



RESEARCH ARTICLE

Burnout Syndrome in Military Police Officers from a Large City in the State of Bahia

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ABSTRACT

Introduction: Police work has a number of peculiarities compared to other professional activities. This work is characterised by a high level of tension and emotional exhaustion.

Objective: To estimate the prevalence of Burnout Syndrome in military police officers in the city of Feira de Santana, Bahia.

Method: This was a descriptive study of 157 military police officers assigned to the 65th Independent Military Police Company and the Community Security Base. A general information questionnaire about the job and the Maslach Burnout Inventory (MBI) used to identify Burnout Syndrome were used.

Results: The prevalence of Burnout Syndrome was 12.7 % in the two Police Units studied.

Conclusions: A high prevalence of Burnout Syndrome was observed in the workers studied. It is hoped that the findings of this study will contribute to the development of health-promoting intervention strategies in this occupational segment.

Keywords: prevalence, burnout syndrome, police officers; work

Introduction

The Military Police, as part of the functional structure of Public Security at state level, is necessary for maintaining social relations and monitoring individual and collective practices that run counter to social order. Compared to other professions, military police workers are characterised by a high level of stress and emotional strain. They are both the subject and the user of public security. Their professional practice is aimed at preventing and combating criminal activity ¹.

The professional category of military police officer has in its statute the greatest sacrifice that can exist for a worker, which is to put their own life at risk ¹. In order to do this, both personally and professionally, military police officers need to surround themselves with technical and health care so that the risks to their physical and mental integrity are mitigated.

In this regard, the work of the Military Police requires assertive and occasionally forceful decision-making. These workers expose their physical integrity and their lives on a daily basis, and their working hours are considered exhausting, both physically and mentally. Minayo, Assis and Oliveira in a study that discussed the impact of professional activities on the physical and mental health of civil and military police officers in Rio de Janeiro, concluded that the police force stands out from other professional categories due to its high workload and suffering, and that operational police officers are more susceptible to risks and injuries arising from their profession ².

According to Mesquita work-related stress, if not managed correctly, can lead to the development of diseases such as hypertension, diabetes, anxiety, depression and Burnout Syndrome, which can result in incapacity for work. Studies show that military police officers are among the three categories most vulnerable to developing this syndrome, along with health professionals and teachers, whose work requires a significant burden of responsibility, protection and caring for others, which can be identified in the work of military police officers ³⁻⁶.

Burnout Syndrome (BS), according to the WHO (2019), is the result of chronic stress in the workplace that has not been successfully managed. In the 11th revision of the International Statistical Classification of Diseases and Related Health Problems - ICD-11, it received the code QD85. Burnout Syndrome is characterised by three dimensions: emotional exhaustion, depersonalisation and low professional achievement ⁷.

Emotional exhaustion is characterised by a feeling of emotional and physical exhaustion at work; depersonalisation is defined by indifferent, hostile, intolerant and impersonal behaviour towards other people; ineffectiveness or a feeling of low professional achievement is evident when people suffering from *burnout* tend to believe that their professional goals are not achieved and experience a feeling of low professional self-esteem ^{8,9}.

This study aims to estimate the prevalence of *Burnout Syndrome* in military police officers from Feira de Santana, Bahia.

Methods

This is a population-based, descriptive study of 157 workers from the 65th Independent Military Police Company and the George Américo Community Security Base, which belong to the 66th Independent Military Police Company of Feira de Santana, Bahia.

Data was collected between July and November 2022 by distributing a validated, self-administered, individual instrument accompanied by an informed consent form. In order to minimise inconvenience for workers who could not interrupt their activities to fill in the questionnaire, a date was scheduled to collect the information. Weekly meetings were held with the whole team to hand out and review the questionnaires.

A pilot study was carried out in another police company located in the municipality of Santa Bárbara, 50 kilometres from Feira de Santana, to check the adequacy, clarity, approximate completion time and problems in returning the data collection instrument. The study was widely publicised among the workers involved.

