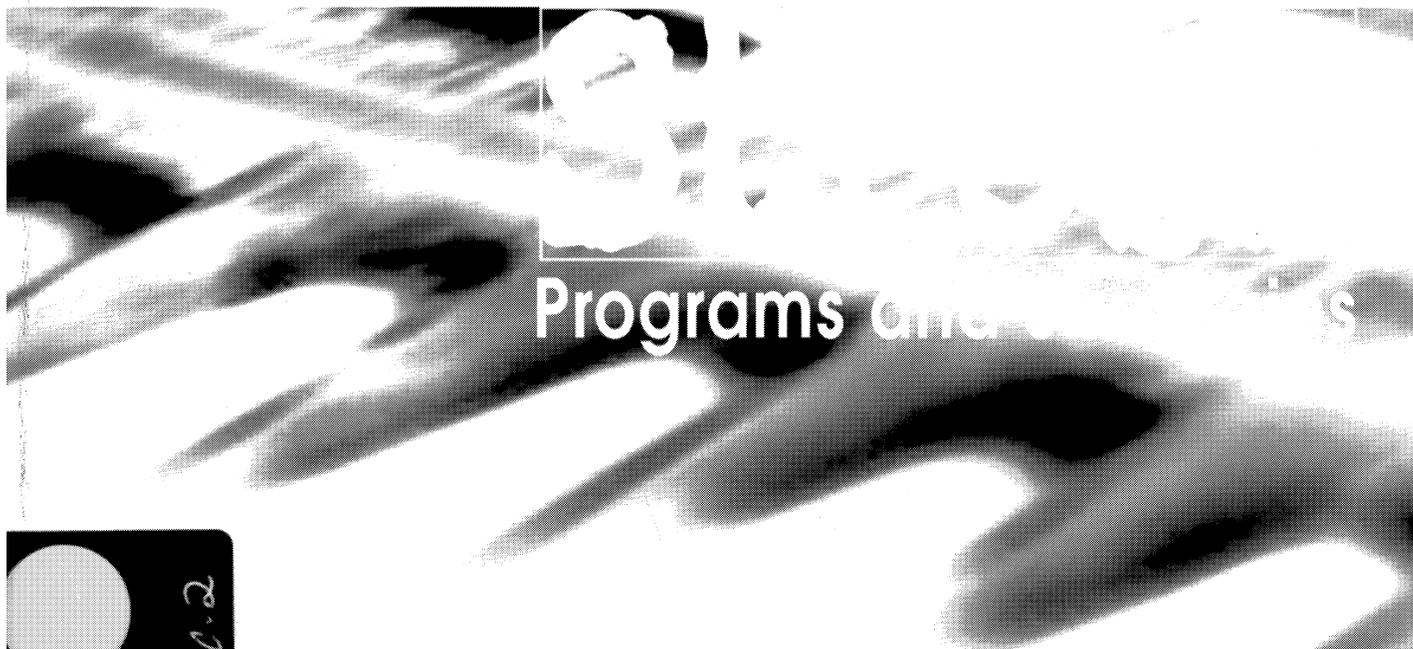




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Addressing Correctional Officer



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Addressing Correctional Officer Stress: Programs and Strategies

by
Peter Finn

December 2000
NCJ 183474

Issues and Practices in Criminal Justice is a publication series of the National Institute of Justice. Each report presents the program options and management issues in a topic area, based on a review of research and evaluation findings, operational experience, and expert opinion on the subject. The intent is to provide information to make informed choices in planning, implementing, and improving programs and practices in criminal justice.



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Foreword

Stress among correctional officers is widespread, according to research studies and anecdotal evidence. The threat of inmate violence against officers, actual violence committed by inmates, inmate demands and manipulation, and problems with coworkers are conditions that officers have reported in recent years can cause stress.

These factors, combined with understaffing, extensive overtime, rotating shift work, low pay, poor public image, and other sources of stress, can impair officers' health, cause them to burn out or retire prematurely, and impair their family life.

This publication is designed to help correctional administrators develop an effective program to prevent and treat officer stress. Seven case studies illustrate diverse options for structuring a stress program. The following are among the seven programs' distinguishing features that administrators can consider adopting:

- Run the program in house or contract with external agencies.
- Offer professional counseling, peer support, or both.
- Address chronic stress, stress following a critical incident, or both.
- Conduct academy or inservice training.
- Serve family members.

In addition to these operational aspects, the report discusses options for staffing a stress program; explores methods of gaining officers' trust in the program; lists sources of help to implement or improve a stress program; and addresses monitoring, evaluation, and funding issues.

The various program models presented in this report provide options from which correctional administrators can select program features and tailor them to a particular set of needs and resources. The potential payoff attributed to stress programs—such as reduced stress-related costs, improved officer performance, and increased institutional safety—more than justifies careful consideration of this report's observations and conclusions.

Julie E. Samuels
Acting Director
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Acknowledgments

I wish to thank the many individuals who patiently answered my questions and sent me materials about their stress programs, in particular, the following program directors and coordinators: Bruce W. Baker, Lawrence H. Bergmann, Nancy K. Bohl, John J. Carr, James Hollencamp, Elaine Smith, and Edward J. Stelle.

Several other program staff members, correctional officers, and other employees were especially helpful in providing information for this report, including David Bielby, Cathy Carlson, Acey Edgemon, Edward Ferguson, Richard Gould, Robert S. Hamel, Barry S. Levin, Michael McGarthy, Mark Messier, Theodore Nevills, A.T. Wall, and Robert White. Special mention should be made of Daniel James Nagle, a corrections officer in Beeville, Texas, who was killed by an inmate several months after being interviewed for this report.

Roger J. Johnson provided information about his training activities for corrections personnel across the country; Richard Gist shared his insights into critical incident debriefings.

The following advisory panel members provided helpful guidance to the project during a 1-day meeting in Washington, D.C., and through comments on the draft report: Nancy K. Bohl, Gary F. Cornelius, Jess Maghan, John Maloy, and Michael Marete. Among other criteria, panel members were selected for their diverse experiences and views regarding stress programming for correctional officers. As a result, readers should not infer that the panel members necessarily support all the programming recommendations offered in this publication.

Vincent Talucci, program monitor for the project at the National Institute of Justice, gave constant support and guidance to the project. Theodore Hammett, vice president at Abt Associates Inc., offered a number of valuable suggestions for improving the report. Mary-Ellen Perry and Joan Gilbert carefully produced the numerous report drafts.

Peter Finn
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Executive Summary

Addressing Correctional Officer Stress: Programs and Strategies is intended to help correctional administrators develop an effective program for preventing and treating correctional officer stress. The publication describes a variety of approaches for relieving officer stress that correctional administrators can implement.

Why Establish—or Expand—a Stress Program for Correctional Officers?

A stress program can—

(1) *Save* correctional administrators *money* by reducing overtime costs incurred when officers take sick time or quit because of job-related stress.

A former Peer Stress Program officer, now retired but still volunteering, drove me to a jail and dragged out the scheduling sheet for all five of our jails and all 700 employees and showed me that only 2 were on stress leave—the first time the number had been that low in years.

—Dan Noelle, Multnomah County (Oregon) sheriff

After inmates killed a civilian employee, 17 officers took disability leave. Seven never returned. Of the five who went for individual counseling, four returned. [The one who did not was the officer who found the body.] The officers who returned told me that the counseling helped them to come back.

—Cathy Carlson, Safety Office return-to-work coordinator, California Youth Authority

(2) *Improve officer performance* by enhancing staff morale.

Morale is important—working in prisons is a high-stress job. By its nature, the work is often unpleasant; we often operate short of staff; and it is very hot during the summer. People are more productive,

I believe, if their morale is high. We may also have less sick time and less attrition if employees feel loyalty to the department. It is important that the staff know that the department cares about their well-being.

—Gary Johnson, director, Texas Department of Criminal Justice Institutional Division

(3) *Increase institutional safety* by reducing distractions caused by stress.

If an officer is stressed out to the point of agitation, he or she can't manage inmates as well as if he or she were more clear minded. Officers can cause a riot situation or get injured if they come [to work] with a cluttered mind.

—Don Hunter, Collier County (Florida) sheriff

(4) *Improve relations with the union* by working together on a program that can mutually benefit both parties.

We hope to see better labor-management relations as a result of the FOCUS program [the Connecticut Department of Correction stress program]. There should be spinoffs from FOCUS that will improve relations [with the union] in other areas.

—Maria Houser, deputy commissioner for administration, Connecticut Department of Correction

(5) *Show concern for employees* by demonstrating that the department cares about its staff as human beings, not just as employees.

With the stress program, things that were never addressed before get attended to: If there is an accident or an assault and an officer is hospitalized, Dick [Gould, a staff member] is there. He makes sure they are cared for and talks to the officer's wife. A paramilitary organization can get impersonal, so the program gives credence to the fact that the DOC cares about its employees.

—Dennis Cullen, deputy director for labor relations, Massachusetts Department of Correction

How Severe Is Correctional Officer Stress?

A review of the literature and interviews with more than 50 knowledgeable individuals make clear that job-related stress is widespread—and possibly increasing—among correctional officers. Many supervisors (lieutenants and captains) also experience considerable job-related stress.

There are many sources of stress for correctional officers, including—

- Organization-related conditions, such as understaffing, overtime, shift work, and unreasonable supervisor demands.
- Work-related sources of stress, including the threat of inmate violence, actual inmate violence, inmate demands and manipulation, and problems with coworkers.
- A poor public image and low pay.

A few facts illustrate the stressful nature of correctional work:

- Many officers do not answer their home telephones because it might be the institution calling for overtime. Some officers get a second, unlisted telephone number that they keep secret from the department.
- Between 1990 and 1995, the number of attacks on correctional officers in State and Federal prisons jumped by nearly one-third, from 10,731 to 14,165, at a time when the number of correctional officers increased by only 14 percent.
- Except for police officers, the number of workplace nonfatal violent incidents is higher per 1,000 employees for correctional officers than for any other profession, including taxi drivers, convenience store staff, mental health workers, and teachers. From 1992 to 1996, there were nearly 218 incidents for every 1,000 correctional officers, for a total of 58,300 incidents.
- One officer said, “The public hasn’t a clue as to what correctional officers do. Someone asked me just the other day if I beat inmates all the time.” Another officer reported she routinely tells other people, “I work for the State,” refusing to specify her precise job. The

end result is some officers come to feel isolated and estranged from friends and family.

Seven Programs Have Taken Steps to Address Officer Stress

This report presents seven case studies of well-established and replicable stress programs, which vary significantly in their operations and services. The wide variation creates a challenge for correctional administrators, who must decide which models to adopt. However, while the choices may be daunting, the options give commissioners and sheriffs the freedom to tailor program components to their particular department’s needs and resources. In addition, coordinators of the seven programs are available to offer telephone consultation regarding the suitability of their structure and services to other departments (see the end of each case study in chapter 3). A number of correctional officer stress experts are also available to provide assistance in setting up or improving a stress program (see “Individuals With Experience in Stress Programming for Correctional Officers” in chapter 7).

Keys to Program Success

Developing and maintaining a successful stress program is not easy. Correctional and sheriff’s departments need to address several considerations to make their programs effective.

- Appoint talented and dedicated staff who can stand the stress of helping others who experience stress.
- Get the wholehearted participation of top administrators, union officers, line officers, and family members.
- Maintain confidentiality; provide an array of services, not just debriefings, after critical incidents; train supervisors to spot and refer officers who may be experiencing stress; and change the correctional organization itself in ways that will reduce officer stress.
- Monitor program activities and evaluate their effectiveness in reducing stress and saving the department money.

What Does a Stress Program Cost?

Program costs vary tremendously depending primarily on how much programs rely on volunteers and existing staff and the services the programs provide. The Post-Incident Stress Debriefing Program developed by the New York State Department of Correctional Services costs almost nothing because it relies entirely on officers who have received training as debriefers at their own expense or through department training funded by Federal Government grants. Other programs described in this report have annual budgets ranging from \$27,500 to \$87,289.

Departments should recoup their expenses manyfold by reducing excessive sick time and officer turnover. A few departments have data suggesting their programs may have saved them money.

We compared the number of stress-related retirements officers and deputies took after critical incidents for a 10-year period before the contract and found they cost the county \$20 million in unfunded liability to the county retirement system [see the full explanation in chapter 7]. Six years after the [stress] program was in place, there were none. We estimated that the program saved the department \$13 million by avoiding the unfunded liability fee increases. —Deputy Chief James Nunn, San Bernardino Sheriff's Department

Chapter 1: Why Establish—or Expand—a Stress Program for Correctional Officers?

KEY POINTS

- *Addressing Correctional Officer Stress* is intended to help correctional administrators develop an effective program for preventing and treating correctional officer stress.
- This publication describes a variety of approaches to relieving officer stress that correctional administrators can implement.
- A stress program can—
 - Save correctional administrators *money* by reducing the need to pay overtime to cover for officers who take sick time or quit because of job-related stress.
 - *Improve officer performance* by enhancing staff morale.
 - *Increase institutional safety* by reducing officer distractions due to stress.
- A stress program can also improve relations with the union, help officers get back to work sooner after critical incidents, and show the department cares about its employees.
- The report presents seven case studies of well-established and replicable stress programs.

This chapter identifies the audiences for whom *Addressing Correctional Officer Stress* has been written and explains the publication's purposes and content. The chapter then reviews the reasons many correctional administrators recommend setting up or expanding a stress program for correctional officers.

Audiences, Purposes, and Content of *Addressing Correctional Officer Stress*

This report has been written primarily for—

- State department of corrections commissioners.
- Facility superintendents or wardens.
- Sheriffs and jail administrators.
- Correctional department human resources and training directors.

Correctional officer union officials, employee assistance program (EAP) administrators, correctional chaplains, and mental health professionals may also find this publication useful.¹

Addressing Correctional Officer Stress is intended primarily to—

- Motivate correctional administrators to develop an effective program for preventing and treating correctional officer stress.
- Suggest the options correctional administrators have for structuring the program.

Why a Stress Program Can Benefit Correctional Administrators

West Virginia Department of Corrections Commissioner Bill Davis locked down the Mount Olive Correctional Center last month for

SOURCES OF INFORMATION FOR THIS PUBLICATION

The information in this report comes from five principal sources:

- (1) Literature on correctional officer stress (see the references at the end of chapter 2, “The Extent and Sources of Correctional Officer Stress”).
- (2) In-person interviews with stress program staff, correctional administrators, and program clients in Rhode Island and Texas.
- (3) Telephone interviews with similar individuals in programs in California, Massachusetts, New York, Oregon, and South Carolina.
- (4) Telephone interviews with selected program staff in a Connecticut and a Florida program.
- (5) Members of an advisory board assembled to guide and review this publication (see page ii).

The jurisdictions studied were selected based on the suggestions of the project’s advisory board, an Internet search of large jails conducted by the National Institute of Corrections, and conversations with correctional administrators and experts. The programs represent different organizational structures, offer a variety of approaches to providing services, are geographically dispersed, and serve county jails and large and small State departments of corrections.

8 days to alleviate stress on overworked staff. . . .
“We’ve had a significant turnover rate there since we opened the prison in 1995. The prison administration was requiring COs to be frozen over [work two shifts in a row]. . . . [The closing] was in the interest of their sanity. . . .” The commissioner also made clear to officers that overtime at the facility was strictly voluntary.²

Research studies and firsthand accounts from correctional officers have made clear that employment as a correctional officer can be stressful—sometimes extremely stressful. Chapter 2 documents the many sources of stress³ for correctional officers (such as the mandatory overtime that existed in West Virginia, highlighted above), and the effects of stress can be serious and widespread. As discussed below and summarized in the box “Benefits a Stress Program Can Bring to Correctional Administrators,” a program that helps prevent and relieve

stress can have valuable benefits for correctional administrators.

“A former Peer Stress Program officer . . . dragged out the scheduling sheet for all 5 of our jails and all 700 employees and showed me that only 2 were stress leave—the first time the number has been that low in years.”

— Sheriff Dan Noelle, Multnomah County Sheriff’s Department

Financial savings

Stress programs can save administrators money by reducing staff sick time. Researchers have long reported that correctional officers take excessive sick leave as a means of coping with stress on the job.⁴ One lieutenant estimated that 20 percent of his officers who call in sick are burned out. A captain judged that 90 percent of officers abuse their sick time in this manner. Administrators have to pay overtime to other officers to cover for personnel who take sick time. As long ago as 1975, California spent \$1.86 million in

overtime pay to cover posts for officers on sick leave.⁵ A stress program can reduce sick time.

A former Peer Stress Program officer, now retired but still volunteering, drove me to a jail and

BENEFITS A STRESS PROGRAM CAN BRING TO CORRECTIONAL ADMINISTRATORS

Financial savings through—

- Reduced need to pay overtime to cover for officers on sick leave or who quit because of work-related stress.
- Reductions in the time officers need off after a critical incident before returning to work.
- Reduced fees paid into the retirement fund because of fewer stress-related early retirements.

Improved officer performance through higher staff morale.

Increased institutional safety through—

- Fewer inexperienced officers on duty.
- Fewer officer distractions with work-related and personal stresses.

Improved relations with the union by working together on a mutually beneficial program.

A demonstrated concern for employees through providing officers with the means to cope with an undeniably tough working environment.

dragged out the scheduling sheet for all five of our jails and all 700 employees and showed me that only 2 were on stress leave—the first time the number had been that low in years.

—Sheriff Dan Noelle, Multnomah County (Oregon) Sheriff's Department

Many administrators also report that officers offered stress services after a critical incident or personal crisis come back to work more quickly than if they had not been helped, further reducing the need for overtime to cover their absences.

Staff turnover is also high in many facilities. The average turnover in prisons nationwide in 1986 was nearly 12 percent, but in some States—such as Arizona, South Carolina, and South Dakota—the rate was more than 25 percent.⁶ Stress has been implicated as an important cause of disability retirements.⁷ The cost of stress-related disabilities among officers exceeded \$40 million in California in 1985 alone.⁸ Administrators lose money recruiting, hiring, training, and orienting new staff to replace personnel who quit because of stress-related disability. A stress program can reduce turnover.

After inmates killed a civilian employee, 17 officers took disability leave. Seven never returned. Of the five who went for individual counseling, four returned. [The one who did not was the officer who found the body.] The officers who returned told me that the counseling helped them to come back.

—Cathy Carlson, Safety Office return-to-work coordinator, California Youth Authority

Of the eight officers I have treated, two would not have returned to work without counseling. One, who had witnessed an inmate suicide, began counseling by saying he could never go back because he felt guilty that he had let down his fellow officers, but he did return and was fine.

—Stevens Huggins, a psychologist who treats Multnomah County Sheriff's Department officers

Turnover can also increase retirement benefit costs to the department. In the early 1980s, Deputy Chief James Nunn of the San Bernardino Sheriff's Department was in charge of internal affairs and a member of the county retirement board. After critical incidents, he would see

officers' names on the retirement list, each one costing \$750,000 to \$1 million in unfunded liability to the retirement fund. Then the department contracted with The Counseling Team to provide stress services.

Later, we compared the number of stress-related retirements officers and deputies took after critical incidents for a 10-year period before the contract and found they cost the county \$20 million. Six years after the program was in place, there were none. We estimated that the program saved the department \$13 million by avoiding increases in its unfunded liability to the county retirement system. [See the full explanation in chapter 7.]
—James Nunn, deputy chief, San Bernardino Sheriff's Department

Improved officer work performance

According to Multnomah County (Oregon) Sheriff Dan Noelle, "It's not just a money issue; the [stress] program can improve how the organization functions: It makes us a can-do organization." A stress program can improve performance by improving morale.

Morale is important—working in prisons is a high-stress job. By its nature, the work is often unpleasant; we often operate short of staff; and it is very hot during the summer. People are more productive, I believe, if their morale is high. We may also have less sick time and less attrition if employees feel loyalty to the department. It is important that the staff know that the department cares about their well being.
—Gary Johnson, director, Texas Department of Criminal Justice Institutional Division

By reducing turnover [due to stress-related disability], a stress program can save administrators money. "We estimated that the program saved the [San Bernardino Sheriff's] department \$13 million by avoiding increases in its unfunded liability to the county retirement system."

—Deputy Chief James Nunn of the San Bernardino Sheriff's Department

Doing the job carefully in records is very important: You don't want to let murderers out of jail by mistake or not let people out when they're supposed to leave—we get tort claims and pay fines for every day we hold someone too long. After we entered a warrant on an innocent person, deputies ended up arresting the wrong person. We ended up paying the woman \$15,000. So you need good staff morale so employees will do the record keeping accurately. Peers [trained to help their fellow employees] help with keeping morale high.

—Kathleen Walliker, records administrator, Multnomah County Sheriff's Department

Increased institutional safety

As a result of excessive sick time and turnover, especially among experienced officers, remaining staff must work with a larger number of rookies who are least equipped to handle the work in a manner that avoids conflict with inmates and ensures safe operation of the facility. "One day last month, my entire second shift consisted of rookies," an anxious 3-year "veteran" officer reported. As a result, by reducing sick time and turnover, a stress program can reduce the risk of an institutional flareup.

A stress program can also increase safety by reducing officers' distractions with personal and work-related stresses.

