Occupational Stressors in Corrections Organizations: Types, Effects and Solutions

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Introduction

The primary goal of corrections work is the safe and secure management and rehabilitation of justice-involved individuals, whether in locked facilities or within community supervision programs. Pursuit of this goal comes with demanding requirements such as the necessity of staff to maintain a constant state of heightened vigilance while they work and to adhere to strict security protocols. In addition, corrections staff must perform their duties within harsh physical environments and with repeated exposure to violence, injury, and death events.

Data support a health and functioning toll of corrections work that must be not only endured but also overcome if corrections staff are to perform optimally over time and if staff are to develop a sense of job-related success, pride, meaning, and professional fulfillment. Meeting and overcoming the occupation-specific challenges of corrections work will, by necessity, require an accurate and specific understanding of the converging forces impinging on staff’s health and functioning, how these manifest, and how they can be deterred. This paper presents an evidence-supported model and framework for the comprehensive understanding of occupational threats to corrections workplace health and functioning as well as a data-driven and evidence-based strategy for addressing them.

Types of Stressors in Corrections Environments

The profession of corrections is made even more demanding by the variety of types of stressors inherent to it. Two main types of stressors are organizational and operational in

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nature. Organizational stressors have their source in the “people” aspects of the job, such as stressors due to interpersonal conflict, role problems, or unsupportive leadership. Operational stressors refer to logistical issues common to correctional environments, such as high workloads, harsh physical conditions, and shiftwork.

Research has shown that organizational and operational stressors contribute to “burnout”\textsuperscript{26, 35}. The term “burnout”\textsuperscript{23} is frequently used to describe a state of emotional exhaustion that workers experience, which may be accompanied by a reduced sense of job role effectiveness and/or an attitude of indifference or callousness toward justice-involved individuals or other staff members\textsuperscript{17}.

A third major type of stressor, which is not included in the construct of burnout, is the traumatic stressor\textsuperscript{32, 40}. While traumatic exposure has not received much attention in corrections research to date, both direct and indirect types of potentially traumatic exposure are not uncommonly experienced\textsuperscript{37}. Traumatic exposure may occur “first hand,” such as when, for example, a staff member is assaulted by a justice-involved individual or when a staff member directly observes the assault of another person. Indirect or “second hand” exposure occurs when accounts of violence, injury or death-related events are conveyed through in-house communications or through paper or electronic media or other mediums.

**Direct and Indirect Traumatic Exposure**

The relevance of both direct and indirect traumatic exposure is made explicit, for the first time, in the recently released *Diagnostic and Statistical Manual for Mental Disorders, Fifth Edition*\textsuperscript{1}. According to the DSM-5, the traumatic exposure criterion for Posttraumatic Stress Disorder, for example, can now be met through indirect forms of traumatic exposure as well as
direct exposure, such as through various forms of disturbing media communications—if those communications are repeated or extreme and are work-related.

Research supports that corrections professionals are exposed to a large number of high stress and potentially traumatic incidents, both directly and indirectly. For example, it has been estimated that during their careers, United States corrections professionals experience an average of 28 exposures to violence, injury or death-related events and involving events of five different types. Increases in both the total number of exposures and the number of types of exposures has also been associated with worse scores on a range of health, functioning, and well-being measures.

Given the DSM-5’s expanded definition of what constitutes traumatic exposure, combined with empirical data bearing on the extent and breadth of both indirect and direct traumatic exposure, it becomes clear that corrections work is a high stress and high trauma occupation, akin to police work, firefighting, combat military activity, and similar vocations. Evidence suggests that this claim is particularly accurate for corrections staff with job roles involving the highest and most direct levels of exposure to violence, injury, and death-related events. Security/custody staff, for example, have been found to experience adverse consequences upon their health and functioning at generally higher rates than positions that involve less front line activity.

The link between traumatic exposure and extreme consequences such as Posttraumatic Stress Disorder, Depression and suicide risk, have, to date, been most thoroughly investigated in relation to police work, firefighting and combat military activity. While less often the focus of attention, rigorous and large scale research investigations into occupational stressors,
consequences, and the health and functioning of corrections professionals have recently begun to emerge.