For data collection, an instrument divided into blocks of questions was used, including information on: 1st general identification of the participant; 2nd general information about the work environment. 3rd psychosocial characteristics of work, measured by the *Job Content Questionnaire* (JCQ). 4th block: assessment of *Burnout Syndrome* using the *Maslach Burnout Inventory* (MBI).

To detect *Burnout Syndrome*, we used the *Maslach Burnout Inventory* (MBI), which is made up of 22 statements about feelings and attitudes that encompass three fundamental dimensions of the syndrome, divided into three seven-point scales ranging from 0 to 6, making it possible to describe each of the dimensions independently. Professional exhaustion is assessed by nine items, depersonalisation by five and personal fulfilment by eight. For emotional exhaustion, a score ≥ 27 indicates a high level; from 17 to 26, a moderate level; and ≤ 16 , a low level. For depersonalisation, a score ≥ 13 indicates a high level, from 7 to 12 a moderate level and ≤ 6 , a low level. The score related to ineffectiveness goes in the opposite direction to the others, since a score of zero to 31 indicates a high level, 32 to 38 a moderate level and ≥ 39 a low level ¹⁰.

As there is no consensus in the literature on the interpretation of the MBI scale, the results were presented according to the criteria suggested by Tucunduva, who characterised the presence of a high level in all three dimensions as *Burnout Syndrome* ¹¹.

The data collected was double-entered in order to identify and correct possible typing errors, using the *EpiData for Windows* version 3.1 programme, and the *Statistical Package for Social Science (SPSS®)* for Windows version 17.0 was used for statistical analysis.

The data was descriptively analysed by calculating the absolute and relative frequencies of the categorical variables and the measures of central tendency and dispersion of the continuous numerical variables. Absolute and relative frequencies were calculated to calculate prevalence. The data was presented in tables.

The prevalence of *Burnout Syndrome* and its three dimensions was estimated. We described the variables, personal characteristics: gender, age, marital status, having children, schooling, weight, and time in years of work, drinking habits, smoking habits, physical activity.

All participants were informed of the objectives of the study and consented to take part after reading and signing the Informed Consent Form (ICF). Military police officers with at least two years' service, regardless of age, took part in the study. The study was previously approved by the Research Ethics Committee under Opinion No. 5.056.852, CAAE No. 50570221.5.0000.0053, following formal recommendations¹²

Results

Data collection resulted in 157 completed questionnaires, representing 95% of the initially eligible population (165), 115 from the 65th Independent Military Police Company (CIPM) and 42 from the George Américo Community Security Base (BCS-GA). Due to the uniqueness of the mission of the units studied, the results were presented and analysed separately.

The 65th CIPM is more focused on traditional ostentatious policing. In this unit, the majority of participants were

male (79.1%), self-declared brown (65.2%), with an average age of 40 ± 6.9 years, university degree (63.5%), married/stable union (78.3%) and with children (80.9%). The majority did not drink (53.9%) or smoke (92.1%) and reported being overweight (49.6%). Table 1

The BCS-GA is characterised as community policing¹³, which aims to develop a new partnership between the Military Police and the community, so that together they can find solutions to problems related to the community, with a view to improving the population's quality of life. The results showed that the majority of participants were male (88.1%), self-declared brown (64.3%), with an average age of 38.6 ± 6.2 years, university degree (78.6%), married/stable union (76.2%) and had children (69%). The majority did not drink (61.9%) or smoke (97.6%) and reported being overweight (54.8%). Table 1

The personnel who took part in the survey are mainly squares, either in the 65th CIPM (93.9%) or BCS-GA (97.6%). The majority have up to 15 years' service, both in the 65th CIPM (66.1%) and the BCS-GA (73.8%) and work in operational roles, 69.6% in the 65th CIPM and 76.2% in the BCS-GA.