If an officer is stressed out to the point of agitation, he or she can't manage inmates as well as if he or she were more clear minded. Officers can cause a riot situation or get injured if they come [to work] with a cluttered mind.

—Don Hunter, Collier County (Florida) sheriff

"People are more productive, I believe, if their morale is high. We may also have less sick time and less attrition if employees feel loyalty to the department."

—Gary Johnson, Director, Texas Department of Criminal Justice, Institutional Division

Unaddressed stress can result in impaired work performance, such as sloppy searches and careless counts. By making officers less patient, they are less able to resolve confrontations peaceably, so they use more force to get inmates to obey.
—correctional lieutenant

Improved relations with the union

Correctional officer unions generally support stress programs. Indeed, according to Jess Maghan, editor of *The Keeper's Voice*, the journal of the International Association of Correctional Officers, "The stipulation for the provision of employee stress programs . . . is becoming a permanent feature of collective bargaining contracts between correctional officer unions and correctional agencies." As a result, by instituting a program in collaboration with the union, administrators have a rare chance to improve labor-management relations.

We hope to see better labor-management relations as a result of the FOCUS program [the Connecticut DOC's new stress program]. There should be spin-offs from FOCUS that will improve relations [with the union] in other areas.

—Maria Houser, deputy commissioner for administration, Connecticut Department of Correction

Demonstrated concern for employees

By providing stress services, administrators have an opportunity to demonstrate that they care about their staff as human beings, not just as employees.

With the Stress Program, things that were never addressed before get attended to: If there is an accident or an assault and an officer is hospitalized, Dick [Gould, a staff member] is there. He makes sure they are cared for and talks to the officer's wife. A paramilitary organization can get impersonal, so the program gives credence to the fact that the DOC cares about its employees.
—Dennis Cullen, deputy director for labor relations, Massachusetts Department of Correction

If we expect staff to work in these conditions and we recognize the effects of the working environment on them, we owe it to them to provide

STRESS PROGRAMS ALSO BENEFIT MIDLEVEL SUPERVISORS

Lieutenants and captains benefit from stress programs because they can refer officers to the program whom they would otherwise have to discipline and write up. According to Richard Gould, a member of the Massachusetts DOC's Stress Unit, "We are a net for captains. 'Dick, you handle it, if you can, before I deal with it' is how they view us." A lieutenant in the Rhode Island Department of Corrections reported that some supervisors are delighted to tell officers, "Go talk to [Mark] Messier [the peer unit coordinator], or you're going to have a discipline problem." If the referred officers come back as productive workers, the supervisors have been spared a time-consuming nuisance that can be stressful for them.

resources to cope with the stresses of this setting.
—A.T. Wall, director, Rhode Island Department of Corrections

Stress Programs Have Drawbacks—But They Are Relatively Minor

Multnomah County Sheriff Dan Noelle—a strong supporter of his department's stress program—says, "I am strapped for money, and the program does cost money [more than \$87,000 a year]. It also takes officers away from the job to be trained and retrained." Although a strong believer in her department's program, too, Kathleen Walliker, records administrator for the Multnomah County Jail, says:

It takes time to address these [stress-related] issues, so it takes peer supporters away from their assigned duties. We end up having to cover for two people (the troubled employee and the peer). It's a nuisance for me to let two people off for an

hour to talk. And then coworkers can be jealous about it. Coworkers may have to cover the troubled person's or peer's phone while they talk.

A debriefer with the New York State Department of Correctional Services Post-Incident Stress Debriefing Program felt some officers used the debriefing sessions after a major riot to get out of work. Bruce Baker, assistant commissioner, confirms that the only drawback to the program is "officers who are only slightly involved and unaffected see it as a day at the beach." However, Noelle, Walliker, and Baker all report the benefits of their stress programs unquestionably outweigh their drawbacks.

Notes

1. The National Institute of Justice has published a companion report for law enforcement officers, *Developing a Law Enforcement Stress Program for Officers and Their Families*, available free of charge from the National Criminal Justice Reference Service at (800) 851-3240 and www.ncjrs.org. Finn, Peter, and Julie Esselman Tomz, *Developing a Law Enforcement Program for Officers and Their Families*, Washington, D.C.: U.S. Department of Justice, National Institute of Justice, 1996, NCJ 163175.
2. "Commissioner Locks Down Prison to Improve Staff Morale," *The Corrections Professional* 3 (20) (1998): 2.
3. Because stress can be defined in a number of different ways, it has become a catchall "buzzword" for all kinds and levels of emotional and mental problems. Although some researchers have pointed out that stress can have a positive influence, the term generally carries a negative connotation. This report uses the common dictionary definitions of stress: (a) a mentally or emotionally disruptive and upsetting condition occurring in response to adverse external influences and (b) a stimulus or circumstance causing such a condition.
4. For example, Cornelius, G.F., *Stressed Out: Strategies for Living and Working with Stress in Corrections*, Laurel, Maryland: American Correctional Association, 1994; Ratner, A.M., "Administrative Sources of Occupational Stress in a Correctional Setting," Sacramento, California: AIDE Behavioral Sciences, 1985; O'Brien, B., and Gustafson, [sic] "Stress in Corrections Officers: Iowa Department of Corrections Study," Washington, D.C.: U.S. Department of Justice, National Institute of Corrections, 1985, NIC 004028; Brodsky, C.M., "Work Stress in Correctional Institutions," *Journal of Prison & Jail Health* 2 (2) (1982): 74-102; Cheek, F.E., "Reducing Staff and Inmate Stress," *Corrections Today* 44 (5) (1982): 72-76, 78; and Dahl, J.J., and S.S. Steinberg, "Management of Stress in Corrections: Participant's Handbook," Washington, D.C.: University Research Corporation, 1979.
5. Cheek, F.E., and M.D. Miller, "Prisoners of Life: A Study of Occupational Stress among State Corrections Officers," Washington, D.C.: American Federation of State, County and Municipal Employees, 1981.
6. American Correctional Association, unpublished data provided by the Research Department, October 8, 1997.
7. Slate, R.N., "Stress Levels and Thoughts of Quitting of Correctional Personnel: Do Perceptions of Participatory Management Make a Difference?" Paper presented at the American Society of Criminology, New Orleans, November 1992.
8. Ratner, A.M., "Administrative Sources of Occupational Stress in a Correctional Setting," Sacramento, California: AIDE Behavioral Sciences, 1985.

Chapter 2: The Extent and Sources of Correctional Officer Stress

KEY POINTS

- Job-related stress is widespread and, in many cases, severe—and possibly increasing—among correctional officers. Many supervisors (lieutenants and captains) also experience considerable job-related stress, as do superintendents and wardens.
- An inherent source of stress for correctional officers is supervising individuals who do not want to be confined and, as a result, try to manipulate staff to make their conditions of confinement as tolerable as possible.
- The prison or jail organization, including understaffing, overtime, rotating shift work, and supervisor demands, creates stress for many officers.
- Work-related sources of stress for officers include the threat of inmate violence, actual inmate violence, inmate demands and manipulation, and problems with coworkers.
- External stresses for some correctional officers include a poor public image and low pay.
- Stress can cause impaired health, burnout, early retirement, and impaired family life.

This chapter examines the evidence regarding the extent of correctional officer stress and summarizes research about the causes of this stress and the effects it has on officers.

How Bad Is Correctional Officer Stress?

The available empirical and anecdotal evidence convincingly documents that stress among correctional officers is widespread and, in many cases, severe.¹ Furthermore, several circumstances may have created increased stress for correctional officers in recent years:

- Inmate crowding has increased in many correctional facilities. Furthermore, the ratio of inmates to custody or security employees rose from 4.2 to 4.6 between 1990 and 1995.²
- Inmate assaults against correctional staff in State and Federal prisons have increased. Between 1990 and 1995, the number of attacks jumped by nearly one-third, from 10,731 to 14,165.³ During this same period, the number of correctional officers increased by only 14 percent,⁴ resulting in an overall increased risk of assault for each individual officer at the end of this period.
- Assaults in jails appear to have declined between 1990 and 1996 from 3.2 per 100 prisoners in 1990 to 2.4 in 1996, with a peak of 3.6 in 1992. However, in absolute

HOW THIS LITERATURE REVIEW WAS CONDUCTED

The information in this chapter is based on a review of selected literature identified in part through database searches conducted by the National Criminal Justice Reference Service (NCJRS) and the National Institute of Corrections (NIC). This chapter is also based on in-person and telephone interviews with 23 line correctional officers, 12 midlevel administrators (lieutenants and captains), 4 superintendents and deputy superintendents, 14 clinicians who counsel officers, and several other knowledgeable individuals.

terms, there was an average of 42 assaults by prisoners on jail staff per jail system in 1996, including an average of 206 assaults in each of the Nation's 17 largest jail systems, representing on average of 4 assaults per week.⁵

- Many offenders serving increasingly longer sentences do not fear punishment or respect the authority of correctional officers.⁶ According to one superintendent, "Inmates today aren't afraid to assault staff; they don't care if they get put in segregation."
- There are more gangs—and more dangerous gangs—in prison.⁷

What Causes Stress for Correctional Officers?

Many years ago a researcher observed, "any organization or social structure which consists of one group of people kept inside who do not want to be there and the other group who are there to make sure they stay in will be an organization under stress."⁸ More recently, A.T. Wall, director of the Rhode Island Department of Corrections, confirmed this observation based on firsthand experience:

"You have a captive population that doesn't want to be here and wants to be as comfortable as possible for as long as they have to be incarcerated. And correctional officers stand in the way of those desires, so there's built-in tension and manipulation."

Beyond this global source of stress, it is possible to distinguish among stresses caused by the correctional organization, those created by correctional work itself, and those brought on by factors external to the facility.

Organizational sources of stress

Many individuals interviewed for this report suggested that organization-related conditions create stress for

The available empirical and anecdotal evidence convincingly documents that stress among correctional officers is widespread and, in many cases, severe.

many officers, in particular, understaffing, overtime, shift work, and supervisor demands.

Understaffing

In many prisons and jails, there are too few officers available to staff authorized posts as a result of unattractive salaries, high turnover, and excessive use of sick time and disability leave.

Understaffing can create several different kinds of stress:

- Lack of time to complete required tasks, such as head counts, searches, and paperwork, at all or in a conscientious manner.
- Occasionally working at breakneck speed to complete the required work, as well as addressing unplanned inmate needs and requests.
- Apprehension when there are too few officers available as backup should inmate violence occur.
- Inability to get time off for special occasions or family crises.

Overtime

Staff shortages create the need for extensive overtime among remaining staff. According to an intake administrator for a State department of corrections, "At least 100

officers have told me they don't answer their telephones because it might be the institution calling for overtime." Some officers get a second, unlisted telephone number, which they keep secret from the department. One facility allows officers to refuse overtime assignments only once a year; a second refusal results in a warning; a third, in a 1-day suspension; and a fourth, in possible termination. Some officers welcome

overtime because of the extra money they can earn. As one officer said, "Overtime is great—I worked three OTs a week for 18 months." However, she quickly added, "But I got burned out, and my supervisors didn't even acknowledge my contribution."

The "organization" is a major source of stress for many officers, notably understaffing, overtime, shift work, and supervisor demands.

DO MIDLEVEL CORRECTIONAL MANAGERS EXPERIENCE STRESS?

Midlevel managers (lieutenants and captains) interviewed for this publication report they experience several types of stress:

- Dealing with subordinates (in particular line officers acting without consultation), poor line officer productivity, the need to discipline or terminate officers, and contending with understaffing—including having to ask stressed-out line officers to work overtime.
- Attempting to follow unclear policies and procedures and frequent modifications to policies and procedures as top-level supervisors change their minds or are replaced.
- Completing all the required documentation and paperwork—yet still being on the line to supervise and be seen by line officers.

A lieutenant with a State department of corrections reported that—

The stress is worst for middle management: You decide on staff deployment and everyone looks to you for guidance. You make the critical decisions; as watch commander, you run the prison. On two shifts out of three, I'm the highest ranking person in the facility because the higher-ups leave at 4:00 p.m. It's a tremendous responsibility. The decisions are tough. Also, someone is Monday morning quarterbacking you, your decisions are scrutinized, and they're life-and-death decisions.

Top correctional administrators also experience stress. Wardens, deputy wardens, and jail administrators may be saddled with a "24/7" commitment—carrying a beeper around the clock. They have to deal with typically adversarial labor relations with the officers' union, staff hostility or mistrust, pressures from central administration, political scapegoating, and media exposure. Furthermore, top-level administrators are typically reluctant to share their feelings of uncertainty, helplessness, or inadequacy with anyone for fear of appearing weak, incompetent, or indecisive.

Rotating shift work

Correctional officers consistently report that rotating shifts create havoc with family life and reduce officers' ability to perform their work conscientiously because of fatigue and irritability. "You can tell when shift work is getting to officers," a lieutenant said. "Their work gets sloppy, their searches become careless, their units are filthy, and they stop following the rules."

Supervisor demands

Several correctional officers reported that supervisors are a source of stress because, as one officer said, "They are always on you to do the job right, but you can't do it right [because of staff shortages]. There is supposed to be one officer per tier here, but now they've collapsed

"You can tell when shift work is getting to officers," a lieutenant said. "Their work gets sloppy, their searches become careless, their units are filthy, and they stop following the rules."

the posts, and there is one officer for every two tiers. So there just isn't enough time for me to get inmates awakened, showered, and fed; keep my log books up to date; do my checks; and make sure the catwalks have all been cleaned and disinfected."

Other stress sources

Research studies have consistently highlighted two other sources of organizational stress that correctional officers and administrators themselves do not usually identify as stressful: role conflict⁹ and role ambiguity.¹⁰

- *Role conflict.* Researchers define role conflict as the struggle officers engage in to reconcile custodial responsibilities (maintaining security, such as preventing

escapes and inmate fights) with their treatment functions (helping inmates rehabilitate themselves).

- *Role ambiguity.* Role ambiguity is the uncertainty created by supervisors who expect officers to “go by the book” and follow all rules to the letter when supervisors and line officers alike know that officers must be flexible and use judgment in their interactions with inmates. One study illustrates this finding:

While officers work in a paramilitary organization marked by explicit lines of authority and a host of formal regulations, their task of managing inmates demands flexibility, the judicious application of discretionary justice, and the ability to secure inmate compliance through informal exchanges which deviate from written rules. Ambiguous and conflicting expectations are a likely result and a potential source of stress.¹¹

There is a consensus in the literature and among correctional officers that the threat of inmate violence, actual inmate violence, inmate demands and attempts at manipulation, and problems with coworkers are all stressful.

health workers, and teachers. From 1992 to 1996, there were nearly 218 incidents per 1,000 correctional officers, for a total of 58,300 incidents.¹³

Inmate demands and manipulation

Many officers find the constant demands and attempts at manipulation by some inmates to be stressful—for example, requests for cigarettes or extra food with an implicit quid pro quo of promising not to create trouble or to keep other inmates in line. Furthermore, “When officers are manipulated [successfully] by inmates . . . , they may experience extreme stress.”¹⁴

Problems with coworkers

One survey found that 22 percent of staff viewed “other staff” as creating more stress than any other single factor except for dealing with hostile, demanding inmates.¹⁵ The following conditions can precipitate stress among coworkers:

- (1) Burned out coworkers repeatedly venting their frustrations to their colleagues;
- (2) officers competing for limited, choice assignments;
- (3) apprehension that coworkers will refuse to back them up in a confrontation with inmates, are too inexperienced (e.g., due to high turnover) to know how to help out, or do not have the physical or emotional strength to be effective; and
- (4) inappropriate officer behavior toward inmates—bringing in contraband, getting too friendly, using unnecessary force, and taking questionable disciplinary action.

Sexist attitudes by colleagues (and supervisors) and sexual harassment create stress for many women officers. Many male officers question whether female officers have the physical strength and determination to help in a confrontation with inmates. However, sexist attitudes and behavior may have declined as more women have become correctional officers and, as a result, as male officers have gained the opportunity to see firsthand that women can be as effective as men in dealing with inmate violence.

Work-related sources of stress

The research literature and correctional officers agree that many officers find four conditions of correctional work stressful:

Threat of inmate violence

Correctional officers interviewed for this report identified the threat of inmate violence against staff as a source of stress more frequently than any other single feature of their occupation.

Inmate violence

Actual violence, including assaults, hostage taking, riots, inmates killing each other, and inmate suicides, can be a major source of stress for many officers not only during the episodes but afterwards: “Staff anxiety is intensified [after critical incidents] by the aftermath of recriminations, scapegoating, blaming, and job insecurity.”¹²

Except for police officers, the number of workplace non-fatal violent incidents is higher per 1,000 employees for correctional officers than for any other profession, including taxi drivers, convenience store staff, mental

WHICH OFFICERS ARE MOST LIKELY TO EXPERIENCE STRESS?

According to one researcher, "At this point, there seems to be no clear consensus as to which factors can be consistently correlated with stress in corrections."^a Some studies have found that officers working higher security level institutions or units experience more stress than officers working medium or minimum security areas,^b while other studies have found no differences in stress levels among security levels.^c Staffing an administrative segregation unit can, paradoxically, feel less stressful than working on other units (because inmates are locked down almost the entire day) or more stressful (because every inmate is a potential time bomb). The evidence regarding stress levels associated with working in direct supervision facilities is similarly inconsistent.

The apparent stresses of a specific post or assignment may be offset by its perceived benefits. For example, tower duty may be boring but valued because it involves little or no inmate contact.^d All 13 officers posted to the North Infirmary Command on Rikers Island and Goldwater Hospital on Roosevelt Island in New York City for inmates with AIDS saw the assignment as a good one because it was not a prison setting, there were no captains or deputy wardens supervising them on the wards, the inmates were usually more manageable than the general population, the pay was good, and no one else wanted the position—the officers did not have to play politics to get or keep it.^e

Still other conditions can influence stress levels. Officers who work in rural settings may be related to or personally know other staff—or inmates—which can lead to concerns about privacy. Inmates in jails may

present different problems for correctional officers than prison inmates because so many jail detainees have just come into the facility right off the streets. In addition, rapid turnover in jails creates its own set of stresses: While correctional officers must not only establish their authority and make clear the ground rules to a constantly changing population, they are at the same time frequently deprived of the satisfaction of seeing inmates improve their lot through the educational, religious, vocational, and other programs prisons can offer their longer term inmates.

Studies that have attempted to determine whether officers' stress levels are associated with length of time on the job, educational level, race, and gender have produced inconsistent findings.

Notes

- a. Huckabee, R.G., "Stress in Corrections: An Overview of the Issues," *Journal of Criminal Justice*, 20 (5) (1992): 479-486.
- b. See, for example, Van Voorhis, P., F.T. Cullen, B.G. Link, and N.T. Wolfer, "Impact of Race and Gender on Corrections Officers: Orientation to the Integrated Environment," *Journal of Research in Crime and Delinquency* 28 (4) (1991): 472-500; and Cullen, F.T., B.G. Link, N.T. Wolfe, and J. Frank, "The Social Dimension of Correctional Officer Stress," *Justice Quarterly* 2 (4) (1985): 505-533.
- c. Lasky, G.L., and B.C. Gordon, "Occupational Stressors among Federal Correctional Officers Working in Different Security Levels," *Criminal Justice and Behavior* 13 (3) (1986): 317-327.
- d. Grossi, E.L., T.J. Keil, and G.F. Vito, "Surviving 'the Joint': Mitigating Factors of Correctional Officer Stress," *Journal of Crime and Justice* 19 (2) (1996): 103-120.
- e. Kamerman, J., "Corrections Officers and Acquired Immune Deficiency Syndrome: Balancing Professional Distance and Personal Involvement," *Death Studies* 15 (1991): 375-384.

Stress from outside the system

Two significant sources of stress for some officers originate outside the prison or jail.

One source is poor public image. According to one researcher, "A negative image of corrections is regularly portrayed in the media . . . [with officers depicted] as stupid, animalistic, and senseless abusers of socially

wronged individuals."¹⁶ As one officer said, "The public hasn't a clue as to what correctional officers do. Someone asked me just the other day if I beat inmates all the time." One officer said she routinely tells other people, "I work for the State," refusing to specify her precise job. The end result is that some officers come to feel isolated and estranged from friends and family.¹⁷

The second outside source of stress is poor pay. Many officers cite low pay as a source of stress. The beginning salary in one State is \$12,000. In another State, officers start out earning \$18,000; the most they can earn after 18 months is \$26,400. Starting pay in one privately operated facility is \$14,000 to \$16,000 a year.

Stress Can Create Several Significant Problems for Officers

Excessive stress can result in at least four serious problems for officers:

- Stress may result in physical illnesses, ranging from heart disease to eating disorders. It may also precipitate substance abuse among susceptible individuals.¹⁸
- Stress can lead to burnout among officers.¹⁹
- Stress has been implicated in excessive disability retirements.²⁰ Even when physical ailments are the reason for the disability, the illnesses may have been brought on by stress.
- Correctional officers experiencing excessive stress may damage their family relationships by displacing their frustration onto spouses and children, ordering family members around just as they issue commands to inmates (one officer locked his son out of the boy's room and searched it), and becoming distant by withholding information about their work that they feel family members will not understand. Shift work and overtime can create stress by preventing officers from attending important family functions.