**Use of Varying Terminology in Literature on Traumatic Exposure**

Indirect traumatic exposure has most often been studied in helping professions such as counseling and psychotherapy, where therapists are understood to be negatively affected indirectly or vicariously as they empathically listen to detailed accounts of disturbing material from their clients. This particular type of exposure has been conceptually defined and described by researchers using various and sometimes synonymously-used terms such as Secondary Traumatic Stress or Compassion Fatigue, or Vicarious Trauma.

Given that corrections professionals are routinely exposed to multiple types of stressors concurrently in correctional settings—such as organizational, operational and traumatic—the more narrowly defined and context-specific conceptualizations like Compassion Fatigue, Secondary Traumatic Stress, or Vicarious Trauma, by themselves only capture a small portion of the broader spectrum of exposure and stressor types. For this reason, an umbrella term—Corrections Fatigue—has been proposed to more fully capture the range of stressors and types of exposure that can and do operate in corrections settings. The term Corrections Fatigue also addresses how different types of stressors tend to manifest in the form of a cumulative toll on staff health and functioning, and involving interacting and even self-perpetuating aspects.

The advantages of a more encompassing term such as Corrections Fatigue are several. In addition to taking account of major categories of stressors and their inter-related consequences for corrections staff, a broader term is also capable of embracing the DSM-5’s expanded
definition of what constitutes traumatic exposure—taking into account both direct and indirect forms of work-related traumatic exposure.

Still another advantage of a more encompassing term is that it encourages a focus upon staff health and functioning through interventions targeting improvement on the level of organizational culture. Several studies and literature reviews have emphasized the breadth and complexity of corrections-specific challenges, and have proposed solutions that are similarly comprehensive and multi-faceted in nature.

**Corrections Fatigue Technically Defined**

Corrections Fatigue can be understood as a collection of negative and inter-related consequences upon the health and functioning of corrections professionals and the workplace culture as a whole due to exposure to traumatic, operational, and organizational stressors and their interacting consequences. Consequences or manifestations of Corrections Fatigue include negative personality changes, socially dysfunctional thinking/ideology, and forms of declined health and functioning as depicted in Figure 1.

The definition of Corrections Fatigue described is in part based upon Constructivist Self Development Theory—the same theory upon which Vicarious Trauma is based. In short, Constructivist Self Development Theory asserts that individuals develop mental maps of the world and of themselves based upon their unique stream of experiences over time, including traumatic experiences (i.e., particularly highly charged experiences). These maps or internal representations, in turn, shape perceptions and behavior to an extent, reflecting an evolving circular process. Thus the nature of a given individual’s stream of experiences influences the
Thus both Corrections Fatigue and Constructivist Self Development Theory take account of the way that experiences, and the nature of experiences, can influence thinking and behavior, in general, and especially following exposure to highly charged experiences. While the focus of Constructivist Self Development Theory has been primarily on individuals and within the context of individual clinical treatment, Corrections Fatigue extends the cause and effect logic to the work group/workplace culture level.

Substantial research support for the illustrated Corrections Fatigue Process Model and its components exists, bearing on (1) Organizational Stressors \(^{15, 17, 19, 35}\), (2) Operational Stressors \(^{3, 11, 15, 17}\), (3) Traumatic Stressors \(^{19, 21, 37}\), (4) Declined Health and Functioning \(^{3, 10, 26, 28, 38}\), (5) Dysfunctional Ideology/Behavior \(^{31}\), and (6) Negative Personality Changes \(^{11}\). The model was created to depict how three major types of stressors initially give birth to Corrections Fatigue, and how once Corrections Fatigue surfaces, it then manifests in the form of a “vicious circle” of interacting, self-reinforcing and self-perpetuating components.

The three major types of stressors in the Corrections Fatigue Process Model have been described as Organizational, Operational, and Traumatic. Organizational stressors specifically include such facets as dual role conflict \(^{35}\), difficult/demanding social interactions \(^{15, 35}\), low organizational support \(^{15}\), and insufficient education and training on coping strategies \(^{19}\). Operational Stressors include such facets as high workload, mandatory overtime, and low decision authority \(^{15}\), as well as immersion in harsh physical environmental conditions \(^{3}\).
Traumatic Stressors consist of direct and indirect exposures to violence, injury, and death events, and repeatedly over time \(^{21, 37, 38}\).