Table 1 – Sociodemographic characterisation of military police officers from the 65th CIPM and BCS-GA/66th CIPM, Feira de Santana, Bahia, 2022

Variable	65 ^a CIPM		BCS-GA	
	No	%	No	%
Sex				
Male	91	79,1	37	88,1
Female	24	20,9	5	11,9
Skin color				
White	10	8,7	8	19
Yellow	0	0	1	2,4
Brown	75	65,2	27	64,3
Indigenous	1	0,9	0	0
Black	28	24,3	6	14,3
Don't know	1	0,9	0	0
Age				
Up to 39 years old	60	52,2	24	57,1
40 years or older	55	47,8	18	42,9
Education				
College degree	73	63,5	33	78,6
Basic schooling	42	36,5	9	21,4
Marital status				
With marital relations	90	78,3	32	76,2
Without marital relations	25	21,7	10	23,8
With kids				
Yes	93	80,9	29	69
No	18	15,7	11	26,2
Didn't answer	4	3,4	2	4,8
Drinking habit				
Yes	53	46,1	16	38,1
No	62	53,9	26	61,9
Smoking habit				
Non-smoker	106	92,2	41	97,6

Variable	65 ^a CIPM		BCS-GA	
	No	%	No	%
Ex-smoker	7	6,1	1	2,4
Smoker	2	1,7	0	0
Physical activity				
Yes	87	75,7	35	83,3
No	28	24,3	7	16,7
Ideal weight				
Yes	51	44,3	14	33,3
Lower	7	6,1	5	11,9
Higher	57	49,6	23	54,8
Police classification				
Soldier	108	93,9	41	97,6
Oficial	7	6,1	1	2,4
Time in Service				
Up to 15 years	76	66,1	31	73,8
16 years and over	39	33,9	11	26,2
Function				
Operational	80	69,6	32	76,2
Administration	35	30,4	10	23,8
Total	115	100	42	100

Source: Elaborated by the author.

The overall prevalence of *Burnout Syndrome* in the presence of a high level in all three dimensions was 12.7% and 48.4% in the presence of a high level in only one dimension. In the 65th CIPM, the prevalence of *Burnout Syndrome* was 13.9% (16) in the presence of a high level in all three dimensions and 44.3% (51) in the presence of a high level in just one dimension and in the

BCS-GA it was 9.5% (04) and 59.5% (25) respectively (Tables 2 and 3).

In relation to the burnout dimensions analysed separately, there was a high prevalence in all three dimensions, but emotional exhaustion was the highest (44.4%).

Table 2 - Prevalence of Burnout Syndrome and its three dimensions (Emotional Exhaustion, Depersonalisation and Low Professional Achievement) in military police officers from the 65th CIPM, Feira de Santana, Bahia, 2022.

Emotional exhaustion	No ¹	%
Hight	51	44,4
Moderate	35	30,4
Low	29	25,2
Depersonalisation		
High	29	25,3
Moderate	40	34,7
Low	46	40,0
Inefficiency		
High	30	26,1
Moderate	25	21,7
Low	60	52,2
Total		
Prevalence of Burnout Syndrome		
Three dimensions	16	13,9
One dimension	51	44,3

Source: Elaborated by the author.

Table 3 - Prevalence of Burnout Syndrome and its three dimensions (Emotional Exhaustion, Depersonalisation and Low Professional Achievement) in military police officers from the BCS-GA - 66th CIPM, Feira de Santana, Bahia, 2022.

Emotional exhaustion	No ¹	%
High	20	47,4
Moderate	13	31,0
Low	09	21,4
Depersonalisation		
High	13	31,0
Moderate	16	38,0

Emotional exhaustion	No ¹	%
Low	13	31,0
Inefficiency		
High	10	23,8
Moderate	14	33,4
Low	18	42,8
Total		
Prevalence of Burnout Syndrome		
Three dimensions	04	9,5
One dimension	25	59,5

Source: Elaborated by the author.

Discussion

The overall prevalence of *burnout* syndrome among the military police officers surveyed was 12.7 %, a significant result given that they were considered to be at a high level in all three dimensions of the MBI.