As discussed above, the effects of stress on correctional officers can degrade their ability to perform their responsibilities in the prison or jail in ways that compromise institutional safety, cost money, and create stress for other staff. The remainder of this report addresses the approaches seven stress programs have implemented to prevent and treat officer stress with the goals of enhancing the officers' lives and improving the operations of the correctional facilities in which they work.

Notes

1. Huckabee, R.G., "Stress in Corrections: An Overview of the Issues," *Journal of Criminal Justice* 20 (5) (1992): 479-486.
2. Stephan, J.J., *Census of State and Federal Correctional Facilities, 1995*, Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, 1997, NCJ 166582.
3. Ibid.
4. Data provided by the American Correctional Association, June 29, 1999.
5. Camp, C.G., and G.M. Camp, *The Corrections Yearbook, 1997*, South Salem, New York: Criminal Justice Institute, 1997.
6. Martinez, A.R., "Corrections Officer: The 'Other' Prisoner," *The Keeper's Voice* 18 (1) (1997): 8-11.
7. Ibid. A few correctional officers suggested that correctional work has not become more stressful. Rather, they said, officers themselves have changed. According to these officers, in the past many officers came to the job from the military and therefore had a discipline and toughness that enabled them to adapt better to the work requirements (see also Kauffman, K., *Prison Officers and Their World*, Cambridge, Massachusetts: Harvard University Press, 1988). In addition, life in general may be more stressful. If so, officers may be less able to cope with correctional work because they come to work already stressed out. In this connection, some providers observe that relationship problems are what drive many officers to seek professional counseling, not correctional work per se.
8. Brodsky, C.M., "Work Stress in Correctional Institutions," *Journal of Prison & Jail Health* 2 (2) (1982): 74-102.
9. For example, Grossi, E.L., T.J. Keil, and G.F. Vito, "Surviving 'the Joint': Mitigating Factors of Correctional Officer Stress," *Journal of Crime and Justice* 19 (2) (1996): 103-120; Woodruff, L., "Occupational Stress for Correctional Personnel: Part One," *American Jails* 7 (4)

Excessive stress can result in at least four serious problems for officers: impaired health, burnout, premature early retirement, and impaired family life.

- (1993a): 15–20; Philliber, S., “Thy Brother’s Keeper: A Review of the Literature on Correctional Officers,” *Justice Quarterly* 4 (1) (1987): 9–35; Lindquist, C.A., and J.T. Whitehead, “Burnout, Job Stress and Job Satisfaction among Southern Correctional Officers—Perceptions and Causal Factors,” *Journal of Offender Counseling, Services and Rehabilitation* 10 (4) (1986): 5–26; and Crouch, B.M., “Prison Guards on the Line,” in *Dilemmas of Punishment*, ed. K.C. Hass and G.P. Alpert, Prospect Heights, Illinois: Waveland Press, 1986.
10. Woodruff, L., “Occupational Stress for Correctional Personnel”; Gerstein, L.H., C.G. Topp, and C. Correll, “Role of the Environment and Person When Predicting Burnout Among Correctional Personnel,” *Criminal Justice and Behavior* 14 (3) (1987): 352–369; and Cullen, F.T., B.G. Link, N.T. Wolfe, and J. Frank, “The Social Dimension of Correctional Officer Stress,” *Justice Quarterly* 2 (4) (1985): 505–533.
11. Cullen et al., 1985.
12. Freeman, R.M., “Remembering the Camp Hill Riot,” *Corrections Today* 59 (1) (1997): 56, 58–59.
13. Warchol, Greg, *Workplace Violence, 1992–96*, Bureau of Justice Statistics Special Report, Washington, D.C.: U.S. Department of Justice, 1998, NCJ 168634.
14. Cornelius, G.F., “Keys to Effective Inmate Management: Avoiding Manipulation,” in *The Effective Correctional Officer*, Laurel, Maryland: American Correctional Association, 1992: 75–82. See also Kauffman, *Prison Officers and Their World*, pp. 56–57.
15. Marston, J.L., “Stress and Stressors: Inmate and Staff Perceptions,” *American Jails* 7 (4) (1993): 21–30.
16. Van Fleet, F., “Correctional Officers and Their Families: Dealing with Stress,” in *The Effective Correctional Officer*, Laurel, Maryland: American Correctional Association, 1992: 37–44.
17. Maghan, J., and L. McLeish-Blackwell, “Black Women in Correctional Employment,” in *Change, Challenges, and Choices: Women’s Role in Modern Corrections*, ed. J.B. Morton, Laurel, Maryland: American Correctional Association, 1991: 82–99; Kauffman, *Prison Officers and Their World*; and Harris, G.A., “Stress in Corrections,” Topeka, Kansas: Washburn University, 1980.
18. Woodruff, “Occupational Stress for Correctional Personnel”; and Cheek, F.E., and M.D. Miller, “New Look at Officers’ Role Ambiguity,” in *Correctional Officers—Power, Pressure and Responsibility*, ed. J.N. Tucker, Laurel, Maryland: American Correctional Association, 1983.
19. Burnout has been defined as a process that produces three conditions: (1) emotional exhaustion or feelings that the person is overextended and exhausted by the job; (2) depersonalization that causes impersonal and cynical interactions with clients; and (3) lack of feelings of personal accomplishment. Maslach, C., and S. Jackson, “The Measurement of Experienced Burnout,” *Journal of Occupational Behavior* 2 (1981): 99–113. While there is no time limit or period in which workers burn out, five stages of burnout have been identified that many workers pass through in the process of becoming burned out: honeymoon (e.g., the officer loves his or her job and works hard); fuel shortage (e.g., the officer no longer enjoys going to work every day and gets tired more and more easily); chronic symptoms (e.g., the officer begins to experience chronic headaches and tunes out his or her family by watching a lot of television); crisis (the officer complains constantly to coworkers about the job; physical and mental problems get worse; and the officer is fed up with inmates, supervisors, and the paperwork); and “hitting the wall” (the officer quits the job, walks out on the family, or continues to work but thinks obsessively about how bad it is). Veninga, R., and J. Spradley, *The Work Stress Connection: How to Cope with Job Burnout*, New York: Ballantine Books, 1981; Cornelius, G., *Stressed Out: Strategies for Living and Working with Stress in Corrections*, Laurel, Maryland: American Correctional Association, 1994.
20. Slate, R.N., “Stress Levels of Correctional Personnel: Is There a Difference Between the Sexes?” Paper presented at the Academy of Criminal Justice Sciences annual meeting in Kansas City, Missouri, March 20, 1993.

Chapter 3: Program Case Studies

KEY POINTS

- Seven different stress programs illustrate the diverse options for structuring a program.
- The programs' most distinguishing features are whether they—
 - Are in-house programs or externally contracted agencies.
 - Offer professional counseling, peer support, or both.
 - Address chronic stress, stress following a critical incident, or both.
 - Conduct academy or inservice training.
 - Serve family members.
- Programs fall into one of three basic structures: in-house programs, independent contracted services, and hybrid arrangements.
- The wide variation in program operations creates a challenge for correctional administrators to decide which models to adopt. However, while the choices may be daunting, the options give commissioners and sheriffs the freedom to tailor program components to their particular department's needs and resources.
- Coordinators of the seven programs are available to offer telephone consultation regarding the suitability of their structure and services to other departments.

This chapter provides brief case studies of seven programs that prevent or treat correctional officer stress. The case studies concentrate primarily on the programs' operational procedures. Details about other aspects of the programs are presented in the remaining chapters of the report:

- Chapter 4 discusses options for staffing a stress program.
- Securing constructive participation from correctional administrators, union leaders, correctional officers, and family members is addressed in chapter 5.
- Chapter 6 explores methods of gaining officers' trust in the program, providing services after critical incidents, and addressing organizational sources of stress.
- Monitoring, evaluation, and funding issues are covered in chapter 7.
- Are independent organizations (with which the department of corrections or sheriff's department contracts), in-house programs, or a combination of the two (see "Selecting a Suitable Organizational Structure Is Important").
- Offer professional counseling, peer support, or both.
- Address chronic stress, stress resulting from critical incidents, or both.
- Conduct academy or inservice training.
- Offer services to family members.

Exhibit 3–1 identifies the principal features of each of the seven programs. As shown, the programs' most distinguishing features are whether they—

Some of the seven programs have significant similarities, while others are very different. Rhode Island's Family Service Society and San Bernardino's The Counseling Team are both private agencies that provide a full range of stress-related services—individual counseling, critical incident debriefing, peer training and supervision, and inservice prevention training—under contract to correctional agencies. However:

EXHIBIT 3-I. SELECTED FEATURES OF SEVEN STRESS PROGRAMS

Program	Feature				Annual Budget	Clients			
	Agencies Served (# COs)	Organizational Relationship	Staffing	Services		Civilians	Family Members	Road Deputies	Police Officers
Rhode Island: Family Service Society	DOC (includes jails) (991)	hybrid	<ul style="list-style-type: none"> professionals peers 	<ul style="list-style-type: none"> professional counseling critical incident debriefing inservice training academy training peer supporter training 	\$27,500	yes	yes	yes	yes
California: The Counseling Team	jails, DOC (450 to 3,300)	contracted	<ul style="list-style-type: none"> professionals peers 	<ul style="list-style-type: none"> professional counseling critical incident debriefing inservice training academy training peer supporter training 	varies by department served	yes	yes	yes	yes
Massachusetts: Stress Unit	DOC (4,031)	in-house	<ul style="list-style-type: none"> peers 	<ul style="list-style-type: none"> peer support referrals to clinicians 	\$33,390	yes	yes	NA	yes ^a
Multnomah County (Portland, Oregon): Peer Support Program	jail (515)	in-house	<ul style="list-style-type: none"> peers 	<ul style="list-style-type: none"> peer support critical incident debriefing referrals to clinicians 	\$87,280	yes	yes	yes	NA
Texas: Post Trauma Staff Support Program	DOC (24,500) ^b	in-house	<ul style="list-style-type: none"> peers chaplain 	<ul style="list-style-type: none"> peer support critical incident debriefing referrals to EAP 	\$36,966	yes	yes	NA	NA
New York State: Post-Incident Stress Debriefing	DOC (22,315)	in-house	<ul style="list-style-type: none"> peers 	<ul style="list-style-type: none"> critical incident debriefing referrals to EAP 	None	yes	yes	NA	NA
South Carolina: Post-Trauma Resources (PTR)	DOCs (4,850)	contracted	<ul style="list-style-type: none"> professionals 	<ul style="list-style-type: none"> critical incident debriefing professional counseling staff training program planning 	Generally reimbursed an hourly rate by workers' compensation; if denied, DOC pays	yes	no	yes	yes

a. This program serves a few police officers every year.

b. Excludes State jails.

SELECTING A SUITABLE ORGANIZATIONAL STRUCTURE IS IMPORTANT

There are three possible organizational relationships between a stress program and the correctional agency it serves:

- (1) An *in-house* program is a separate unit within—and operated by—the correctional agency (Massachusetts' Stress Unit, Multnomah County's Peer Support Program, New York State's Post-Incident Stress Debriefing Program, Texas' Post Trauma Staff Support Program).
- (2) *External* arrangements involve regular use of a private service provider (South Carolina's Post Trauma Resources, California's Counseling Team).
- (3) *Hybrid* programs combine elements of both in-house and external structures (Rhode Island's Stress Unit and Family Service Society).

- Family Service Society serves only one correctional agency—the Rhode Island Department of Corrections—while The Counseling Team serves three sheriff's departments in addition to the California Department of Corrections.
- The Rhode Island Department of Corrections not only contracts with Family Service Society for professional services but also has an in-house peer support unit supervised by a correctional officer. As a result, the Rhode Island program represents a hybrid approach to structuring stress services.

The Massachusetts Department of Correction Stress Unit and the Multnomah County (Oregon) Peer Support Program both have a cadre of trained in-house peers who support officers experiencing chronic stress or stress after a critical incident. Both programs refer officers to professional counselors outside the agency. However:

- Peer supporters in Multnomah County's program offer critical incident debriefings, while the Massachusetts program was only just beginning in 1999 to train its peers for this purpose.
- While the Multnomah County program's trained peers are regular correctional officers who are released from duty to provide support to other officers as needed, the Massachusetts program's five peer supporters are officers who have agreed to be reassigned to spend full-time providing peer support services.

There is considerable variation in the structure, operations, and services of the seven programs.

The Texas Institutional Division's Post Trauma Staff Support Program and the New York State Department of Correctional Services Post-Incident Stress Debriefing (PISD) Program are both in-house programs that assemble and send trained officers, along with a clinician, to go on site to provide debriefings after critical incidents. While available to address individual officers' problems with chronic stress, the two programs are used primarily after critical incidents. After debriefings, both programs refer officers in need of professional counseling to their respective employee assistance programs (EAP).

South Carolina's Post Trauma Resources (PTR), a private, for-profit organization, plays two roles. On the one hand, PTR provides critical incident debriefing and individual counsel-

ing services to South Carolina Department of Corrections employees. On the other hand, PTR helps departments of corrections in other States to plan and set up their own stress programs, and it trains their staff to provide critical incident debriefings and peer support.

As exhibit 3-1 illustrates—and the case studies that follow explain in detail—there is considerable variation in the structure, operations, and services of the seven programs. Differences among the programs beyond the major contrasts identified earlier include the following:

- Having one office versus a main office and satellite offices.

ADVANTAGES AND DRAWBACKS OF THREE PROGRAM ORGANIZATIONAL OPTIONS

Advantages

Drawbacks

In-house Programs

- | | |
|--|---|
| <ul style="list-style-type: none"> • Staff more likely to be viewed by officers as part of the corrections community • Staff more likely to be knowledgeable about corrections stresses, the stresses peculiar to the department, and the department structure | <ul style="list-style-type: none"> • Officers more likely to view program as a tool of management and, therefore, worry about confidentiality • Risk of conflict in duties to client and agency |
|--|---|

External Programs

- | | |
|--|---|
| <ul style="list-style-type: none"> • Officers less likely to view staff with suspicion, offering greater chance to build trust • Greater autonomy in program operations • Less chance for stress program staff to feel torn between loyalty to the department and loyalty to the client | <ul style="list-style-type: none"> • Greater chance of program being isolated and officers viewing staff as inaccessible, not part of the corrections community, and unfamiliar with corrections work and stress |
|--|---|

Hybrid Programs

Hybrid programs may have the advantages of both the internal and external options, with few, if any, of their shortcomings. It is possible, however, that some of the drawbacks to the internal or external model may remain. Also, unless they are well coordinated, hybrid programs risk creating confusion among officers about how the program operates as well as creating conflict between internal and external program staff.

- Providing compensatory time for officers to attend training as peer supporters.
- Referring troubled officers to an EAP or to independent psychologists.
- Paying for a limited number of free visits to independent psychologists.
- Making debriefings for affected staff mandatory or optional.
- Training unlicensed correctional staff to lead or co-lead debriefings.
- Bringing in peer supporters from other facilities to conduct debriefings after critical incidents as opposed to using peers from the facility in which the incident occurred.

- Conducting outreach to family members.

The variation in how the programs operate and the services they provide may seem discouraging: The lack of uniformity makes it difficult for corrections administrators to easily select commonly implemented program features around which they can structure their own programs. Instead, DOC managers and sheriffs must take the time to pick and choose among a range of alternatives for designing their own stress programs, and they need to assess the benefits and limitations of each possible component. On the positive side, however, this programmatic diversity means correctional administrators do not have to feel they are obligated to follow slavishly any one model or

This programmatic diversity means correctional administrators have the freedom to tailor the various components of their program to the particular needs of their facilities and employees and to the department's structure, history, size, and resources.

approach; they have the freedom to tailor the various components of their program to the particular needs of their facilities and employees and to the characteristics of their department's structure, history, size, and resources.

While the choices may be daunting, there is expert help available for making them. Key participants in all seven programs have agreed to field telephone calls to share information about what works best for them and why. The names and telephone numbers of these individuals follow each case study below. In addition, chapter 7, "Evaluation, Funding, and Technical Assistance," identifies still other individuals with national experience in stress programming who are available for consultation.

The Rhode Island Department of Corrections Stress Unit

BRIEF PROGRAM OVERVIEW

The Rhode Island Department of Corrections Stress Unit has two components:

- (1) Family Service Society, a nonprofit outpatient counseling agency, provides professional evaluation and counseling, along with referral to other sources of professional help (including hospitalization), to the department's 1,547 employees and their family members. Family Service Society also provides inservice training, critical incident response services, and training of peer supporters.
- (2) A group of 28 trained peer supporters, directed by a volunteer correctional officer, provides everyday and critical incident support for employees and refers them to the Family Service Society for professional help.

The Department of Corrections provides the Family Service Society \$16,500 a year for services. Family Service Society conducted two critical incident debriefings, counseled 17 employees, and referred 12 employees for hospitalization in 1998. Peer supporters made about 360 contacts with coworkers.

The Rhode Island Department of Corrections has seven facilities located within a 1-square mile complex. Because the State has no jails, the DOC also houses pretrial inmates. The department's 991 correctional officers and 556 civilian employees oversee 3,250 inmates.

Family Service Society is a private, nonprofit, outpatient counseling agency with three full-time clinicians that began in 1869 as an orphanage. With annual revenues of between \$230,000 and \$250,000, the agency is supported by the United Way and other charities, third party reimbursements, direct client fees, and endowment interest.

The DOC first contracted with Family Service Society in 1985 for \$6,000 to provide professional counseling services for employees under stress. In 1993, the DOC expanded the contract to provide for developing an in-house peer support unit. The 3-year contract ending June 30, 2000, was for \$16,500 annually. Corrections and law enforcement agencies represent about one-third of the agency's caseload.

Program overview

The Stress Unit's structure and staffing reflect its hybrid nature as a partly in-house and partly externally contracted program.

Structure

The Rhode Island DOC's Stress Unit consists of two components:

- (1) Family Service Society staff provide DOC employees and their families professional evaluation and counseling services along with referrals to other sources of professional help, including hospitalization. The agency also provides inservice and academy training and critical incident response services. The agency trains new peer supporters.
- (2) A group of 28 peer supporters trained by Family Service Society—but supervised by a correctional officer—provides support for employees and refers them to Family Service Society if they need professional help. In addition to helping officers experiencing chronic stress, peer supporters respond to officers after a critical incident.

Family Service Society's specific obligations under its contract with the department are to be available for 300 hours a year to—

- Provide three orientation sessions on stress prevention and program services for department supervisors, union stewards, and line personnel.
- Provide a free initial visit and an evaluation session to any employee at no cost.
- Continue counseling on a sliding fee scale with third-party reimbursement.
- Be on call 24 hours a day to respond to emergencies involving personnel both on and off grounds.
- Train, develop, and support at least six DOC employees a year to provide peer support services.

Staffing

The program has two supervisors. The Stress Unit's clinical supervisor is John Carr, Family Service Society's executive director. Carr ensures that the services called for in the DOC contract are provided. With a master's degree in social work, Carr is tactical coordinator of the emergency response unit for the Coventry, Rhode Island, Police Department, where he served previously as an active duty reserve police officer for 14 years. Carr provides the bulk of Family Service Society's counseling and evaluation and, together with the DOC's program coordinator, he coordinates stress services after critical incidents.

The Stress Unit's coordinator is appointed by the DOC from among current peer supporters who apply for the position. At this writing, the coordinator is Mark Messier, a correctional officer. Messier spends about half-time managing the Stress Unit's day-to-day operations within the DOC. Messier also recruits new peers and supervises current peers. Supervisors and peer supporters tell Messier about officers needing help. Officers in crisis may also call him directly. If the situation is not an emergency, Messier calls the appropriate on duty peer supporter to address the problem. If the problem appears to be serious, he handles it himself after getting permission to leave his post.

Program services

There were 28 trained peers in 1999. Eighteen were uniformed, and 10 were civilians. Altogether, peers average 30 contacts a month on grounds or about 1 contact per peer per month. If a peer supporter talks with another employee three times and the person is still "stuck" on the same issue, the peer calls Carr, who will evaluate and treat the person, refer the person to one of the two other Family Service Society clinicians or to an outside psychologist, or arrange for hospitalization. In 1998, Carr and his staff treated 17 employees and referred 12 for hospitalization. The agency uses a consulting psychiatrist to provide medical support and psychiatric evaluations for officers whom Family Service Society treats on an outpatient basis.

Normally, after the first contact with any Family Services clinician, either the person's insurance pays or the person pays out-of-pocket. (Counseling is available on a sliding fee scale.) On occasion, Family Service Society will provide long-term counseling services pro bono.

Family Service Society refers employees in need of hospitalization to Butler Hospital, a private psychiatric facility affiliated with Brown University in Providence. Since the officers' managed care provider typically provides reimbursement for only 2 or 3 days of residential treatment (and many officers are terrified at the thought of being locked up), Family Service Society usually refers officers to the facility's "day hospitalization" program, which patients attend weekdays from 9:00 a.m. to 3:00 p.m., generally for 1 week.

The Stress Unit provided two critical incident debriefings in 1998, one after a civilian employee committed suicide and one after a tactical officer died of a brain tumor. Debriefings are mandatory if there is a suicide or facility disorder. Supervisors and Messier can make debriefings after lesser incidents (such as assaults) mandatory, as well. Messier asks the warden to instruct supervisors to give the employees time off to go to the debriefings.