**Types of Corrections Fatigue Components**

The three major components of Corrections Fatigue indicated in the Corrections Fatigue Process Model include Dysfunctional Workplace Ideology/Behavior, Negative Personality Changes, and Declined Health and Functioning.

Examples of dysfunctional ideology and behavior include dualistic thinking as exemplified by an “us against them” (i.e., staff versus justice-involved individuals) perspective \(^{31}\), cynicism \(^{33}\), workplace alienation \(^{33}\), and indifference \(^{20}\).

Negative Personality Changes consist of: negatively skewed emotional disposition and outlook \(^{11}\); declined
empathy or compassion\textsuperscript{31}; a tendency toward social isolation\textsuperscript{33}; negative emotions, such as shame, guilt, and anger\textsuperscript{37}; and increased substance use\textsuperscript{37, 38}.

Declined Health and Functioning are exemplified by: depressed mood\textsuperscript{10, 28}; PTSD\textsuperscript{37, 38}; co-occurring PTSD and Depression\textsuperscript{10}; anxiety\textsuperscript{10}; declined performance on the job, in relationships, in caregiving, in attending to personal responsibilities, and in ability to enjoy leisure time\textsuperscript{10, 37}; increased suicide risk\textsuperscript{27}; reduced life satisfaction\textsuperscript{10, 37}; and lowered physical health\textsuperscript{10, 38}.

**Interacting Components of Corrections Fatigue**

It seems plausible to expect that aspects of all three major areas of Corrections Fatigue are, naturally, going to interact and reinforce each other. For example, negative thoughts and expectations might cross over to distrust of others and “Us against Them” dualistic thinking. Distrust and social withdrawal may further reduce expressions of social support toward peers, subordinates or justice-involved individuals—encouraging detachment and social isolation. As another example, it seems plausible to expect that declined health and functioning would contribute to increased absenteeism, reduced sensitivity to details, and/or lower work output. The latter might, in turn, put increased strain on other staff, elevate the possibility of security lapses or policy violations, and/or reduce workplace safety.

**A Six-Stage Model for Addressing Corrections Fatigue**

As discussed, the negative effects of Corrections Fatigue are broad. If left unaddressed, the health and functioning of the workforce is likely to be less than optimal, or worse. In light of the evidence supporting the reality of Corrections Fatigue, we propose a systematic and six-stage intervention model for addressing it (Figure 2). The rationale for the proposed model takes into account the current status of research and knowledge on aspects of Corrections Fatigue. It also takes into account a current disparity in research support pertaining to the ability to (1)
accurately assess and identify components of Corrections Fatigue on the one hand and (2) eliminate, reduce, or prevent Corrections Fatigue on the other.

The ability to accurately assess and identify components and manifestations of Corrections Fatigue exists through a variety of available assessment tools. Less clear is how to reduce, eliminate, and/or prevent Corrections Fatigue due to a current lack of outcomes research. Eliminating Corrections Fatigue is also complicated by the sheer difficulty and lengthy timeframes required to confirm improvement effort effectiveness, since the components of Corrections Fatigue seem to be fairly ingrained into the fabric of organizational culture.

Given the situation described, a model and strategy that capitalizes on existing capabilities in the realm of assessment on the front end, coupled with a cyclical process of systematic trial-and-error on the back end, reflects a prudent and highly defensible strategy. Each stage of the proposed six-stage model is explained below.

**Inform**

Administrators and decision-makers first need to increase their knowledge, depth of understanding, and ability to recognize Corrections Fatigue, its nature, and its components. Corrections staff of all disciplines will be in better position to reduce the grip of
Corrections Fatigue if they are made aware of its nature and are able to recognize its signs, manifestations, and sources.

Assess

Once a better understanding of the nature of Corrections Fatigue is obtained, the next logical step is to quantitatively assess the extent to which manifestations of Corrections Fatigue pervade within an organizational culture. A variety of assessment tools and services are available with potential utility in gauging the relative presence and extent of Corrections Fatigue and for identifying specific areas to target through improvement efforts.

