or non-operational staff were excluded. This focus ensures relevance to those most exposed to stressors.

Sampling Technique

Multistage sampling was used to ensure representation of all police officers under the Benue State Police Command from the various clusters formed by the three senatorial zones' and area commands (Makurdi, Gboko, Otukpo), with purposive sampling used to select police first responders from high-risk divisions (Ukum, Katsina-Ala, Gwer West, Guma, Agatu and Apa). Sample size ($n = 365$) was calculated using Taro Yamane's formula (Yamane, 1967) at 5% error margin. This method balances representativeness with practicality in conflict zones.

Participants

A total of 365 Police First Responders participated in the study. The number comprised 327 (89.6%) males and 38 (10.45) females. Their age range was from 18-60 ($X = 2.62$, $SD = .605$). As for their ages, 23 (6.3%) were between 18-30 years, 98 (26.8%) were 31-40 years, 244 (66.8%) were 41-60 years. About their marital status, 22 (6.0%) were single, 3334 (91.5%) were married, while 6 (1.6%) were living together as intending couples. In terms of religion, 338 (92.6%) were Christians while 27 (7.4) were Islam. About their education, 161 (44.1%) has secondary education and 204 (55.9%) had attended tertiary education. On rank/designation, 64 (17.5%) were Corporal, 83 (22.7%) were Sergeants, 197 (54.0%) were Inspectors and 21 (5.8%) were ASP. On marital status, 173 (47.47) were located in the Urban area while 191 (52.3%) were located in the Semi-Urban/Rural areas.

Instruments

- **MHI-38:** 38 items on 5-point Likert scale assessing distress (e.g., anxiety, depression; Berwick *et al.*,

1991). Pilot $\alpha = .966$; study $\alpha = .923$. Scoring: higher sums indicate poorer mental health (range 0–152). This tool is widely used for its comprehensive coverage of psychological symptoms.

- **Job Demand-Control Questionnaire:** 15 items post-pilot (original 16; one removed for low correlation). Subscales: job demand ($\alpha = .889$), job control ($\alpha = .946$), social support ($\alpha = .985$). 4-point Likert; higher scores denote higher demands/control/support (Karasek, 1979). Adaptations ensured cultural fit. Instruments were adapted for cultural relevance and pilot-tested on ($n = 37$) Police First responders.

Procedure

The researcher obtained ethical approval from Benue Police Command and MOAUM, Institutional Review Boards. Informed consent emphasized confidentiality and withdrawal rights. Questionnaires were administered at police stations and out stations; 387 copies of the questionnaire were distributed, while 365 were returned (94% rate). Debriefing included mental health referrals while measures were taken to minimize disruption in active duty environments.

Data Analysis

Data for the study were analyzed using SPSS v26: descriptives were run for demographics; multiple regression was carried out to test for the hypotheses formulated, with mental health as dependent variable and social support as focal predictor.

RESULTS

Variables	R	R ²	F	df	β	t	Sig.
Constant	.801	.642	161.087	2,362		34.713	.000
Occupational Characteristics					.367	15.737	.000
Social Support					.155	1.965	.050

DISCUSSION

Social support's positive influence aligns with reviews showing peer aid reduces PTSD (Peer Support Programs, 2025; Prevention Umbrella Review, 2024). In Nigeria, familial support buffers burnout (Police Job Stress, 2024). Low support interacted with demands and alcohol, worsening outcomes (Bobade and Obosi, 2024). Connection and community are vital for managing stress in public safety roles (Connection and Community: Strengthening Wellness for Public Safety, 2024). Resources like the First Responder Support Team emphasize peer and clinician collaboration (First Responders Support Team, undated).

These findings suggest the need for integrated mental health strategies in policing. Federal efforts, such as those in the U.S., provide models for supporting first responders (Federal Efforts to Address the Mental Health

of First Responders, 2020). In Nigeria, addressing the neglect of mental health as a public issue is crucial (Mental health in Nigeria: A Neglected issue in Public Health, 2021). Policies should incorporate trauma-informed training and access to resources like warm lines for families (Family Support | National Alliance on Mental Illness, undated).

CONCLUSION

Social support significantly improves mental health among Benue's police first responders, countering occupational and behavioral risks. Systemic enhancements are imperative for sustainable well-being. Given the escalating conflicts in Benue, such as farmer-herder violence leading to criminal activities and rustling (From ejecting the herds to hidden dangers, 2024), targeted interventions are urgent.

Recommendations

- i. Following the findings, the study recommends the promotion of family-inclusive programs to enhance social support among police first responders in Benue State, Nigeria.
- ii. There should be integrated routine screenings and stigma-reduction campaigns among Police first responders in Benue State, Nigeria.
- iii. There should be the implementation of mental health promotion programs tailored to police first responders in Benue State, Nigeria.

Contribution to Knowledge

This study fills the gap in Nigerian research, demonstrating social support's efficacy in conflict zones (Yusuf *et al.*, 2021). It advances the Job Demand-Control-Support model by incorporating alcohol use, informing global first-responder policies. Future research could explore mediating effects of health behaviors (The mediating effect of health behaviors on the association, 2024).

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