Carr and Messier work in tandem when there is a critical incident.

In 1997, five officers were injured during a riot at the maximum security facility. The head of the

hostage negotiating team paged Carr, who paged Messier. Messier activated the peer supporters. Carr and Messier met together on grounds.

Carr and Messier contacted family members and had them meet near the facility (not at the incident site) to talk one-on-one with a peer supporter. After release, a peer rode with each officer in the ambulance to the hospital and remained with the officer at the hospital.

Carr and his wife, Patricia Carr, the DOC's parole coordinator who is also a peer supporter and social worker, conducted a debriefing for family members 2 weeks later because many husbands and wives were frightened about whether their spouses should return to work. After the session, the Carrs went to the home of one couple who asked for extra help.

None of the five officers resigned.

Collaboration with the DOC's human resources office

When an individual will need extended time away from work while undergoing outpatient counseling or when Butler Hospital's admitting evaluation confirms the need for inpatient care or day hospitalization, Carr or Messier calls Barry Levin, the DOC's human resources coordinator, to determine the officer's medical coverage and to find out if the person has sick leave or vacation time left.

Carr or Messier tells Levin the person's circumstances (for example, whether it is a marital or alcohol problem), whether the person is going to be treated inpatient or outpatient, and how many days off the person will probably need. Levin calls the person's deputy warden and says the person will not be at work for the estimated number of days (without saying why) and that a physician's note will be forthcoming.

When an officer returns to work after discharge from a treatment program or leave of absence, Carr notifies Messier. Either Messier or Carr then asks a peer supporter in the returning officer's facility to keep an eye on the person.

Training

Family Service Society trains new peer supporters, and Carr arranges for clinicians and other experts to provide bimonthly inservice training meetings for the peers at Butler Hospital. Carr and Messier provide inservice training annually to all officers to remind them of the program's services and pass out an updated list of additional resources. Carr also coordinates the bimonthly inservice training for the DOC's crisis negotiation team.

Early in the schedule of each academy class, John and Patricia Carr and Messier give a 1-hour session addressing basic stress; a later session addresses traumatic stress. At family night at the end of the academy, they introduce the peer counselors and discuss the program with the graduates and their families. However, Carr says,

It can be difficult to convince recruits that stress will be an issue [for them]. It goes in one ear and out the other. Also, the academy is training them to be lean, mean, fighting machines just when I'm trying to tell them it's OK to feel afraid and come for help. As a result, I put a peer supporter in front of them who is a member of the cell extraction team or a 199-pound maximum security officer so the recruits can say to themselves, "*That* tactically trained person is a touchy-feely peer?!" So, I sell people, not the program—people who can help.

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The Counseling Team, San Bernardino, California

BRIEF PROGRAM OVERVIEW

The Counseling Team, a private counseling organization consisting of 13 full-time and 3 part-time professional counselors and offering "one-stop shopping," has provided stress services to officers, civilians, and family members in corrections departments (and law enforcement agencies) in Southern California since 1982. Three sheriff's departments contract with The Counseling Team to provide some combination of individual counseling, critical incident debriefings, peer supporter training, and academy and inservice training. The Counseling Team provides critical incident debriefing services to correctional officers in State prisons and juvenile facilities in Southern California. The Counseling Team treats more than 100 correctional officers a year, goes to correctional facilities to conduct debriefings an average of 24 times a year, and conducts 6 to 10 trainings a week.

As of 1999, The Counseling Team, a private for-profit counseling organization in Southern California, served sheriff's departments in Riverside, San Bernardino, and San Diego counties with a total of 1,280 correctional officers. The Counseling Team also serves more than 17 California Department of Corrections and Youth Authority facilities from Los Angeles to the Mexican border. In addition to its home office in San Bernardino, The Counseling Team has established offices in Corona (1993), Victorville (1995), and San Diego (1999).

Contractual arrangements

The Counseling Team's services vary from agency to agency.

- The Counseling Team's contract with the San Bernardino County Sheriff's Department calls for the organization to provide psychological screening of applicants and individual counseling and critical incident debriefings to all department employees (including 530 correctional officers).

- The San Diego County Sheriff's Department contracts with The Counseling Team to serve the department's 3,300 employees, including its 300 uniformed correctional officers in seven jails. The contract calls for individual counseling and critical incident debriefings, overseeing a revamped peer support unit, and providing supervisory and academy training.
- The Counseling Team provides individual counseling to Riverside County Sheriff's Department employees, including its 450 correctional officers, providing same-day response in crisis situations (because the EAP may not see the officer for a week). The Counseling Team has trained all Riverside's peer supporters.
- Through a subcontract with the California Department of Corrections' employee assistance program, The Counseling Team provides critical incident debriefings in DOC facilities in Southern California.

Typically, the contracts have an upper limit on the amount of money the correctional department will reimburse The Counseling Team each year.

Program services

Training

Any contracted department may request an inservice training session for its personnel by calling The Counseling Team's full-time training director. The training director explains the request to Nancy Bohl, The Counseling Team's director; asks about her or other staff availability to conduct the training; and then handles the logistics. One sheriff's department requested a session on line-of-duty burnout; another department asked for a session on staff becoming emotionally involved with inmates. The Counseling Team conducts 6 to 10 trainings a week for all its clients (including police agencies).

The Counseling Team provides a 3-day training course for peer supporters based on the organization's 160-page training manual. Peers from several corrections and law enforcement agencies attend the training together. Graduates are State-certified as peer supporters.

Individual counseling

Officers and other employees use an 800 number to call The Counseling Team to arrange an appointment. Support staff take the calls and make the appointments, recording

AN OFFICER USES THE COUNSELING TEAM FOR A PERSONAL PROBLEM

In 1985, The Counseling Team debriefed a correctional officer after a critical incident. Several years later, when the officer was going through a tough time as a result of a divorce, he called on his own initiative to see Nancy Bohl, The Counseling Team's director, for several sessions. "I could not vent with anyone else because I felt it was a personal matter that I wasn't comfortable sharing. I would just telephone her and ask, 'Hey, Nancy, got the time?' 'Sure, come down tomorrow.' She told me I wasn't all screwed up, that my reactions were normal. The way counseling is available with the team makes it easy. All I have to do is drop a dime, and it's a done deal."

the time on the computer and hard copy and leaving the counselor a voice mail identifying the appointment.

The Counseling Team automatically provides up to three free counseling sessions per employee and, if there is an important clinical necessity and the correctional agency approves, up to three more sessions. Staff clinicians refer officers to other counselors or to that agency's employee assistance program for longer term treatment.

Critical incident debriefing

The Counseling Team goes onsite to corrections institutions and police stations to conduct debriefings an average of 24 times each year. Counseling Team clinicians rotate being on call (and serving as oncall backups) for emergencies. The team has responded to as many as five simultaneous critical incidents.

In a crisis response, the counselor meets first with a ranking officer to learn what happened and which personnel are having a difficult time coping. The clinician then talks with each officer individually for an hour or two in a private room. The counselor usually arranges for the officer to come voluntarily to the agency 3 to 5 days after the incident for a followup session.

Over a 2-week period in 1996, 8 different Counseling Team clinicians participated in a series of 41 mandatory debriefing sessions with more than 400 staff at a California Youth Authority facility after a trustee killed a civilian staff member. The inmates had put the employee in a Dumpster truck that picked up trash in the facility. A search team found her a day later in a landfill under a mound of garbage.

Cathy Carlson is the Safety Office return-to-work coordinator at the Heman G. Stark Youth Correctional Facility where 450 officers manage 1,800 youths in a facility

built to house 1,000 inmates. As Carlson tells the story, "We discovered the body at 11:00 a.m."

My supervisor gave me the choice of calling the authority's inmate psychologists, the mental health care providers I use through workers' compensation, or The Counseling Team. I called the team because I knew how angry the officers felt toward management, and the team had no connection with the Youth Authority. I called Nancy Bohl around 1:00 p.m. and left a message on her answering machine. Bohl called back within 30 or 40 minutes. Nancy had a counselor—Byron Greenberg—at the facility by 2:30.

Greenberg met me in the lobby, and we went to the command post where I told him what had happened and what I needed. I told him how the staff would react—fear, shock, anger. I said I didn't know what to do, and he said, "Don't worry, I'll take care of it." Because the murdered staff member was a friend of mine, Greenberg asked how I was doing, too.

Greenberg went to the control center and tried to assemble the murdered employee's coworkers, but they were so angry at management (because they blamed us for the short staffing that they felt allowed the murder to happen), they would not meet with him. So I had to ask the superintendent to make the debriefing mandatory. [Greenberg then conducted the debriefings.]

By now it was 9:30 p.m., so I told Nancy [Bohl], who had arrived, that the night shift was coming in—how do we tell them [what happened] and keep them at work? Nancy and Byron decided

that, as the new staff came into the facility, I should assemble them in the visitors' hall where the superintendent would tell them what happened and what the facility was doing about it. He would then offer them the choice of going home or talking [with a counselor] before they went on duty. About one-quarter of them—80 staff—talked with Nancy or Byron, some in groups, some one-on-one. I told them they could come back and talk some more any time during their shift.

Byron stayed until 3:00 a.m. A third counselor had already come. The next morning, three other counselors arrived. The debriefings began on August 11 and ended on August 16 after the counselors had debriefed with every member of the staff. After the debriefings ended, a number of officers asked if they could go back to The Counseling Team for individual counseling. I encouraged them to go. Counseling Team staff kept calling me back asking how the officers and I were doing.

Seventeen officers took disability leave. Seven never came back. Of the five who went for individual counseling, four returned. [The one who did not was the officer on the search team who had found the body.] The officers who returned told me that the counseling helped them to come back. A tremendous number of staff, including cooks and janitors, could not say enough good things about The Counseling Team.

According to Carlson, staff hostility toward management has declined over the long term. But getting staff to continue to avoid rushing their work and maintain vigilance about safety has been difficult as time passes. Some staff have gotten lax again and forget or ignore the rules, saying "Oh, he's a trustee, he's safe"—but, Carlson reminds herself, "the murderer was a trustee, too."

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The Massachusetts Department of Correction Stress Unit

BRIEF PROGRAM OVERVIEW

The Massachusetts Department of Correction funds a Stress Unit consisting of five full-time correctional officers trained as peer supporters to help other officers experiencing stress and link them to sources of professional help. Peer Unit members follow up with employees after treatment to assure successful return to productive employment.

Stress Unit members helped 3,600 officers, civilian employees, and family members between 1988 and 1998. During fiscal year 1997-98, the unit assisted 206 individuals. The department does not incur added staff expenses because officers who join the Stress Unit are not replaced in the institutions from which they have been transferred. As a result, the unit's only expenses are the coordinator's \$12,240 half-time salary and a \$90 per week supplement to each unit member for carrying a pager.

The Massachusetts Department of Correction has 4,031 correctional officers and 1,597 civilian employees. The DOC inmate population count on January 1, 1999, was 11,908. The DOC established the Stress Unit in 1983 staffed by two correctional officers, increasing to five by 1999. Stress Unit positions are filled on a volunteer basis by regular correctional officers as a job assignment. With headquarters in a National Guard Armory in Concord, Massachusetts, the program has satellite offices in a recreation building, a DOC administration building, and a State office building. The DOC has permitted the unit to serve any State or local public safety employee in the State as a gesture of collegiality to other agencies.

Procedure

One Stress Unit member is assigned to each of the DOC's five principal facilities. All five members call the Stress Program's central office every morning where James Hollencamp, the program's half-time coordinator, logs in the times and the members' locations. Whenever

A CORRECTIONAL OFFICER SAYS THE STRESS UNIT BENEFITED HIM

A correctional officer became concerned after he had "belted my 12-year-old son."

I called [Richard] Gould, who showed up, and the two of us, with the supervisor's permission, went for a ride for some coffee and spent the entire morning talking. I was afraid the school nurse would see the welt on my son, and my son might tell her his father had hit him. So Gould suggested I talk to the guidance counselor *before* my son went back to school—not wait for the school to contact me. I agreed, and Gould came with me to the meeting. Dick's presence was helpful because the guidance counselor knew I was doing something about the problem. The next day, Gould checked up on me to make sure I was OK.

a unit member goes to another location, he or she calls in and Hollencamp records the information. While the DOC requires unit members to telephone Hollencamp every morning, they call in for each contact as a matter of safety—so he knows where they are. There have been occasions when unit members have been in dangerous situations.

Unit members rotate weekly as the duty officer. The duty officer gets paged by the DOC's central paging station—for example, if someone at the Walpole Correctional Institution wants to talk with a unit member right away,

the employee asks the paging station to call the Stress Unit duty officer who, in turn, puts the appropriate unit member in touch with the caller. If the unit member for the caller's prison is on vacation or otherwise unavailable, the duty officer goes to the facility to talk with the officer.

If an officer calls the program office directly, James Hollencamp asks for the person's first name and telephone number and says when the unit member assigned to his or her facility will call back. If the person needs immediate attention, Hollencamp pages the Stress Unit duty officer.

A DAY IN THE LIFE OF A STRESS UNIT MEMBER

Richard Gould arrives at his office at 7:30 a.m. and calls in his time and location to James Hollencamp. Gould then listens to the five or six calls on his answering machine from officers or supervisors. One officer has called to report he shook his child the previous night, so Gould calls back to set him up with a counselor who, in turn, will arrange for him to take an anger management course. After answering the other calls, Gould drives to a prison to have coffee and talk about fishing with some of the officers in the vehicle trap where delivery trucks bringing supplies into the facility are searched.

Gould's beeper rings with a message to call a captain who wants him to talk with an officer who has been abusing her sick time. While Gould drives to the facility, the captain sends the officer outside the facility so she can meet with him in a donut shop without being observed by her coworkers. Gould tells her that management believes she might have problems because she comes to work late and skips days. The officer explains why she avoids work, and Gould tells her "The DOC is not for everyone; so, if the pressure is too great, you should think hard about quitting."

After talking for an hour, Gould asks the officer for permission to tell her supervisor that the two of them have been in touch and that she is trying to solve the problem.

At 2:35 p.m., Gould returns to his office to call several other officers back to find out how they are progressing with their problems or with their treatment or counseling and to make sure they do not need further assistance. He goes home shortly before 4:00. During the evening, Gould takes calls from two officers who want to discuss problems and a call from a captain concerned about the effects of an officer's divorce on his work.

Referrals

The program has helped a number of officers with drinking problems enter alcoholism treatment facilities. Many of these officers have returned to work, been promoted, and remained sober ever since. Typically, the Stress Unit member talks to the person, accompanies him or her to the facility, follows the officer's progress while in treatment, and then checks up on the person periodically after he or she has been discharged and returned to work. Staff as high as deputy superintendents have used the program for drinking problems—usually to avoid getting terminated. Many officers with drinking problems see Tom McNeeley, a former heavyweight boxer well known in the area, who helps them enter a treatment facility.

Edward Rockett, a correctional officer for 20 years who currently is in charge of transport, inmate orientation, and fiscal ordering for the DOC's Pondville work release unit, has referred six officers with drinking problems to the program over the years. After an officer experiencing delirium tremens passed out at work, Rockett called Richard Gould, who came immediately and took the revived officer to Rockett's office. Gould facilitated the officer's entry into inpatient treatment, and the officer took a 30-day leave of absence. The officer has been back at work—and sober—for 2 years.

Stress Unit staff, Hollencamp says, "do a lot of encouraging, a lot of motivating officers to get help." Unit members have used some inpatient facilities so many times that facility staff accept referrals with no questions asked. The unit member simply tells the facility what kind of substance abuse problem the officer has, his or her age, and the officer's insurance provider.

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The Multnomah County (Oregon) Sheriff's Department Peer Support Program

BRIEF PROGRAM OVERVIEW

The Multnomah County Sheriff's Department chaplaincy coordinator spends part of his time supervising a Peer Support Program for the agency's 515 correctional officers and 450 civilians (as well as almost 100 road deputies). The chaplain arranges training and retraining for the members of three peer support teams:

- A drug abuse team consisting of officers in recovery that provides support for officers experiencing substance abuse problems.
- A trauma team that is called immediately into action to support officers involved in a critical incident.
- A debriefing team that takes over after the trauma team has provided initial support.

Members of all three peer support teams give the chaplain's telephone number to officers in need of professional assistance. The officers may then call him anonymously. The chaplain refers them to one of five psychologists who have experience treating public safety personnel.

The sheriff makes \$50,000 available each year to pay the psychologists for their counseling services, along with \$10,000 for training the peers. The chaplaincy coordinator spends less than half of his time managing the program. Peer supporters referred 67 officers to the chaplain in 1998, 43 of whom he sent to private psychologists. The debriefing team conducted 10 debriefings involving 42 employees.

The Multnomah County Sheriff's Department's Peer Stress Program, with 65 peer supporters, serves 515 correctional officers and about 450 civilian employees in 5 jail facilities housing 2,000 inmates. The program also serves the department's 100 road deputies.

History

The sheriff's department was seriously demoralized in the early 1980s after the city annexed part of the county and the department lost half its road deputies to the Portland Police Bureau. In addition, there were two jail breaks, and a deputy was killed. College-educated applicants hired to staff two newly constructed jails reported they could not stand the pressure of the work. In 1984 the sheriff hired a chaplain, Edward Stelle, for 1 year to address the morale problem. As of 1999, Stelle was still with the department.

Stelle asked several supervisors to name employees to whom other employees would turn on their own to dis-

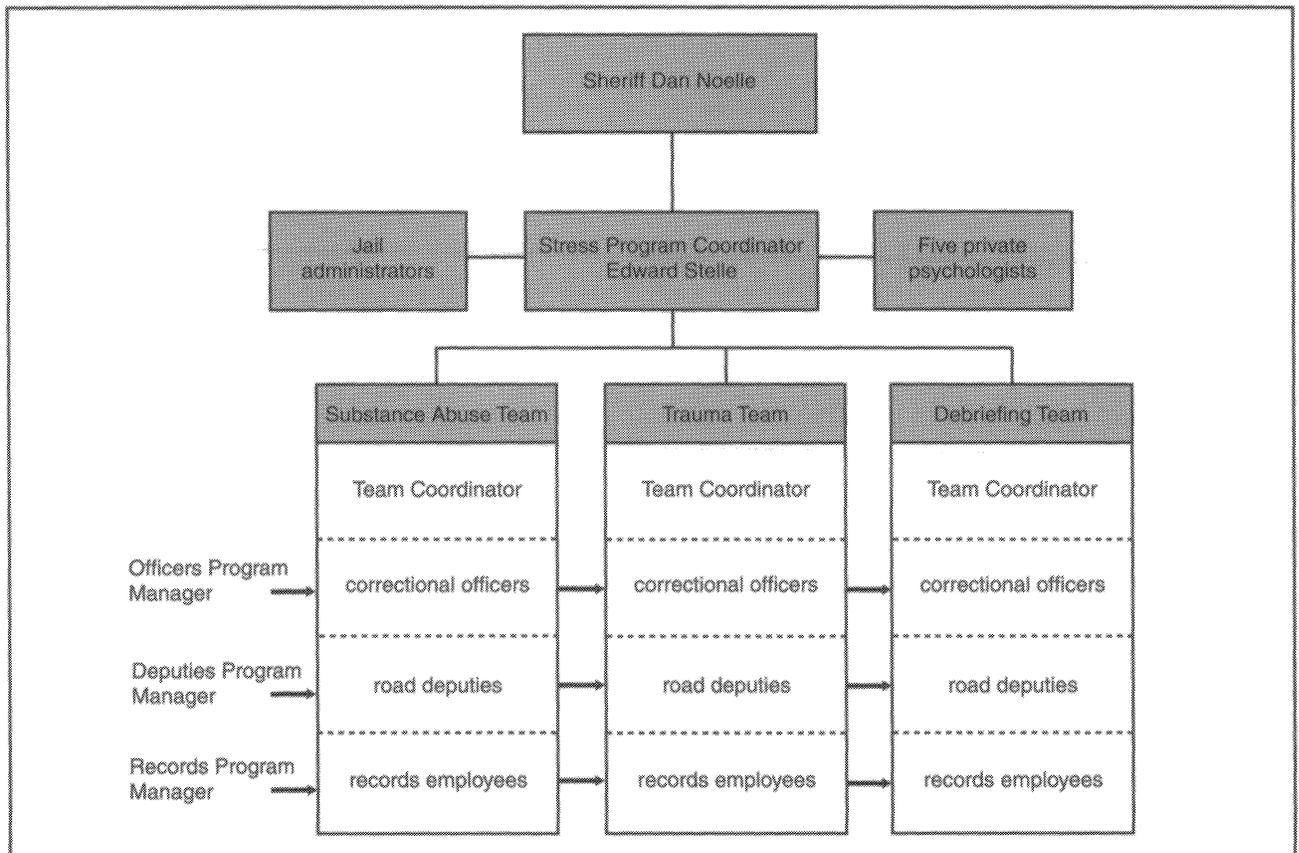
cuss personal problems. Through this process, Stelle identified three correctional officers and three road deputies he felt would be excellent peer supporters. He then persuaded the sheriff to pay to send them to Seattle for training.