Examples of potentially useful assessment tools include:

- Corrections Fatigue Status Assessment-v5
- Depression, Anxiety, and Stress Scale-21
- Depression Danger Scale
- Life Events Checklist for DSM-5
- Maslach Burnout Inventory
- Post-traumatic Checklist-Civilian
- PTSD Checklist for DSM-5
- Violence, Injury & Death Exposure Scale

Evaluate

Once psychometrically sound assessment results are in hand, decision-makers can compare identified problem areas to the content and focus of existing programs, structures, and resources that are dedicated to maintaining staff health and functioning. The relative fit of programming to problems should be evaluated. Upon doing so, it may become clear, for instance, that a particular resource is lacking or that an existing resource requires modification to better address one or more problem areas identified through assessment.
Plan

Once problem areas and their extent are identified, planning becomes the next logical step and stage. If the Evaluation stage makes clear that one or more new resources require implementation, or that an existing resource could be modified to make it more effective, then decision-makers are ready to make preparations for implementation of new or modified programs, structures, or resources. Planning might include the pursuit of funding, setting a realistic timeline for planned implementation or roll-out, and/or deciding if policy modifications will be required to support any changes to be made.

Implement

The implementation phase involves the actual roll out of trainings, interventions, changes, or other improvement effort activities. While improvement effort options could vary widely in their form and extent, examples targeting Corrections Fatigue in specific ways that follow from quantitative assessment results, should be prioritized.

Examples of some currently available resources that appear notably relevant and with potential utility for addressing manifestations of Corrections Fatigue include:

- *Psychological First Aid*, an evidence-informed approach for individuals and groups in the aftermath of traumatic exposure
- The training *From Corrections Fatigue to Fulfillment*, offered by Desert Waters Correctional Outreach
- Resilience-promoting trainings
- Trainings on the topic of Emotional/Social Intelligence
- Trainings on the effects of traumatic stress exposure for Probation and Parole Officers, offered by KSL Research, Training & Consultation, LLC

More generic resource categories include: Employee Assistance Programs, which may offer mental health support services for staff members and/or their families; peer support groups that
provide assistance following exposure to critical incidents or during other times of need experienced by staff; Chaplain services for religious/spiritual support; Field Training Officers, who may offer mentoring or on-the-job training to new employees; and self-help resources such as books or handouts on resilience, nutrition, relaxation techniques, exercise, emotional self-regulation, skillful conflict resolution, skillful communication, or other relevant content.

**Re-Assess**

The final stage involves re-assessing manifestations of Corrections Fatigue quantitatively, and comparing current organization-level assessment scores to previously established baseline scores or to national baseline scores. Re-assessment in this way provides the critical function of accurately monitoring progress and obtaining data-driven guidance in regard to the need for adjustments or modifications to implemented improvement effort strategies.

Because of the persistent/ingrained nature of Corrections Fatigue, and its grounding in a complex web of interacting, and sometimes self-reinforcing aspects, its reduction should not be expected to happen quickly. A practice of repeating systematic assessments every six to 12 months would seem appropriate, and when considering how occupational stressors and manifestations of Corrections Fatigue, arguably, represent ongoing threats. Thus, the second three stages in the six-stage model, if implemented, can be seen as an ongoing and data-driven cycle designed to support or optimize the health and functioning of the workforce.

**Summary**

Corrections Fatigue can be understood as the cumulative toll upon the health and functioning of the corrections workforce that follows from traumatic, organizational, and operational
stressors. Corrections Fatigue manifests in dysfunctional and self-perpetuating ways, such as in the embrace and acting out of dysfunctional workplace ideology, in negative changes in personality characteristics, and in declined health and functioning.

Because the major stressors and interacting manifestations of Corrections Fatigue represent a continual and relentless threat, so too must strategies to deter, reduce, or prevent Corrections Fatigue be ongoing. Systematic and quantitative assessment of improvement effort outcomes over time is necessary to inform the need for adjustments or changes and to gauge progress in a data-driven and evidence-based manner.

Apart from what systematic assessments reveal, it also stands to reason that an increasingly healthy and functional workforce can be expected to reveal itself to staff through examples of: friendly and supportive forms of interaction among staff members; a valuing and acting out of respect and respectful communications between coworkers, and between higher and lower ranking staff, and between staff and justice-involved individuals; reliable, consistent, and principled decision-making and follow through; and disciplined and exemplary role modeling by leadership.

While not specifically addressed in this paper, reducing manifestations of Corrections Fatigue can also be understood as a prerequisite clearing of the path to not only health and functioning but also to the achievement of higher level states of being and growth, to include professional growth and the development of work role pride, meaning, and fulfillment.

References