In studies carried out by Nascimento Sobrinho et al with the aim of estimating the prevalence of *Burnout* Syndrome in a population of intensive care doctors in Salvador, Bahia, and by Góis et al (2024)⁵ in Feira de Santana, Bahia, they observed a prevalence of *Burnout* Syndrome of 7.4% and 1.9% respectively, when considering the high level in the 03 dimensions of the syndrome ^{5,14}.

Tironi et al, in a study carried out with the aim of estimating the prevalence in a sample of intensive care doctors from five Brazilian state capitals, estimated a prevalence of 5.0 % of *Burnout* Syndrome, when considering the high level in all three dimensions simultaneously. In addition, international studies point to a high prevalence of *Burnout* in intensive care workers ^{6,15–17}. Considering the high levels of *burnout* found in this and other studies, Barros (2016) et al suggest that this syndrome can be considered an occupational health problem, producing implications for professionals, families, service users and the organisation. The work context (policing philosophies) is an important starting point to indicate possible contributions of this research to military police officers ¹⁸.

In a study on the preliminary identification of *Burnout* Syndrome in military police officers, Lima et al (2018) observed a prevalence of BS of 17.3 % in male officers and 4.8 % in female officers. The authors also described that the majority of police officers with *burnout* were aged between 18 and 30, with 17.3 %, followed by those aged between 41 and 53 with 16.7 %. In their study of *Burnout* Syndrome and factors related to the Mexican police workforce, Torres-Vences et al found no association between age group and *burnout* dimensions. Allied to this, a study carried out in Paraná found that 87.0% of the police officers studied had high levels of *Burnout* ^{19–21}.

Maslach, Schaufelli and Leiter claim that the factors that influence the occurrence of burnout syndrome are chronic stress, excessive pressure, conflicts and low recognition. Nascimento Sobrinho et al state that the biggest challenge is still to identify the main factors related to the syndrome. In this sense, both personal work characteristics

and the psychosocial aspects of work should be studied as possible factors associated with the syndrome ¹⁴.

The main dimension of *Burnout* Syndrome present among the police officers studied was emotional exhaustion, which is considered the first reaction to the stress generated by the demands of the job. Once exhausted, workers feel physically and emotionally tired and find it difficult to relax and carry out their activities ^{22,23}. The characteristics of this dimension, compared to the others, allow it to be accepted and taken on board easily by the professional when expressing consistent aspects of *burnout* ⁶. This result is in line with other international studies ^{15–17}.

As the psychological and physical symptoms evolve, the professional develops depersonalisation, which is characterised by cold and negative attitudes, with derogatory treatment of the people directly involved in the work. The worker starts to behave in a cynical and ironic way towards the recipients of their work ^{6,18,24}. This dimension had the second highest prevalence in this study.

According to some authors, this situation can evolve into one of ineffectiveness, with reduced self-confidence and a sense of failure, resulting in feelings of reduced personal and work fulfilment ^{8,24–26}. In this study, ineffectiveness was observed in almost a quarter of the population studied. It is important to emphasise that this dimension is considered by the authors to be the last reaction to the stress generated by the demands of the job ^{26,27}.

It is understood that the objective of this study was achieved, making it a pioneer in terms of estimating the prevalence of *Burnout* Syndrome in military police officers from a large city in the interior of Bahia.

Conclusions

The results revealed a high prevalence of *Burnout* Syndrome among the military police officers studied. This prevalence was higher among officers from the 65th CIPM when compared to officers from the BCS-GA.

These outcomes indicate that peculiarities of the work of military police officers in different police units in Feira de Santana may be associated with the occurrence of *Burnout* Syndrome in the population studied.

These results encourage researchers to carry out further studies to understand which intrinsic characteristics of the work carried out by police officers in the different operational units of Feira de Santana may be associated with the greater occurrence of *Burnout* Syndrome.

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