By 1987, Stelle and the peers agreed the department needed a formal peer support program. With the help of the six original peer supporters, Stelle recruited additional peers and then secured funding from the sheriff to hire Nancy Bohl, director of The Counseling Team (see the case study on The Counseling Team above), to train them.

Organization

Exhibit 3-2 shows the program's structure. The peer supporters are divided into three specialty area teams: substance abuse, trauma, and debriefing. Members of each team include correctional officers, law enforcement deputies, and civilian records division employees. Each team is led by a team coordinator.

EXHIBIT 3-2. MULTNOMAH COUNTY PEER STRESS PROGRAM STRUCTURE



Each of three sheriff's department divisions—correctional, law enforcement, and records—has a program manager who oversees the peer supporters from all three teams who work within his or her division. The sheriff gives each manager 1 day a week to do nothing but peer support, which could involve keeping in touch with other peer supporters, helping an officer get hospitalized, or publicizing the program among other officers. The managers are given cellular phones and access to a vehicle, and they may split their time across two shifts.

The substance abuse team

According to Deputy Ken Spencer, a member of the substance abuse team, "The [addiction] problems [officers seek help for] are usually alcohol or gambling." To encourage them to ask for help, Spencer tells officers he had a substance abuse problem—and is still employed.

Usually the person gets into trouble on the outside and doesn't come to work, and I hear about it through the grapevine. Then I try to contact the person at home, away from the job. But often you can see that they have a problem: they come in late for work or just don't report at all; or you can see they don't look well. They stop talking to you. Often other officers see the symptoms, it goes through the gossip mill, and then I hear about it.

I try to be nonconfrontational, saying, "I'm from the peer support team, and I hear you may be having problems. I'd like to explain the program and let you know the sheriff is 100 percent behind it because he doesn't want to lose good, trained people. If you do have a problem, we can help you."

Spencer refers about two officers a year for substance abuse counseling. Some team members have literally taken officers by the hand to outpatient or residential treatment programs.

The trauma and debriefing teams

After a critical incident, department telephone operators automatically call the peer team program managers because their names are on the emergency call-out list established by the personnel department and approved by the sheriff. A command officer may also call the program managers. The corrections trauma team manager activates the trauma team by calling members on the job or at home. Trauma team members prepare the involved officers for the mandatory debriefing to follow and determine whether any of them need immediate psychological attention. As needed, trauma team members pick up children or arrange for family members' transportation to the facility or hospital.

Members of the debriefing team meet with involved officers in a secured area away from the incident, such as a conference room. Staff come without phones or radios. One of the two team members who are trained debriefers conducts the debriefings, and either Edward Stelle or one of five psychologists (see below) attends. The debriefing team conducted 10 debriefings attended by 42 officers in 1998.

The referral process

Peer team members give officers in need of assistance Edward Stelle's telephone number, explaining that he can arrange free professional counseling for them. The offi-

TRAUMA TEAM MEMBERS ALSO HANDLE PERSONAL CRISES

Members of the trauma team respond to individual employees having personal problems, not just work-related problems. An officer at home called Lieutenant Ron Bishop, coordinator of the corrections trauma team, to report that his wife just found out he had had an affair years earlier—"Can you come down?" Bishop went. He talked first with the officer, who repeated that the affair was years ago. Bishop answered, "But it's only today for your wife."

The wife agreed to go to a park to talk alone with Bishop. She expressed her anger and disappointment. Bishop told her she could get marriage counseling through the EAP. Later, Bishop found out she and her husband had gone for counseling. The couple is still married and has had two more children.

cers then call him anonymously. Stelle refers them to one of the five psychologists. While Stelle counsels many officers and family members himself, "It's only a band-aid," he says, "because they need to see a professional, which I arrange. So, in effect, I'm doing intake."

Stelle gives the officer the psychologist's telephone number and assigns the officer a number. The officer then calls the psychologist for an appointment and gives the counselor the number. The psychologist sends Stelle the bill with only the officer's number on it. Stelle approves it and forwards it to the department's fiscal office.

The sheriff provides Stelle with \$50,000 a year to reimburse the counselors. To stay within budget, Stelle has told the psychologists to permit only four free visits. Stelle occasionally refers officers first to the department's EAP because the program allows 10 free counseling sessions. But if officers call him back to say the EAP was not helpful, he refers them to one of the psychologists.

In 1998, peer supporters referred 67 employees to Stelle for possible followup counseling. Stelle referred 43 of them to the private psychologists and 3 to the EAP. According to Ken Spencer,

I referred one person to Stelle who had a gambling problem and was suicidal, and Stelle got him into inpatient treatment and then into outpatient counseling. He's now back at work. Two other officers would have been terminated because of drinking problems—and might be dead—if I hadn't referred them to inpatient treatment.

For further information, contact:

Edward J. Stelle
Director
Peer Support Program
Multnomah County Sheriff's Office
12240 Northeast Glisan
Portland, OR 97230
(503) 255-3600, ext. 406

Texas' Post Trauma Staff Support Program

BRIEF PROGRAM OVERVIEW

Unit (facility) teams consisting of screened and trained correctional officers in each of the facilities of the Institutional (prisons) Division of the Texas Department of Criminal Justice provide immediate support to affected employees after a critical incident. Team members discuss possible normal reactions, provide referral to sources of professional help, and assist with practical matters such as transportation and child care. Unit Team leaders inform facility administrators if a formal debriefing is needed. Administrators then contact one of five trained regional teams consisting of regional DOC staff (including a department psychologist and chaplain) to come on site to conduct the debriefings.

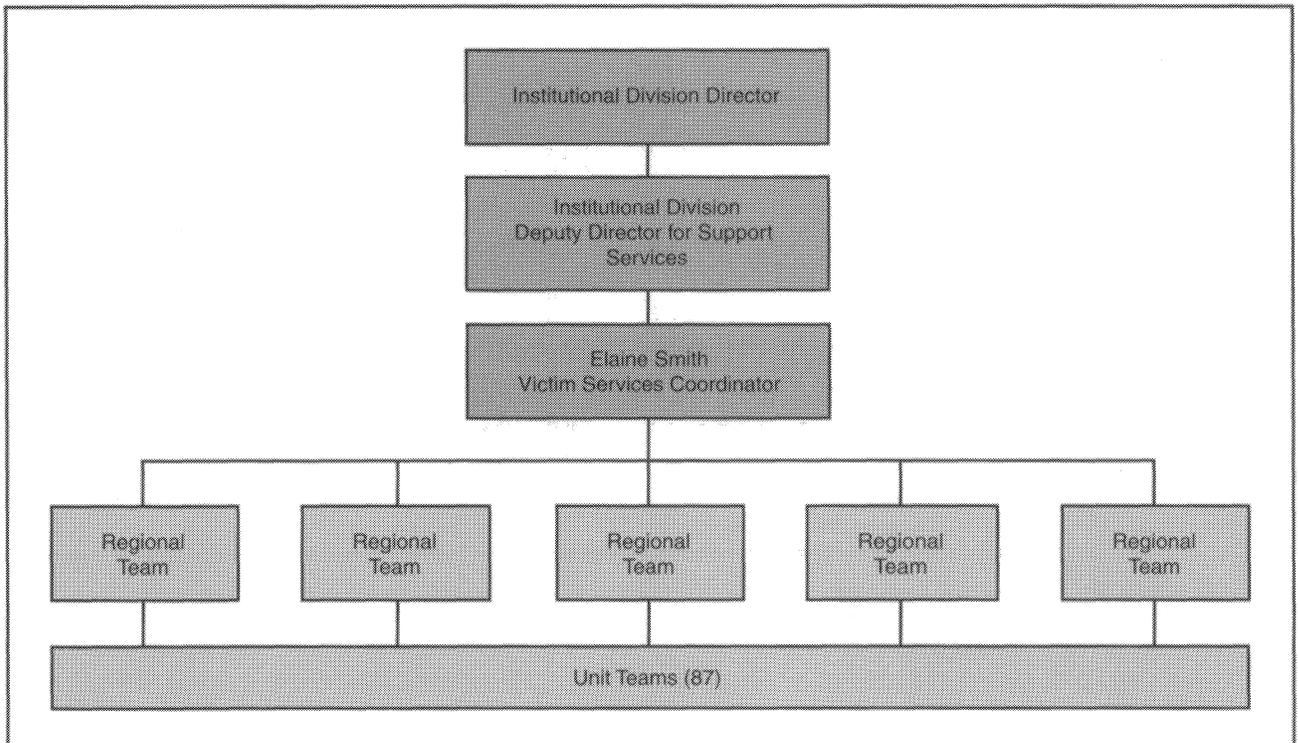
Onduty unit team members responded to 1,289 incidents in 1998 involving 2,342 employees.

Altogether, regional teams conduct an average of three debriefings a month. Since the team members are all volunteers, the only program costs are the program director's salary and per diem expenses for travel associated with conducting debriefings and attending training.

The Institutional Division within the Texas Department of Criminal Justice operates 87 facilities, which in 1999 housed 124,000 inmates. The division employs 24,500 correctional officers in its prisons.

Program structure

As shown in exhibit 3-3, Texas' Post Trauma Staff Support Program has two tiers: unit teams and regional teams. Each Texas facility has a unit staff support team selected by the facility's warden, which acts as a "first responder" after a critical incident and provides immediate support to affected employees. Each facility's unit

EXHIBIT 3-3. TEXAS POST TRAUMA STAFF SUPPORT PROGRAM STRUCTURE

team includes at least two employees (typically a male and a female) per shift. A team leader, who must have a rank of at least sergeant but usually is a captain, trains the other team members, conducts monthly team meetings, monitors completion of incident logs, and serves as the unit's liaison to the regional team (see below). There were 1,100 unit team officers in 1999, an average of 14 per facility.

Five-member regional staff support teams, one team for each of the Institutional Division's five geographic regions in the State, include a department psychologist, assistant regional director, chaplain, health service representative, and an open slot (e.g., for a deputy warden) who serve for renewable 2-year terms. Regional teams respond to critical incidents 24 hours a day. Each team member is assigned a permanent, specific role, such as team coordinator and lead debriefer.

Institutional Division Victim Services Coordinator Elaine Smith ensures that Post Trauma Staff Support members participate in all required training. She meets at least annually with regional team members to discuss

how to improve the program's effectiveness and how to increase awareness of the program. A Post Trauma Coordinating Committee, chaired by Smith and made up of Institutional Division coordinators, meets quarterly to discuss the program and make final selections of regional team members.

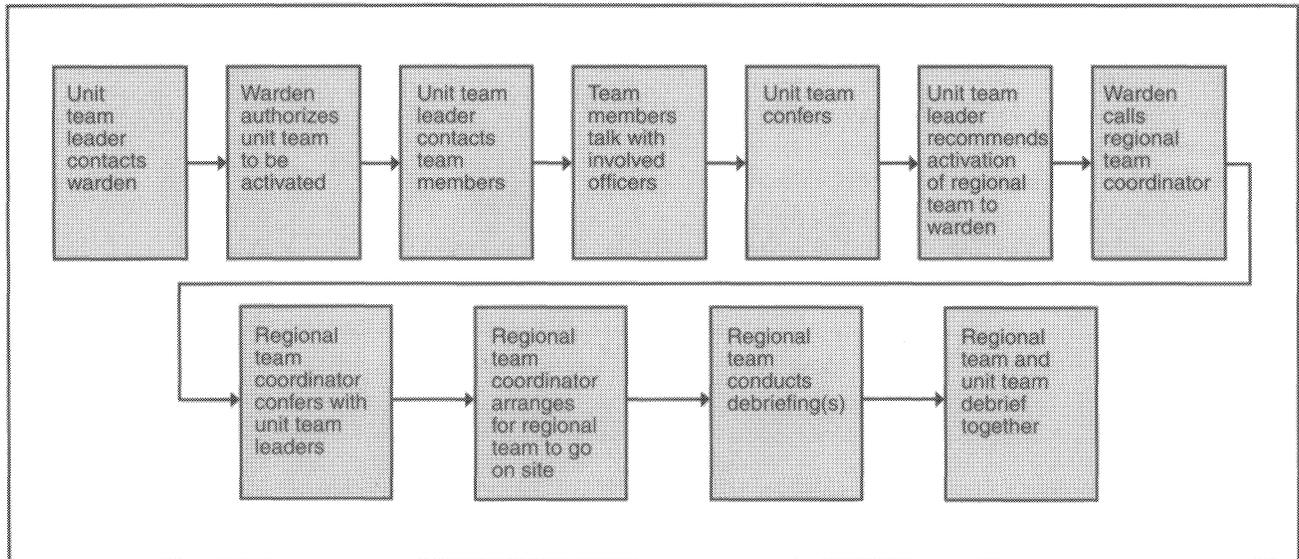
Procedure

Exhibit 3-4 shows the Post Trauma Program's procedure for activating the unit and regional teams.

Unit team responsibilities

Typically, a unit team leader learns about an incident almost immediately by word of mouth. The unit team leader contacts the facility administrator, who authorizes the leader to activate the rest of the team. When contacted, unit team members immediately are relieved of their duty posts. The facility administrator decides when the team members may return to their posts.

Team members, who are identified by program badges they wear while on duty, obtain any needed first aid for

EXHIBIT 3-4. TEXAS POST TRAUMA PROGRAM PEER SUPPORT PROCESS

affected officers (accompanying them to the medical office or hospital) and then talk with them. Team members—

- Provide information about symptoms that may occur after a critical incident, identify normal reactions, and assess the correctional officers' need for a debriefing.
- Distribute information packets about reactions to critical incidents and sources of help.
- Put employees in touch with needed followup assistance, from the nurse to the EAP to the human resources department.
- At the request of the administrator or affected officers, help employees with practical matters that the officers cannot or do not want to take care of, ranging from transportation to phone calls.

A UNIT TEAM OFFERS SUPPORT

Lieutenant Billy Reese, a unit team member, tells about an incident his team addressed.

A correctional officer on his way home from work was killed instantly when he ran into a tree. Two other officers who knew him and happened to be driving to work were the first to arrive at the scene. They called 911 and then came to work, deeply affected. The unit team leader contacted me, and I went immediately to their duty posts to ask the shift supervisor to relieve them, which he did. I then took the officers to a conference room and asked how they were doing. They talked for 30 minutes and then said they were OK.

Then I hooked up with another unit team member, and together we took up a collection in the facility to buy flowers. We took them to the wife's house. We offered our condolences and said we were available to help. We went back to the house again the next day, and we went to the funeral parlor and the funeral. We kept in touch after the funeral.

The only request the wife made was to have her husband buried in his uniform. The unit team leader made the necessary arrangements with the department administrators.

If it hadn't been for the peer team, we would not have gone to the wife's home, and I wouldn't have talked with the two other officers because they were not working on my shift.

- Inform their unit team leader regarding the involved officers' condition.

Regional team responsibilities

Based on the information provided by the unit team leader, facility administrators decide whether to activate their regional staff support team. If they do, they telephone the regional team coordinator, who coordinates the other team members' visit.

After arriving, the regional team coordinator—

- Schedules a debriefing time and private location in consultation with the facility administrator.
- Meets with the unit team leader to review the incident and ensure that affected employees are notified to attend and are told where and when to go.
- Ensures that all affected employees are present or accounted for before the debriefing begins.
- After the debriefing, arranges and runs a debriefing for all Post Trauma Program members involved in providing assistance.

Followup

During and after the critical incident debriefing—which is mandatory—the regional coordinator may refer affected employees to professional care providers primarily through the facility's EAP or human resources department. The unit teams meet once or twice a month to review what has happened to officers involved in each incident. If any of the involved employees needs help, the team assigns someone to talk to the person immediately and to follow up 2 or 3 days later to see if the person is experiencing emotional difficulties as a result of the incident.

An example of both teams in action

"We had a hostage situation at 7:00 p.m. one night at my facility," Warden Richard Watkins recalls. "An offender's common law wife smuggled him a derringer, and the inmate used it to take an officer hostage, intending to force the officer to escort him through the gate." According to the officer, Sergeant Deleta Jones,

The offender held a two-shot derringer to my side and instructed me to take him to the back gate. The offender stated that he would kill me if I made any sudden moves or tried to alert anyone. Fearing for my life, I began to walk in the direction of the back gate with the offender. As we were walking, I was able to make eye contact with the two officers who were coming down the slab. When the two officers were close enough to us, I alerted them by yelling, "This offender has a gun. Run!" All three of us ran, but the offender grabbed one of the other two officers and injured him before he could free himself. Later, the inmate grabbed a fourth officer and held him hostage. After negotiations by a trained negotiator, for approximately an hour, the offender surrendered his weapon and the hostage.

A member of the unit team took the injured officer to the hospital. The team leader called other team members at home and had them go to the hospital. Jones continued:

A [unit] team member asked me, "Are you OK? Do we need to talk?" But I was not upset. I was more concerned about my staff and the officer who was hurt. I took the injured officer to the emergency room in his car. Then Elaine [Smith]

DOES THE TWO-TIER APPROACH HAVE ADVANTAGES?

According to Ed Owens, the Institutional Division's deputy director for support services, the two-tier system makes it possible to have a response based on the severity of the incident and employees' needs. If an incident has not created severe stress, the unit team can handle it with just peer support. If an incident has had a severe impact, the regional team can address it with a professionally led debriefing.

In addition, Owens says, having a separate unit team within each facility enables wardens—"who go through a metamorphosis when they have been promoted and end up feeling they are independent"—to feel, "I have my team—these are my folk."

called me at the hospital to ask if he was OK. Elaine hung up. When she found out I was a victim, too, she called me back. A unit team member then came to the hospital to support me and the officer. The next day, a unit team member called me to see if I was still OK.

The facility sent out a communication that was read at turnout for a debriefing [by the regional team] for those directly involved in the incident. We had the debriefing 2 or 3 days later. Eight officers were involved. We took turns describing what we did and our feelings during the incident.

The session was beneficial because there were people there who understood what I had gone through. I was surprised when one of the two officers I had run into on the slab said to me and to the group that, because of my actions, "I gotcha back" became a reality—that is, I had covered his back [by telling him to run]. He is not a talkative guy, but he said he was very grateful I let him know the offender had a gun.

Exhibit 3–5 shows the activities of unit teams during 1998. As shown, 324 unit teams in the 5 regions responded to 1,289 incidents involving 2,342 employees (1,471 male employees and 871 female employees). The total time team members spent responding was more than 805 hours, or more than 20 40-hour weeks. Exhibit 3–6 shows that, in 1998, regional teams conducted 36 debriefings involving 658 employees. The 112 regional team members who participated contributed nearly 62 hours, not counting travel time. The types of incidents for which regional teams conducted debriefings included escapes, hostage situations, employee and inmate deaths, suicides and attempted suicides, employee illnesses, and assaults on staff.

For further information, contact:

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 Victim Service Coordinator
 Institutional Division
 Texas Department of Criminal Justice
 P.O. Box 99
 Huntsville, TX 77342–0099
 (936) 437–8588

EXHIBIT 3–5. UNIT STAFF SUPPORT OFFICER STATISTICS FOR 1998 BY REGION

Region	No. of Units Reporting	No. of Responses	No. of Male Employees	No. of Female Employees	Minor Medical	Major Medical	Total Time Involved
I	99	292	221	178	99	33	258 hrs. 19 min.
II	67	279	512	354	113	9	162 hrs. 25 min.
III	44	131	75	72	40	12	68 hrs. 30 min.
IV	60	463	398	137	245	179	255 hrs. 21 min.
V	54	124	265	130	44	12	60 hrs. 53 min.
TOTALS	324	1,289	1,471	871	541	245	805 hrs. 28 min.

EXHIBIT 3–6. REGIONAL STAFF SUPPORT TEAM STATISTICS FOR 1998

Region	No. of Debriefings	No. of Employees	No. of Team Members	Time Involved
I	8	40	21	17 hrs. 15 min.
II	9	119	24	16 hrs. 30 min.
III	0	0	0	0
IV	9	345	28	16 hrs. 35 min.
V	10	154	39	11 hrs. 35 min.
TOTALS	36	658	112	61 hrs. 55 min.

New York State's Department of Correctional Services Post-Incident Stress Debriefing Program

BRIEF PROGRAM OVERVIEW

After a critical incident, the assistant commissioner of the New York State Department of Correctional Services selects from a pool of staff who are certified debriefers five or six individuals whom he sends to the facility to conduct debriefings. The team refers involved employees, as needed, to the State's employee assistance program for followup professional counseling.

In 1998, the New York State Department of Correctional Services had 22,315 correctional officers and 9,156 civilians employed in 70 facilities. In the early 1990s, a small group of correctional officers, on their own time and at their own expense, had undergone training to conduct critical incident debriefings as part of the voluntary fire-fighting work they did off the job. The group had urged the department to establish an in-house critical incident debriefing process.

As a result, in 1993 the assistant commissioner organized these trained employees into a Post-Incident Stress Debriefing Program (PISD). However, the program remained dormant until a riot at the Mohawk Correctional Facility, in effect, served as a pilot test of the approach—and the impetus to formalize it. According to a correctional officer at the prison, “As terrible as Mohawk was, it got the [PISD] program instituted statewide.”

After the Mohawk experience, the PISD model was used again successfully in another facility after an inmate raped a female staff member and in still another facility after an inmate stabbed an officer 10 times.

Mohawk: A test of the system

The Mohawk Correctional Facility is a 1,305-bed medium security institution with 19 buildings on 75 acres. At

the time of the riot, it had 440 security staff (not all on duty). There were 350 inmates in the yard at the time of the incident. Once the yard was secured, staff identified 150 of these inmates as actual participants in the incident. Eleven staff were seriously injured; eight others were less seriously hurt.

The riot

On Thursday, July 17, 1997, a young inmate in disciplinary housing hanged himself using a sheet tied around a cover on the smoke detector in his cell. The inmate left a suicide note to be mailed to his mother. Other inmates spread the rumor that officers murdered the young man and set it up to look like a suicide. At the same time, a severe thunderstorm disabled Mohawk's entire phone system, including the inmate telephones. Inmates concluded that administrators had deliberately turned off the phones to prevent them from discussing the “murder” with outsiders. The facility's executive staff went to the housing units to assure them that the inmate's death was a suicide.

On July 19, a large group of inmates, infuriated by their misconception of an “inmate murder,” assaulted a number of officers. After the inmates had been confined to one yard, they used a bar to pry up the containment fence in an attempt to crawl into the rest of the facility. Chemical agents were used to stop the inmates, and they were contained within the yard. After Correctional Emergency Response Teams from other facilities arrived, the inmates were removed from the yard in groups of 10.

Logistics

After the riot ended, the president of the correctional officers union local at the time went to the commissioner to request that the PISD policy on offering debriefings be implemented. The commissioner agreed, authorizing the facility superintendent to go forward with debriefings when facility operations returned to normal. The superintendent in turn authorized the union president and the EAP coordinator at the facility to initiate the process and to schedule the debriefings.

Working from a list of employees who had been on duty the afternoon and evening of the riot, the union president and the EAP coordinator in person and by phone invited dozens of employees to attend the debriefings, which were also announced at the beginning of every shift and

at lineup for several days. All told, 400 staff were invited to attend.

Debriefings

While the union president and EAP coordinator assembled officers for the debriefings, the department's assistant commissioner convened the debriefing team.

A line officer from another facility received an e-mail from his supervisor telling him to go to Mohawk "for a day." The officer was selected because he was the EAP coordinator at his prison and a trained debriefer who had conducted more than 50 debriefings as part of his volunteer public safety work outside the department. He remained as lead debriefer for 6 days, went back a week later for 2 more days, and then returned for 2 final days in August to check on the well being of the most severely affected officers.

According to a captain certified in critical incident debriefing who co-led several sessions during the first week,

Twenty-five officers directly involved in the incident showed up the first day. As a result of word of mouth, their backups showed up the second day. The third day's session included institution nurses and physician's assistants who had found it stressful to administer to correctional staff—some of whom were their neighbors outside the facility—rather than to the inmates they were accustomed to treating.

Of the 400 staff members invited, 180 attended at least one of 15 debriefing sessions lasting 2 to 6 hours each. All sessions were held outside the prison complex. The sessions included group discussions and one-on-one support. A mental health professional co-led every debriefing.

Referrals

After the sessions, debriefers referred 12 officers to EAP coordinators, who arranged for professional counseling. The facility EAP coordinator obtained professional help for 10 to 15 officers who were referred to him or came to him on their own asking for help. "They probably would not have come to me for help if they had not attended the debriefings," he says, "or they might have waited until things got a lot worse." Later, he learned that several of

them saw the counselor to whom he had referred them once a week for 2 or 3 months. Others talked to the counselor once. Some brought their spouses to the first one or two sessions.

An officer and a lieutenant, both of whom had been seriously injured, left the department for good. Six other officers took disability leave, one for physical injuries and five for stress-related reasons. Five of the six returned to duty. One of the five no longer wanted any inmate contact. One employee who planned never to return to work did, in fact, return.

The aftermath: A formal program

After the Mohawk riot, the assistant commissioner made PISD a formal, operational program. He critiqued the PISD's performance after the disturbance with the president of the local officers' union and the facility EAP coordinator. As a result, the administration sent a memo authorizing any union president, EAP coordinator, chaplain, or department mental health specialist to contact

SOME FAMILY MEMBERS PARTICIPATED IN THE MOHAWK DEBRIEFING

There was no formal involvement of family members in the debriefings after the Mohawk riot. However, when the president of the union local at the time called officers at home, he asked if their wives and husbands were having difficulty coping with the crisis and for permission to talk with them. The union president referred three wives for followup professional counseling to Susan Cooper, the county's critical incident stress program director who co-led several of the debriefing sessions.

Cooper also gave out her telephone number at all the sessions she co-led. As a result, three or four other wives called her later. She met one for coffee and talked to the others on the phone about how to handle their children's reactions to the incident.

their facility's deputy superintendents whenever they felt PISD needed to be activated.

A September 1997 memorandum to all superintendents from the commissioner introduced central control over the debriefing process and clarified the procedure. The memo instructed superintendents that, once they had determined that debriefing sessions were necessary, they were to notify the assistant commissioner, providing him with the anticipated number of participants and the proposed schedule for the sessions. The assistant commissioner was then to assess the plan and provide technical assistance as required.

The commissioner's memo also stated that—

- The sessions should be held away from the facility.
- All beepers and telephones should be turned off to minimize interruptions.

- A team member should escort participants who ask to leave early to make sure they are all right.
- The EAP coordinator in each facility should keep a list of community resources to which employees could be referred for extended counseling.

Immediately after an incident, the facility EAP coordinator, union president, and administrator evaluate the event and decide whether to ask the assistant commissioner to assemble a debriefing team. The assistant commissioner assembles individuals for the team who do not come from the facility where the incident occurred so that participants in the debriefings will not feel word from the debriefers will spread to the participants' supervisors. In addition, debriefers from the facility might be too emotionally involved themselves to be effective leaders because they may know some of the employees who were injured. One member of the team is always an

LIEUTENANTS' TRAINING

Several New York State Department of Correctional Services regional training coordinators have used a portion of their training budgets to hire Roger Johnson, who consults nationwide for the American Federation of State, County and Municipal Employees (AFSCME) and criminal justice agencies, to provide a day-long training session for lieutenants on the issue of stress. The session is not supervisory training; rather, it is designed to help the lieutenants deal with their own stress.

The training coordinator for one of the Department of Correctional Services' nine hubs arranged for Johnson to train lieutenants in the five prisons in her hub. The coordinator submitted a grant proposal to the lieutenants' union local, which had funds for training purposes. The president of the union local agreed to pay the \$1,500 to \$2,000 for an offsite location, lunch, refreshments, and Johnson's fee.

Two lieutenants who attended the session cited different advantages of the training:

"Lieutenants are more inclined to go if the training is just for lieutenants because they feel it's for them."

"Conducting the training offsite means an awful lot; the facility influence is on you if it's [held] there. You need to go away to focus."

According to another lieutenant who attended,

I can still use what I learned there compared with other classes where you forget everything. It was geared to the job, but I was interested on a personal level—for example, road rage: Why do I have this reaction? Johnson taught relaxation techniques. I don't use them a lot, but from them I learned to relax physically: I see something that could be stressful, I take a breath, and I close my eyes. I don't get upset in traffic anymore.

EAP coordinator who can refer participants to further sources of help. Another member is a licensed mental health practitioner.

The department has since paid for additional officers to receive training. While Mohawk was still fresh in their minds, in January 1998 the facility's executive staff secured money from the central office to hire two specialists to train additional employees from the hub's six facilities in critical incident debriefing. The department secured the training monies from the National Institute of Corrections' Short-Term Technical Assistance Project. In May 1999, using \$10,000 from the same source, the DOC trained an additional 10 employees in each of the department's other 9 hubs to become certified critical incident debriefers.

For further information, contact:

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Post Trauma Resources, Columbia, South Carolina

Founded in 1982, Post Trauma Resources (PTR) is a private for-profit counseling and training organization with annual revenues of about \$700,000. About 5 percent of PTR's work is devoted to corrections.

Services to the South Carolina Department of Corrections

The South Carolina Department of Corrections' 4,850 correctional officers and 1,923 civilian employees supervise 20,959 inmates in 35 prisons. Post Trauma Resources provides the clinical and training services for the DOC's in-house posttrauma program.

Services after critical incidents

John Near, Director of Personnel for the South Carolina DOC, first used PTR for trauma services after a 1986 riot

in which 28 employees were held hostage and several were severely injured. Near arranged for Bergmann to provide the involved officers with individual and group debriefings. "As a result," Near reports, "turnover was very low; a high percentage came back to work pretty quickly." The department now uses PTR regularly for debriefings after critical incidents. PTR staff also provide debriefings to execution teams after every execution. Although team members report they feel no undue stress after having played their special role for so many years, they chose to continue the debriefings, which are no longer mandatory, because they realized that it is always possible that they—or new members of the team—may develop an adverse reaction.

Currently, when the DOC asks PTR to conduct a critical incident debriefing, the counselors try to arrange an educational debriefing with the affected officers' supervisors after having debriefed with the officers. PTR staff use the sessions to—

BRIEF PROGRAM OVERVIEW

The eight mental health professionals who work for Post Trauma Resources (PTR), an independent, for-profit organization, provide critical incident-related stress services to the South Carolina Department of Corrections. In 1998, PTR staff provided individual counseling to 15 to 20 correctional officers and conducted 15 debriefings, most of them for execution teams.

Post Trauma Resources also helps other DOCs across the Nation set up stress programs tailored to their particular conditions and needs. The organization provides technical assistance to the DOCs in designing a program, trains program staff, and provides ongoing technical assistance and followup training after the program is operational. Post Trauma Resources provides trauma-related individual counseling, debriefing, and planning services for all types of employers, from banks (e.g., after an armed robbery) to manufacturing plants (e.g., after an industrial accident).

- Explain what the counselors have done with the officers.
- Describe possible symptoms the supervisors should be attuned to among the officers over the next several weeks (e.g., short attention span, anger toward management) and how to respond to these symptoms.
- Urge the supervisors not to take the officers' anger personally but rather to let the officers vent—and provide them with information on what is being done about the incident.
- Describe the possible long-term consequences, such as hypervigilance, the incident may have for officers that the supervisors should watch for.
- Refer officers who exhibit these responses for possible counseling.

The State workers' compensation insurer reimburses PTR on an hourly basis for some staff counseling and debriefing services. The plan covers anyone who is involved in a life-threatening incident, suffers a physical injury, or has psychological symptoms as a result of a critical incident. If the insurer refuses to pay, the DOC picks up the bill.

Individual counseling

In the late 1980s, the South Carolina DOC developed a Post Assault Information Resource (PAIR) program. Every prison identified a PAIR representative, usually

a social worker, a human resources staff person, or an associate warden. The department workers' compensation and human resources offices then trained the PAIR to work with the human resources office to obtain appropriate care for injured employees. Lawrence Bergmann, Post Trauma Resource's director, trained the PAIRs to identify employees suffering stress after a critical incident.

Whenever an employee has been assaulted, the human resources office automatically sends the person a letter indicating the department offers free counseling services, telling interested employees to contact their prison PAIR. The PAIR then contacts the human resources office, which calls or writes employees to describe and offer PTR's services. Injured officers may also contact the department's victim services coordinator, who can also refer them to PTR.

Post Trauma Resources' individual counseling to DOC employees is short term, typically lasting three to six sessions. Occasionally, the counseling may continue for as long as 6 months. For longer term counseling, officers can go to the employee assistance program for treatment, although they are entitled to only three free visits with the EAP before paying according to a sliding scale.

Post Trauma Resources staff decide when an employee they are counseling can go back to work and what percentage time. Bergmann submits periodic status reports to John

A SAMPLE REFERRAL TO PTR FOR INDIVIDUAL COUNSELING

A facility nurse referred an officer who was stabbed and was having difficulty sleeping and trouble going to work to Post Trauma Resources. The officer brought his wife, who was pregnant, to the first session with Ruth Ellis, one of PTR's counselors. Ellis gave them the choice of coming separately or together to subsequent sessions. Ellis saw the officer for five sessions, sometimes alone, at other times with his wife. The couple drove 2 hours each way to attend the sessions.

Ellis found that the couple was not having marital problems, just difficulty coping with the officer's job. After counseling, the wife felt less anxious about her husband's safety. The couple agreed they would contact each other during the day so she could be reassured he was safe and he could feel good that she was not worrying about him. She told him what she did and did not want to hear about the job—for example, nothing about "blood and guts"—but he agreed to open up when he was afraid or upset. They agreed that, if he was concerned about revealing the truth about his feelings, he would tell her, and they would decide together how best to proceed.

Near updating each client's ability to return to work. According to Near, "We don't want anyone in the DOC deciding when an officer is ready to come back to work—that's a conflict of interest and a confidentiality problem. So it's very important to contract out for this service." Near says he has come to trust that PTR counselors will return employees to work as soon as it is appropriate.

Technical assistance and training to other States

The National Institute of Corrections (NIC) has funded PTR to help 12 States develop stress programs. (PTR has prepared guidelines for NIC on how to develop a critical incident debriefing program.) In most cases, the DOC's grant proposal to NIC requests PTR as the technical assistance provider. Some departments of corrections pay directly for PTR's services.

After the site visit is over, Bergmann says, "I spend weeks and months by telephone in an advisory capacity conferring with program coordinators to get the system going." Bergmann returns to many of the same States to retrain old staff and train new staff.

Virginia DOC

After a series of serious incidents in 1985, the Virginia DOC issued a request for proposals for help in developing a critical incident response program. PTR bid and won. After PTR worked with the department to set up a program, the DOC hired Bergmann to return for 3 days in 1992 (with a \$13,000 grant the DOC obtained from NIC) and 2 days in 1996 (with \$6,000 paid for by the department) to train new program staff and provide refresher training for old staff.

According to Robin Hurlbert, the department's director of mental health programs, "Bergmann comes with a complete program package—different levels of staff who need to be involved, and so forth—but is still flexible to adjust it to the DOC's needs. He provides the tools and the DOC decides which ones to use. Here we are in 1999, after several changes in DOC directors, and the program is still working."

Hurlbert reports that she still occasionally telephones Bergmann for consultation. For example, she called him to discuss how she could report breakdowns in security

without compromising officer confidentiality. Bergmann suggested she ask the officer's permission to report the breach without mentioning anyone's name. Hurlbert has since done this, and no officer has refused permission.

Missouri DOC

After the Missouri DOC hired Diane Haslag to develop and administer a stress program, the department sent her to sit in on a training for peer supporters that Bergmann conducted in Maine. Haslag also went to a conference in California for program coordinators from 13 States and Japan; Bergmann and two other trainers explained how to plan and implement a stress program and how to train line officers to provide peer support to other employees.

At the conference, Haslag gave Bergmann a packet of program designs and information for comment and asked him questions about how to select, screen, and train peer supporters. For example, Bergmann told her, if you have X hours to train them, you need to cover topics A, B, and C. If you have X plus 4 hours, you can also cover topics D and E. Bergmann provided a list of criteria for the needed characteristics of someone who would make a good peer supporter.

According to Bergmann, PTR is "a change agent for departments outside South Carolina." Bergmann assists out-of-State departments to tailor their own stress program to meet their own needs. Bergmann stimulates them to think about the important issues involved in establishing a program, asking them, for example, "What's your State's policy on workers' compensation? How much money are you prepared to spend? What have you already tried to do to address officer stress?" After thinking through the answers to these and other questions, the DOC chooses a model. By acting in this catalytic capacity, Bergmann can say, "I did 3 days of training in Texas, and they did 90 percent of the work itself."

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Chapter 4: Program Staffing, Training, and Networking

KEY POINTS

- Most programs find new clinical staff by word of mouth. New staff typically receive on-the-job training. Staff supervision is usually done by meeting with the program director.
- Some officers prefer counselors who have experience with corrections settings, but other officers do not care. In any case, it is useful for counselors to learn about correctional work and visit some prisons or jails.
- Peer supporters require careful screening and 3 to 5 days of training. Training typically focuses on developing active listening skills, refraining from giving advice, and recognizing when colleagues need a referral for professional help.
- Departments usually pay for peer supporter trainers and pay overtime to officers to cover for the peers while they are trained. Some departments have obtained grants for hiring peer supporter trainers.
- Followup training for peer supporters is essential for maintaining their motivation and skills.
- Counselors and peer supporters alike are susceptible to burnout. Several steps can reduce the possibility of burnout, in particular, setting limits on the time they spend providing support.
- Training correctional supervisors to recognize when officers may be experiencing difficulties and to refer them to sources of help is an important adjunct to a stress program.
- Every program needs a network of referral resources, including licensed counselors and inpatient facilities. Even counseling agencies may need to refer officers to outside psychologists if the agency becomes overloaded, lacks the needed expertise (e.g., to treat eating disorders), or is not conveniently located.

While the organization and structure of the stress program are important, staff talent and dedication—professional counselors and peer supporters—make or break the program. As a result, recruiting, screening, training, and monitoring stress program staff—the subject of this chapter—are of the utmost importance.

Professional Staff

Recruiting and training talented clinicians requires sensitivity and close attention.

Recruitment and screening

Most programs find new staff by word of mouth. Nancy Bohl, The Counseling Team's director, has never had to advertise to fill new positions, relying instead on a list of colleagues who have expressed interest to her over the years in any available openings. Jennifer Wolf, a counselor with Post Trauma Resource in South Carolina, reports that she already knew Lawrence Bergmann, the program's director, before she was hired because she had been the administrator in South Carolina for juvenile group homes and shelters. However, Wolf learned of the job opening from a newspaper advertisement. Bergmann

reports that he now hires experienced clinicians who no longer want the headaches of solo practice.

Some counselors come to the program with experience treating correctional officers or, more frequently, treating police officers or other public safety personnel (e.g., emergency medical technicians, firefighters). Because not all counselors have experience working with correctional officers or in prisons or jails, the California Department of Corrections requires mental health professionals who provide services to victimized staff to at least tour a prison.

Even if counselors lack corrections experience, they may not find it difficult to work with correctional officers.

Julie Rathbun at The Counseling Team in San Bernardino had no expertise in corrections before coming to the organization, but she had done critical incident debriefings with a fire department as a psychology intern and had done crisis intervention at a mental health center. After she was hired, Rathbun steeped herself in The Counseling Team's corrections literature. "I also learned from clients about their corrections-related sources of

stress," she says. "In any case, they have the same personal problems everybody has—relationship problems."

Bergmann sees trauma as generic—staff do not have to be experts in every kind of trauma or every profession. "With good skills, sensitivity, and a minimum of subject area knowledge," Bergmann says, "we can float back and forth among DOCs, banks, schools, and other industries where employees can experience trauma."

Some correctional officers report they prefer clinicians who have some familiarity with prisons or jails, but other officers say it makes no difference. Ultimately, it is the counselor's ability to help officers solve problems in a caring manner that is probably the most important consideration in the therapeutic relationship with this type of client (see the box "Favored Approaches to Treating Correctional Officers").

Training and monitoring

Most new clinicians fill in their gaps in correctional experience through conversations with other counselors and on-the-job observation. New clinicians at The

Counseling Team spend 3 months accompanying a veteran staff member to debriefings. A new counselor at Post Trauma Resources sat in on four counseling sessions that Bergmann conducted, observed him facilitate two debriefings (one at a bank), and attended a 2-day training session he ran for critical incident debriefers in Virginia. Bergmann also conducts case reviews every week with new staff.

It is the counselor's ability to help officers solve problems in a caring manner that is probably the most important consideration in the therapeutic relationship.

Directors of counseling agencies supervise clinical staff primarily through regular or ad hoc meetings to discuss how cases are progressing and how to deal with problematic clients. Bohl reviews evaluation forms filled out by clients to identify difficulties counselors may be experiencing.

FAVORED APPROACHES TO TREATING CORRECTIONAL OFFICERS

Nancy Bohl, director of The Counseling Team, reports that counseling correctional officers is problem-solving oriented—"some of it is not even therapy in a clinical sense. Many officers simply want guidance on 'What do I do?'" John Carr, Family Service Society director, describes his approach as "problem solving, cognitive, reality testing, not psychodynamic, fuzzy, or long term. Deal with the content and affect: What's the problem, and how is it affecting you? Help them choose among possible options. These clients are highly motivated to change because their jobs are on the line."

TRAINING PEER SUPPORTERS REQUIRES MONEY

Training peer supporters requires funding to pay for the trainers' fees and overtime for other officers to cover for the peers while they attend the training. If the peers travel for the training, money may be required to pay for per diems.

DOCs and sheriff's departments can sometimes secure outside funding to pay for training peer supporters.

- In 1995, Texas' Institutional Division secured a \$6,000 grant from the National Institute of Corrections (NIC) to hire Post Trauma Resources (see the last case study in chapter 3) to provide a 3-day off-site training program for the first 26 regional staff support team members.
- In 1999, the New York State Department of Correctional Services obtained \$10,000 from NIC to train 10 employees in each of the department's 9 regions to become certified critical incident debriefers.
- Sheriffs in California can have peer supporters trained for free. Nancy Bohl, The Counseling Team's director, arranged for the California Standards and Training for Corrections (STC) Commission to certify her organization's 3-day training course for peer supporters. As a result, sheriff's departments in California can receive reimbursement from STC for the counseling team's \$175 training fee whenever they send officers to attend the course.

Peer Supporters

Recruiting, screening, and training peer supporters is time consuming and requires funding (see the box "Training Peer Supporters Requires Money"). This commitment of time and money is one of several limitations involved in using peer supporters as the principal component—or one of several components—of a stress program. However, if the screening and training are well done, and if followup training is provided, a peer support program or component can bring many benefits to officers and the department (see the box "Using Peer Supporters: Benefits and Limitations").

Recruitment and screening

Some stress programs accept applicants for peer supporter positions solely on the basis of their desire to help troubled colleagues. However, some would-be peer supporters, in addition to not being competent (for example, they constantly feel compelled to give advice), may have inappropriate motives for joining the program. According to an assistant warden in Texas, "Some officers get on trauma teams to score points with wardens." James Hollencamp, coordinator of the Massachusetts DOC's Peer Stress Unit,

The formality of the process for recruiting and screening peer supporters varies considerably among programs.

observes that "Some younger officers are attracted by not having to work weekends (although they must be on call)."

Program staff suggest that peers be selected based on some combination of the following criteria:

- Reputation as someone whom others already seek out for informal peer support.
- Nomination by other officers.
- High-quality social skills and ability to empathize.
- Ability to withhold advice.
- A capacity to listen and suggest options.
- Ability to keep confidences.
- Availability 24 hours a day.
- Previous use of the program.
- Ability to complete the training program successfully (trainers have an excellent vantage point from which to identify inappropriate candidates).

USING PEER SUPPORTERS: BENEFITS AND LIMITATIONS

Benefits	Limitations
<ul style="list-style-type: none"> • Can provide instant credibility and ability to empathize. • Can assist fellow officers who are reluctant to talk with mental health professionals. • Can recommend the program to other officers by attesting credibly to its confidentiality and concern. • Are frequently more accessible than professionals because they are often already in the facility. • Can detect incipient problems because of their daily contact with fellow officers. • Are inexpensive compared with using professionals. 	<ul style="list-style-type: none"> • Cannot provide the professional care that licensed mental health practitioners can. • May try to offer counseling that they are not equipped to provide. • May be rejected by officers who want to talk only with a professional counselor. • May be avoided by officers concerned that their problems will not be kept confidential. • Require time, effort, and patience to screen, train, and supervise. • May expose themselves and the department to legal liability.

Program staff recommend that individuals of all ranks be encouraged to become peer supporters because many officers are reluctant to turn to someone of higher or lower rank for support.

The formality of the process for recruiting and screening peer supporters varies considerably among programs. Prospective unit (facility) team members in Texas' Post Trauma Program complete an application form (see appendix A). Members serve 1-year renewable terms. Current peers in the Rhode Island Department of Corrections Stress Unit refer potential new peers to Mark Messier, the program coordinator, and to John Carr, the unit's clinical supervisor. Messier and Carr interview applicants, asking why they think they would be good peer supporters. Messier also talks to their colleagues "to find out if the person really cares about his or her brothers and sisters and would do anything for them." According to Carr, "Everyone has a reputation, and it's easy to find it out in a closed system [like a prison]."

The Massachusetts Department of Correction's selection procedure is very formal, perhaps because the peers are

regular paid officers reassigned to the Stress Unit as full-time peer supporters. The Massachusetts DOC's Human Resources Department recruits new or replacement staff for the Stress Unit by posting positions throughout the department. The last time an opening was posted, an interview panel, consisting of current unit staff and Dennis Cullen, the DOC's deputy director of human resources, received 15 applications and recommended 3 to the commissioner for final selection.

Panel members look for applicants who have already helped other employees. The committee checks applicants' records to see if they have abused sick time (because they might do the same as Stress Unit staff). Candidates who make the initial cut return for a second interview with the panel. At his second interview in 1998, Dick Gould recalls being asked, "What would you do if a correctional officer comes up to you and says he is gay and coming out of the closet"? Gould's answer: "It's your business, and you might want to keep it confidential in this business—no one needs to know. But if you're willing to take a lot of guff, then go ahead." Later, as a program staff member, more than one officer came to Gould with this concern.

Who trains the peer supporters is extremely important.

Initial training

Who trains the peer supporters is extremely important. According to Debbie Liles, Texas Department of Criminal Justice assistant director for administrative review, "It's difficult to find experienced post-trauma trainers for correctional programs—that was the toughest problem [for us when we began the program], finding trainers who knew corrections." Liles eventually discovered Post Trauma Resources' Lawrence Bergmann (see the case study on Post Trauma Resources in chapter 3).

Edward Stelle, the chaplain who supervises the Multnomah County Peer Support Program, says, "I realized [to make the program work] I needed the best people in the United States to help us out." So Stelle brought in Roger Solomon (a well-respected trauma expert), an Oregon State trooper turned psychologist and a police trainer from Long Beach, California, to train the peer supporters. Later, he had Nancy Bohl (see the case study in chapter 3) come four times to train other new peer team members. "It didn't matter what they charged," Stelle says, "because I wanted the best. In addition, the peers themselves felt the program was a good one because they were being trained by top-notch people."

Training peer supporters generally focuses on—

- Developing skills for active listening.

- Discouraging peers from giving advice.
- Recognizing and assessing colleagues' problems.
- Determining the need for referral to professionals.
- Selecting the proper resource as a recommendation for professional assistance.

According to Gina Buonamici, assistant personnel officer with the Florida Department of Correction,

[Larry] Bergmann [of Post Trauma Resources] uses role playing in the training [of peer supporters]: how to respond to someone after a crisis through basic listening, clarifying, and feedback skills. Bergmann passes out the scenarios for different players [see appendix B] and tells them to respond. Afterwards, Bergmann and the participants critique the role playing in terms of what were effective steps the peer took or failed to take.

Ongoing training

According to Edward Stelle,

Once you have the program running, train over and over and never stop because peers then become better and better—and they won't stay [actively involved] unless they feel they are doing something

A TRAINEE'S VIEW OF PEER COUNSELING TRAINING

The Counseling Team provides a 3-day training course for peer supporters based on the organization's 160-page training manual. Kristy Paine, a lieutenant with the Riverside (California) Sheriff's Department, went through the training. Paine reports,

The trainers asked each of us to reveal something we didn't want the world to know. That got us on the road to trusting each other, and it made us realize how hard it is for an officer to open up to a peer supporter. So it taught us what an officer who comes to us is going through. We talked about emotional things and saw we weren't alone in experiencing them. One trainee talked about his guilt feelings about his brother's suicide because the brother had been asking for help.

The training also helped us to learn the supporter's function—we don't fix everything for officers, they make their own decisions. [Nancy] Bohl [The Counseling Team's director] said the supporter doesn't give answers, we explore alternatives. Cognitively, I knew that, but she gave us a model that we're not there to solve problems, just provide options. They have to deal with the solution. But you can't wait for them to come up with options; you have to help them come up with options.

positive. Peers keep asking me, “When will we be trained again?” because they keep running into new problems, such as an officer who is avoiding all the other officers on the shift because he feels left out.

Because training is a big undertaking due to shift problems, Stelle brings in a consultant to do the training onsite at different times during the same visit.

Every 3 months, San Bernardino’s counseling team asks the peer support coordinators within each corrections agency and police department with which it contracts to send a notice offering a free 3-hour followup training session to all peer supporters, with one of the agencies taking responsibility for sponsoring the event and bringing refreshments. By inviting peer supporters from several prisons and jails (as well as police departments), the counseling team can assemble enough peers to make the training cost-effective. Family Services Society in Rhode Island takes the same approach of inviting all the peers in both the DOC and the law enforcement agencies that the organization serves to the 2-hour followup training sessions it offers every other month. The training addresses topics the peers themselves have expressed an interest in, such as confidentiality, suicide indicators, and domestic violence.

The Regional Staff Support Teams in Texas use the operations manual as a guide to formulate and conduct annual training for unit team members within their respective regions. In 1997, unit team training consisted of a role play of a reenacted incident from start to finish. The peers travel to one location within the region for the all-day training.

Monitoring

Programs have found ways to keep track of peer support activity without compromising the confidentiality of the process. Some programs ask peer supporters to complete contact sheet logs without recording the names of

“Once you have the program running, train over and over and never stop, because peers then become better and better—and they won’t stay [actively involved] unless they feel they are doing something positive.”

— Edward J. Stelle, coordinator of the Multnomah County Sheriff’s Department’s Peer Support Program

the officers with whom they have talked. The Counseling Team’s checklist asks for whether the person was uniformed or civilian, male or female, and a family member or coworker. Peer supporters also record the stress-related issue for which support was given, ranging from problems with coworkers to financial concerns to alcohol abuse. According to Nancy Bohl, the forms are useful for determining whether—

- Peers are overworked.
- Too many peers work the same shift, leaving other shifts uncovered.
- Temporary departmentwide problems need to be addressed—for example, a rash of officer divorces in one department prompted Bohl to offer the peers a seminar on marriage and family support.

Supervisor Training

A number of corrections departments train supervisors—typically, sergeants and lieutenants—to recognize signs of stress among officers and refer the officers to sources of help. This training is important because—

- supervisors are in an excellent position to spot changes in officer behavior that may suggest problems, and,
- in their position of authority, supervisors’ recommendations that officers seek help may carry more weight than when other line officers, including peer supporters, make the suggestion.

Examples of supervisor training

As part of the Rhode Island DOC’s contract with Family Service Society, John Carr and Mark Messier explain to midlevel staff during their annual inservice training how supervisors can identify troubled employees. Carr tells them, “Work from your strength [as a trained supervisor]—observation and

Programs have found ways to keep track of peer support activity without compromising the confidentiality of the process.

ADDRESSING STAFF BURNOUT

Because of the intense involvement in other people's problems required of therapists, the counseling profession in general can easily lead to burnout. Peer supporters can also be subject to burnout. Clinicians and peer supporters in correctional officer stress programs may be especially vulnerable to burnout because much of the counseling they do and support they provide revolve around issues of injury and death and because counselors and supporters may periodically have to work long hours, including nights and weekends.

According to James Hollencamp, the Massachusetts Stress Unit's coordinator, "Our biggest problem is dealing with burnout of our own staff because they won't take time off because they feel needed by their clients. The peers are entitled to 4 weeks' vacation a year, but few ever take all the available time."

There are several steps peer supporters and clinicians can take to prevent burnout:

- Get daily *physical exercise*.
- Meet with or telephone *each other* to discuss and resolve problems of work overload. The Counseling Team teaches trainees that "just because you're a peer doesn't mean you can't be stressed by a client. Go talk to a peer yourself." Dick Gould, one of the Massachusetts DOC Stress Unit's five peers, tells the other peer supporters, "If you get overloaded with pressure, call me."
- Get *professional help* when personal problems develop. John Carr, Family Service Society's director, says, "Helpers are the last people to ask for help. How can I have marital problems when I'm handling three domestic violence cases a week?"
- *Debrief together* after providing support or counseling after a critical incident. In Texas, members of the regional team debrief the unit team after a crisis to make sure the peer supporters are all right. Similarly, New York State's debriefing teams meet among themselves after each session to make sure no one goes home upset.
- Above all, set *limits* on how much time to spend providing support or counseling, and refuse on occasion to accept assignments. According to Dick Gould, "We have a tendency to try to fix everything." Kristy Paine, a lieutenant with the Riverside (California) Sheriff's Department, says, "I learned [during peer training with The Counseling Team] that it's OK to say my plate is full, and I can't help you. We were taught a graceful way out: Tell them, 'Your problem is very important, but I have my own problem just now. So let me refer you to someone else.'"

awareness of human behavior and changes in behavior. If the officer agrees he has a problem, refer the person to the Stress Unit; if there's no problem, you've shown you cared." Messier gives them the list of peer supporter names and locations, telling the supervisors that the peers can talk with officers at the supervisors' request.

Two California sheriff's departments have given Nancy Bohl a block of time in their academies for correctional officers and road deputies who are becoming sergeants to focus on opportunities to help troubled officers.

Appendix C outlines the agenda Bohl follows.

Employee Assistance Program (EAP) training

Each New York State Department of Correctional Services facility typically has three employees (uniformed or civilian) who have been appointed as full-time EAP coordinators. The coordinators are the employees' liaison to sources of help for everything from debts to illness. However, the coordinators may not initiate a conversation with an officer about a problem without permission from a supervisor.

As a result, a number of EAP coordinators periodically conduct 2- to 3-hour training sessions for supervisors to familiarize them with the EAP's services, explain how supervisors can identify employees needing assistance, and provide strategies for motivating employees to take advantage of these services. Two pages from the EAP's 39-page coordinators instruction manual (reproduced with permission in appendix D) provide the EAP coordinators with a scenario in which a supervisor helps a hypothetical employee, Joe, whose work performance has declined, to take advantage of the EAP's services. Coordinators use the scenario to show supervisors how they can motivate officers to accept referrals for help.

According to a sergeant who attended the training,

I made use of the ideas twice in the 6 months after the session. I referred two officers to the EAP

"I referred two line officers to the EAP because the [supervisor] training reinforced doing this and what to watch out for . . . both officers returned from taking some time off."

because the training reinforced doing this and what to watch out for. After both officers returned from taking some time off, I could see they were back to their normal selves. One officer thanked me for the referral. Either they didn't know about the EAP's services or they were too embarrassed to go until I suggested it.

Developing a Network of Reliable Referral Resources

Because of lack of time or expertise, no stress program can provide all the counseling services officers, civilians, and their family members may need. Peer programs in particular need access to psychologists to whom they can refer officers who need professional help. Peer support programs and professional counseling organizations alike

EMPLOYEE ASSISTANCE PROGRAMS AS A REFERRAL RESOURCE

Some programs refer officers exclusively to their department's employee assistance program (EAP), often because there is no funding for independent psychologists. Edward Stelle, coordinator of the Multnomah County Peer Support Program, sometimes refers officers to the EAP because it can provide up to 10 free counseling sessions, whereas the sheriff's department will pay for only four visits to one of his pool of independent psychologists.

The Regional Staff Support Teams that are part of the Texas Institutional Division's Post Trauma Program refer officers in need of professional counseling to the EAP; teams are not allowed to refer them to individual psychologists or organizations because it would seem like favoritism. The Institutional Division's EAP permits employees only one free visit to assess their needs and then refers officers to professional counselors. While callers have to give their names, the difficulty is not confidentiality but locating services employees can afford.

A.T. Wall, director of the Rhode Island DOC, says the EAP which serves correctional officers and other State employees "is a good program, but staff rely on it far less than the DOC Stress Unit. They go to the stress program because it feels like home: it is specific to corrections. Staff [also] may not trust the EAP." San Bernardino Deputy Chief James Nunn reports, "There is a county EAP, but no one uses it because they're afraid it's not confidential. They're afraid the county will have access to their records." Clyde Kodadek, a supervisor with the San Diego Sheriff's Department, adds that, "because The Counseling Team is geared toward safety professions, it has more credibility than the EAP."

need access to quality inpatient services. Selecting these outside resources is important. If officers conclude these clinicians and hospitals are incompetent or not confidential, the entire stress program may be compromised.

Program staff can select outside service providers based on

- professional qualifications,
- ability to respond quickly, and
- third-party insurance coverage.

Most stress programs identify promising resources by word of mouth from other professionals or from officers who have used the services. Program staff typically encourage officers they refer to report their opinions of the practitioner or facility.

Outpatient counseling

Even stress programs that have their own in-house clinical staff, such as Family Service Society, Post Trauma Resources, and The Counseling Team, sometimes need access to qualified outside counselors. First, these programs typically offer only short-term counseling. Second, even if they can offer unlimited treatment, most programs need access to outside clinicians during times of overload or for specialty areas, such as family therapy, child therapy, and eating disorders. Finally, some programs may be too far away from an officer's home to travel to conveniently.

Inpatient services

Most programs have a single psychiatric hospital and one or more substance abuse treatment facilities to which

they refer officers. Family Service Society uses Butler Hospital, a private psychiatric facility affiliated with Brown University in Providence.

Even stress programs that have their own in-house clinical staff sometimes need access to qualified outside counselors.

"This [day hospitalization] is my treatment preference because it's not as intimidating to officers as confining them 24 hours a day in a facility—by profession, they are the keeper of the keys, and being locked up frightens them because of its loss of control. In addition, they can still be connected to the community and their family evenings and weekends."

— John Carr, director,
Family Service Society

Robert Hamel, Butler's day program ("partial hospital") director, gives correctional officers special attention when they arrive. Hamel often meets the officer in his own office and does the intake evaluation himself. He makes sure officers are seen right away and do not have to remain in the waiting area where they can be seen.

Hamel says officers tell him, "I'll be embarrassed coming here if anyone finds out." Hamel: "Do *you* know anyone who's been here?" Officer: "No." Hamel: "So you know no one will report you've been here." Hamel then explains the pertinent statutes and the hospital's rules regarding confidentiality.

Butler serves 10 to 12 correctional officers a year in the day hospital and 1 or 2 as inpatients. Having access to a day hospital option can be especially important. "This is my treatment preference," John Carr says, "because it's not as intimidating to officers as confining them 24 hours a day in a facility—by profession *they* are keeper of the keys, and being locked up frightens them because of its loss of control. In addition, they can still be connected to the community and their family evenings and weekends." (See the box "Rhode Island's Stress Unit Arranges for an Officer to Be Hospitalized")

Even if the program has highly talented staff, officers will not beat down the program's doors for service unless the staff find a way to gain support from the corrections community. The following chapter suggests how to win over corrections administrators, unions, and line officers.

RHODE ISLAND'S STRESS UNIT ARRANGES FOR AN OFFICER TO BE HOSPITALIZED

A Rhode Island DOC officer called Mark Messier, the Stress Unit coordinator, to say he was thinking of killing himself. Messier met with him immediately and then called Robert Hamel, the director of Butler Hospital's day program, to say, "I have a guy who is very troubled. He hit another officer. Can you see him?" Hamel: "Bring him in." Messier went to the hospital with the officer.

The officer had a long history of discipline problems. Recently, he had been calling in sick, had lost 10 pounds in two weeks, and was breaking down in tears. A gambling problem had put him \$100,000 in debt and was causing panic attacks.

Hamel did the intake interview with Messier sitting in. Hamel, in consultation with a psychiatrist, decided the officer would not benefit from hospitalization but would benefit from 9:00 a.m. to 3:30 p.m. partial hospitalization custodial care. The officer agreed. Messier called Barry Levin, the DOC's Human Resources Coordinator, who agreed to advance him 5 days' vacation time.

After a neurological workup to see if he had any physiological problems, the officer was diagnosed with bipolar depression. The officer saw a psychiatrist daily for a week and was given one medication to calm him and another medication for impulsiveness. Hamel assigned him a nurse who taught him relaxation techniques and coping strategies for his anger. The officer told Hamel, "The coping strategies are rocket science to me—they're great!" The officer returned to work after a week.

Hamel says, "If this had been a normal admission without my intervention, or if it had occurred at any other hospital, the officer would have waited hours to be seen, been hospitalized, picked a fight, gone AMA [left against medical advice]—and been lost to treatment."

Chapter 5: Ensuring Participation: Involving Administrators, Unions, Officers, and Family Members

KEY POINTS

- Stress programs need to market their value to commissioners and sheriffs and to wardens and jail administrators.
 - As discussed in chapter 1, there are compelling reasons (notably, saving money and improving institution safety) for administrators to seriously consider implementing or expanding a stress program.
 - Wardens and jail administrators who have seen how a stress program benefited their facilities are in the best position to promote the program with other wardens and jail administrators in the agency.
 - It is important to gain the support of lieutenants and captains because they decide whether to give peer supporters time off to help other officers—and whether to allow troubled officers time to meet with the peers.
- Corrections administrators and program staff need to involve the officers' union in the program.
 - The officers' union is usually in a position to oppose the program (e.g., by badmouthing it) or provide tremendous support (e.g., by telling members it is truly confidential).
 - Unions have much to gain by supporting the program, including improved relations with management and reprieves for officers about to be disciplined or terminated.
 - The American Federation of State, County and Municipal Employees (AFSCME) makes a former police officer and experienced trainer available to run seminars for correctional officers on reducing stress.
- Outreach to line officers is essential to getting them to participate.
 - Marketing strategies have included letters, inservice and academy training, brochures, postings, and announcements.
 - The best sales approach is word of mouth.
- Offering services to family members is the humane thing to do and benefits the institution.
 - Family members often experience stress because of the correctional officer's work.
 - Supportive family members can reduce the officers' stress and help officers avoid bringing family problems to work.
 - A "spouse academy" can teach husbands and wives how to relieve officers' stress and spot signs of stress that may require professional attention.

To be effective, a stress program needs to have

- the support of top correctional administrators,
- the involvement of union officers,
- the trust and confidence of line officers and civilian employees (the program's primary "clients"), and
- involvement of family members as clients and supporters.

This chapter describes the contribution each of these four groups can make to the program's success, along with strategies program coordinators have used successfully to enlist their support.

Securing Top Administration Support

Clearly, without support from administrators, a stress program will not succeed. This includes support not only

from State commissioners of corrections and sheriffs but also from individual facility wardens and jail managers. Chapter 1 identifies several compelling reasons for administrators to consider implementing or expanding a stress program, including saving money and improving facility safety. Talking with administrators—several of whom are identified throughout this report—who have actively supported and funded stress programs can also help convince reluctant commissioners and sheriffs of a program's benefits.

Commissioners can require wardens, and sheriffs can order jail administrators, to conduct specific activities. However, as Ed Owens, deputy director of support services for Texas' Institutional Division, says,

You need a sales job because wardens could do it by the letter, not the spirit. And, if there's no spirit, employees will see through the program as meaning nothing. Since we gravitate toward the attitudes of the person at the top, if the warden thinks people who need help are weak, employees won't admit

HOW CORRECTIONAL ADMINISTRATORS CAN SHOW SUPPORT FOR THEIR PROGRAM

The best way for administrators to support the program is to promote it publicly.

A.T. Wall, the Rhode Island DOC director, describes the program when he teaches the inservice program, asking, "Aren't you more worried about the guys who *aren't* getting help—when you depend on them for your safety—than about the staff who are dealing with their problems?"

Administrators also need to support the program in less visible ways. In particular, they need to—

- Ensure that wardens, jail administrators, and midlevel supervisors give peer supporters release time both to receive training and provide peer support.
- Never ask program staff for personal information about officers who have used the program.
- Provide adequate funding—when the administrative assistant to Dan Noelle, Multnomah County sheriff, told him the Peer Support Program was going over budget, he told her not to worry, that he would find the added funds.

However, administrators have to be careful not to allow their support to be "the kiss of death." A.T. Wall cautions, "We have to be careful because if staff see it as a management program, they could come to mistrust it." In particular, administrators should never become involved in the program's operation. Dan Noelle says, "I try *not* to interact with the actual business [of the program] because I want employees to feel that their relationship with the program is something management won't destroy. The peer is the officer's friend, and I don't want to jeopardize that."

they need help. As a warden I had to tell officers, “You’re tough, but I won’t think any less of you—I will think more of you—if you get help.”

To convince wardens of the Post Trauma Program’s value, Elaine Smith, the program’s coordinator, got on the training agenda for each region’s monthly wardens meeting to introduce them to the program operations manual and the programs.

- Smith asked the wardens to identify critical incidents in their facilities and then asked, “Who took the officers to the hospital?” Answer: “I sent a captain—and lost his services for the rest of the afternoon.” Smith: “If you had a peer team, the captain would not have to go. A peer could do it—and also offer consolation and enhance the employee’s coming back to work the next day.”
- Smith told the wardens of an officer who was “cold cocked” by an inmate who had never given him any trouble before. “He was embarrassed to heck in front of

his peers. He remained preoccupied and distracted for weeks because he felt he should have been alert at the time and should have seen the blow coming.” Smith tells the wardens, “The officer just needed time off to talk with a peer; instead, he was a security risk in one of your facilities.”

Wardens from other regions who had called on the regional support teams for help after critical incidents at their facilities told their colleagues how the debriefings had benefitted them.

Of most value, Smith asked the regional prison coordinators to invite one or two wardens from other regions who had already called on the regional support teams for help after critical incidents at their facilities to attend their wardens meeting. These “sold” wardens told their colleagues how the debriefings had benefited them.

One warden talked about an incident in which a female officer was raped in his facility, and the unit team and regional team both responded to the incident. According to an attendee, the warden, a well-respected, long-time prison administrator—and a 6-foot, 4-inch former Marine—made an extremely effective pitch for the program. The warden explained that the unit team members were at the prison to support the officer before she even

GETTING MIDDLE MANAGEMENT’S SUPPORT IS ALSO CRUCIAL

It is important to gain the support of lieutenants and captains because they are in a position to decide whether to give peer supporters time off to help other officers—and whether to allow troubled officers to meet with the peer supporters. After signing a contract with the San Diego County Sheriff’s Department, Nancy Bohl, The Counseling Team’s director, spent an entire day orienting 14 command staff to her organization’s services. Commanders asked,

“Will you respond 24 hours a day to crises?” “Yes.”

“Will you help staff adjust to an officer—the third one in a few months—diagnosed with terminal cancer?” “Yes.”

“Right now?” “Yes.”

The commander called Bohl the next morning. Bohl drove over that afternoon and spent 3 hours with the officer’s coworkers. Bohl also arranged to get on the agenda of the department’s monthly commanders and executive staff meeting to describe The Counseling Team’s services.

As with wardens, seeing is believing for supervisors. If a program can relieve a lieutenant or captain of having to deal with a problem officer, the supervisor will make more referrals in the future.

left the facility, and they went home with her. As a result, he felt he did not have to worry about this. He said the peer supporters calmed the unit staff who were upset, letting them vent. The warden told the other wardens that he was surprised to find employees admitting they needed help. Later, the warden heard directly from several employees that they felt the teams' involvement showed that the system cared about them. Employees felt, he said, "Look what the warden did for us."

Wardens and jail administrators typically have three principal concerns about a stress program:

- Some officers will abuse the program to get time off from work;
- Officers may confide policy breaches or illegal activity to peer supporters which will not be reported to supervisors; and
- Peer supporters will spend too much time away from their posts talking to other officers.

Programs have adopted different strategies for addressing these concerns. At monthly wardens meetings, Elaine Smith made clear that—

- Peers do not investigate incidents. Although some negative information about wardens may come out, peers are told not to discuss the criticisms with the officer or anyone else.
- The program permits team members to provide support only with permission of their immediate supervisor or after contacting the team leader, typically when an officer needs immediate help.

All stress program coordinators clarify for wardens and jail administrators that peer supporters must tell supervisors if they hear information from other officers that would compromise institution safety or that involves criminal activity.

Collaborating With the Union

As the bargaining unit and officers' primary representative with management, the officers' union is in a unique position to stymie or promote a stress program. Union leaders

can demand that officers be paid overtime or given compensatory time whenever they provide peer support, and they can tell their members that the peer supporters or counselors do not keep visits confidential and are a tool of management. It is therefore essential to obtain union support in the planning or early stages of the program. Connecticut's FOCUS program is a case in point.¹

Connecticut's collaboration with the union

There are 4,100 correctional officers and 2,900 civilians in the Connecticut Department of Correction's 23 facilities. In 1999, the department planned a new stress program funded by the National Institute of Justice (with in-kind contributions from the DOC) called Families, Officers and Corrections Understanding Stress (FOCUS). The program offers 2-hour inservice and after work seminars to officers and their family members on financial management, parenting skills, conflict resolution, and other topics based on the results of a survey of officer stress. The department has contracted with its existing EAP provider to offer followup counseling for officers and family members as needed.

Officers in Connecticut are represented by three American Federation of State, County and Municipal Employees (AFSCME) locals, each covering a different region of the State. A FOCUS committee consisting of the presidents of the three locals or their delegates, the stress program director (representing the DOC), the liaison with the DOC's contracted EAP program, and, initially, the DOC's personnel officer responsible for workers' compensation decisions first met as often as twice weekly for 3 hours to guide the development of the program. At these meetings, the three union delegates proposed significant changes in the original program plan:

- (1) The original grant proposal called for surveying officers in 4 of the State's 23 facilities. The unions asked to add the supermaximum security facility to the list and to substitute a jail for one of the original four prisons. (The Connecticut DOC runs the State's jails.) The union felt that including officers in these facilities would broaden officer representation. The DOC agreed to the changes.

(2) The unions objected to providing the EAP with \$60,000 of the \$100,000 Federal grant. According to Michael Minney, president of one of the three unions, "Initially, the EAP was going to do the survey, but our members felt that it should not because [with its vested interest in increasing referrals], the EAP could appear to have a conflict of interest that would damage the program's credibility."

(3) The FOCUS committee had planned to offer the seminars to officers on weekends, during lunch, or after work. The committee proposed using time during the annual week-long mandatory inservice training when the program would have a captive audience and there would be no additional cost to the DOC. Facility administrators determine what will be taught during 2 days of electives, so they could agree to include stress training. The DOC's inservice training committee and the relevant deputy superintendent agreed to use one of the days for stress training at the five facilities.

The unions were also concerned management might use against their members any information from the survey that suggested the presence of alcohol abuse among officers or, if the results indicated officers did *not* experience unusual stress, claim that officers were overpaid. Management, in turn, was concerned the unions might bring up any findings that suggested officers hated their supervisors or, if the results showed extreme stress among officers, ask for salary increases. As a result, the union and DOC signed a memorandum agreeing that neither party would use the results of the survey during contract negotiations.

According to Maria Houser, Deputy Commissioner for Administration, union support was essential "to get the word out to staff that this isn't management bull."

Reflecting their participation in the FOCUS program as an equal partner with management, the unions will make crucial contributions to the stress program's success:

- The unions offered to contribute \$9,000 to the grant—\$3,000 from each local—if the money were needed.
- According to Robert Parziale, the president's liaison to the FOCUS committee from one of the three locals, "The unions will promote the program to officers by letter, roll call, direct mailings, newsletters, union meetings, and the union Web page. The union has been telling officers that the program is for them, not a hidden agenda to help the DOC."
- The union mailed a one-page memorandum (see exhibit 5-1) to all members in the five facilities involved in the survey, signed by the DOC commissioner, the three union presidents, and the EAP contract manager, describing the program and urging members to answer the program's forthcoming survey questionnaire. The memorandum asked the officers to "please encourage your family member(s)/significant other to participate in the educational programs as they are developed in response to the questionnaire."

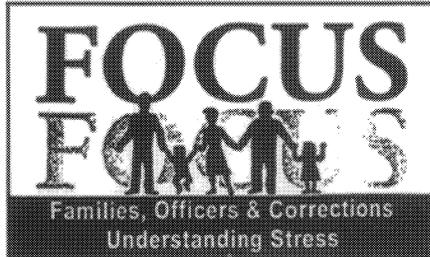
According to Maria Houser, Connecticut's deputy commissioner for administration, union support was essential "to get the word out to staff that this isn't management bull." Parziale adds,

The program would have been dead in the water without union support. Most officers are skeptical of the DOC's motives, so they would have refused to take the survey without union support—they were

FAILURE TO INVOLVE THE UNION EARLY CAN BE COSTLY

According to Commander Lynne Pierce of the San Diego Sheriff's Department, "We involved the union too late; we should have done it earlier. For example, we could have avoided some political issues if we had the union on board when we went for permission to sole source the [stress services] contract to The Counseling Team. Union officers were suspicious of the arrangement because they did not believe that management could be doing anything out of the goodness of their heart. And we have yet to work out with the union under what conditions a supervisor's telling an officer to see The Counseling Team will be a mandatory referral."

EXHIBIT 5-I. UNION MEMORANDUM



Dear AFSCME Correction Officer:

The Department of Correction has been awarded a grant from The National Institute of Justice to implement an educational program related to the impact of stress on the lives of Correction Officers and their families. We are the first and only correctional department in the country to be included in the project, thus giving us the opportunity to become a national leader in the area of Correction Officer stress. What makes this opportunity particularly important is the inclusion of family members in the program.

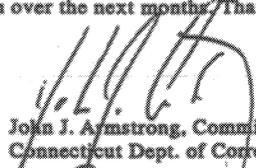
To ensure the success of the program, the Department, AFSCME Council 4, and our Employee Assistance Program (EAP) will work together to deliver the services under the *FOCUS* program (Families, Officers & Corrections Understanding Stress). This unique partnership brings together those people with both a first-hand knowledge of the department and the stress involved in the work of a Correction Officer.

The Department, the union, and the EAP recognize that stress impacts all areas of the lives of our Correction Officers and their families. The goal of *FOCUS* is to reduce Correction Officer and family stress through education and training in the areas of communication, personal stress management, conflict mediation, parenting skills, and prudent money and debt management.

The program will be implemented in five facilities: Cheshire CI, Webster CI, York CI, Northern CI and Hartford Correctional Center. It is our hope that this pilot program will lead to more funding for a departmental-wide program in the year 2000 and beyond. In order to be successful, the program depends on the participation and support of Correction Officers at all facilities.

In March, a questionnaire will be randomly distributed; please take the time afforded you to answer the questions and return the questionnaire to your *FOCUS* designee. The questionnaire is confidential, and there is nothing on it that will identify you individually. Participation is voluntary. Once the program is completed, the same questionnaire will be distributed again so that we can evaluate the impact of the education components on Officers. We hope to prove that Officers' participation in *FOCUS* show a positive change in their ability to manage stress at home and at work. Your participation could lead to changes and improvements in the departmental training programs.

For those Officers in the five participating facilities, please encourage your family member(s)/significant other to participate in the educational programs as they are developed in response to the questionnaire. Watch for further information over the next months. Thanks in advance for your support of this important program.


John J. Armstrong, Commissioner
Connecticut Dept. of Correction


Donald Sevas, Staff Representative
AFSCME, Council 4


Michael Minney, President
AFSCME Local 391


David LaPointe, President
AFSCME Local 1565


David Moffa, President
AFSCME Local 387


Susan Lagassee, CEAP
EAP Contract Manager, ETP Inc.

The National Institute of Justice Grant Award #98-FS-VS-003 funds this program

already afraid [about taking it] because of confidentiality concerns—for example, [afraid about] reporting that their supervisors are a source of stress.

Parziale adds that the unions have taken a risk in supporting the program: “We’re going out on a limb if the program fails. People . . . could think the union sold out to management.”

Michael Minney agrees about the risk but for a different reason: “If officers don’t buy into the program and [do not] believe it to be confidential, they could give a false sense of security to DOC [by not reporting stress on the questionnaire].” However, union officers and DOC administrators alike believe that the FOCUS program may have spinoff effects that will improve labor-management relations in other areas. According to Parziale, “FOCUS is a way to collaborate, not fight.

FOCUS [union] committee members can [now] talk with deputy commissioners and wardens civilly on other issues because FOCUS got them working together.”

Unions, too, stand to benefit from a stress program

Unions increasingly ask for employee stress programs as part of their labor-management contracts with correctional administrators. In addition to securing an important employee benefit by including stress programs in the contract, unions benefit from a stress program because administrators may be willing to put suspensions or terminations on hold while they offer an officer a chance to go to the program and recover.

- According to Dennis Cullen, the Massachusetts DOC’s deputy director for employee relations, “In deliberations with the union on a proposed suspension, stewards may say they want to get the person into the Stress Unit, and I may put the suspension on hold until the person returns to work and functions productively or goofs up again.”
- According to Richard Ferruccio, second vice president of the Rhode Island Brotherhood of Correctional

According to Richard Ferruccio, second vice president of the Rhode Island Brotherhood of Correctional Officers, “The program helps us in disciplinary cases—we can represent the officer better by explaining that the person is getting help.”

Officers, “The program helps us in disciplinary cases—we can represent the officer better by explaining that the person is getting help.” Like a court diversion program, the union can sometimes delay a disciplinary hearing if the person is getting help: if the person remains in counseling, discipline is held in abeyance; if the person’s per-

formance is satisfactory after returning to work, the hearing is never held.

“Both parties win,” Ferruccio says:

“The employee corrects his or her behavior, and the department gets a better employee and doesn’t have to replace a valued worker.”

Outreach to Line Officers

Without effective outreach to make officers aware of the program, it will not be used. Outreach may not be a problem when the department mandates attendance at critical incident debriefings. However, for officers to initiate contact with the program, they must be familiar with what it is and does.

Departments that plan new programs need to keep several points in mind when marketing their services:

- gain the support of management and labor (see above) before attempting to win over line officers,
- make outreach an ongoing program activity, not a one-time effort,
- be patient, and
- use several strategies for making officers aware of the program.

Programs have used a wide range of approaches to encourage officers to use their services.

Letters

When sheriff’s departments first contract with San Bernardino’s Counseling Team, all staff receive a letter with their next pay check that presents the organization’s

A UNION PROVIDES STRESS TRAINING

The American Federation of State, County and Municipal Employees (AFSCME), an affiliate of the American Federation of Labor-Congress of Industrial Organizations (AFL-CIO), represents 130,000 correctional officers nationwide. Since 1989, AFSCME has sponsored a consultant, Roger Johnson, to provide 6 to 10 half-day seminars a year on "Stress Survival for Correctional Personnel" at the request of correctional conferences and workshops and national and local AFSCME conventions. Local AFSCME councils and employee assistance programs also request Johnson's services.

For AFSCME events, the national union or local union council pays Johnson's fee and travel expenses from its training and education budget. Employee assistance programs use their discretionary money to fund the seminars. Participants hear about the seminars largely by word of mouth or by talking with Johnson informally during the conventions.

Johnson is a retired New York City police officer with a master's degree in social work. He was assistant chief therapist for the New York City Police Department's Counseling Unit. A Marine infantry squad leader in Vietnam from 1965 to 1966, Johnson also worked in a Military Police unit at the Army disciplinary barracks at Fort Leavenworth. Currently, Johnson is director of programs for the Albany, New York, chapter of the National Safety Council.

Context

Johnson describes the effects stress can have on the mind and body to his audiences and discusses techniques for reducing stress, including progressive muscle relaxation, exercise, and meditation. Johnson turns out the lights and turns on a relaxation tape.

Johnson emphasizes that "stress is your responsibility—don't blame the system, take charge. Your response is what is critical, not what happens to you." When correctional officers say they are afraid to go to their EAP because they will lose their jobs, Johnson tells them, "That could be a form of denial. If you're under considerable stress, you don't have much to hold on to anyway. What's important is that you take some action."

Johnson tells the officers they have to lose their cynicism and negativity. "Prison isn't the world—you need to forget the prison; take your glasses off when you leave." However, this takes practice, he warns them.

Participant Reactions

Johnson's hope is that participants "take one or two things away from the workshop—for example, removing the salt shaker from the dinner table." Sergeant Dan Jensen from Wisconsin attended Johnson's session at a 1998 national AFSCME convention in Austin. "I had been disappointed in other stress workshops, but word of mouth said Roger's was good. It wasn't a lecture—do this and that to cope with stress; instead, he gave options and said you pick. As a result of the workshop, I now take 40 minutes to walk my dog after work, and I come to work early to use the inmate gym—and I lost 40 pounds. I've kept the weight off, and I feel less stress." Jensen reports he kept the booklet Johnson distributed on stress and still refers to it occasionally [pulling it out in 5 seconds for this interview].

Participants come up to Johnson after the seminars to ask him for referrals. He refers them to their clergy, Employee Assistance Program (EAP), or the Institute of Rational Emotive Therapy (RET) in New York City "because its approach is hands-on problem solving. Correctional officers don't want psychological mumbo jumbo," Johnson says; "they want to take control of their problems." The institute headquarters can refer callers to trained therapists all over the country.

services and explains how to access them. Any Massachusetts DOC officer being disciplined (e.g., for tardiness) is made aware of the Stress Program in the letter of discipline.

Inservice training

The Counseling Team and Rhode Island's Family Service Society conduct outreach during inservice training.

Academy training

The Massachusetts DOC Stress Unit sends male and female peer supporters to give a 2-hour presentation to every new academy class. The male staff member, a former heavyweight boxer well known in the area, makes clear that the program is not for "wimps." The female staff member makes clear that the program is also for women. When one officer needed to see a program staff member 2 years later, he still had the telephone number from his academy packet.

Schmoozing

Counseling Team staff do "jail-alongs," hanging out with officers and having coffee. By chatting with officers they used to work with, the peer supporters in the Massachusetts DOC's Stress Unit get to meet new officers.

Brochures

Texas' Post Trauma Program distributes brochures about the program to officers during inservice training. The Riverside County Sheriff's Department distributes an attractive flier on its Peer Support Program to every employee (see appendix E).

Postings

Mark Messier, the Rhode Island DOC Stress Unit coordinator, sent a memorandum to every warden and deputy warden asking them to post an attached updated list of peer supporters in visible areas in their buildings. The list provides each peer's name, building, shift, telephone number, and pager number. The list of Stress Unit pro-

When sheriff's departments first contract with San Bernardino's Counseling Team, all staff receive a letter with their next pay check that presents the organization's services and explains how to access them.

gram coordinators and lead facility peers are posted on bulletin boards and central control areas of the five Multnomah County jails.

Announcements

When the Massachusetts DOC Stress Program moved to a new location in 1985, the superintendent sent a memorandum to all staff advising them of the move and reminding them that—

This program is open to all Department of Correction staff and their families. Referrals will be treated with the utmost confidentiality. The administration and Union are strong supporters of the Stress Program because it has been a great educational and treatment tool.

The memo ended with the instruction, "TO BE READ AT ROLL CALL FOR THREE (3) CONSECUTIVE DAYS."

Badges

While responding to a critical incident, Texas unit team members wear badges that read "Unit Staff Support Officer" and show the peer's last name.

The best sales approach remains word of mouth. Officers in the Massachusetts DOC ask other officers, "Who's that guy who comes into the Charles Street Jail?" "Tom McNeeley." "What's he doing here?" "Talking with an officer who's having some problems." "Oh. How do I reach him?"

Involving Family Members

Working in a prison or jail can take a tremendous toll on a correctional officer's family and significant others—even when it does not affect the officer. Family members may experience stress because

- rotating shift work and overtime disrupt family activities;

- the officer needs to feel in complete control in the home (“Your kids aren’t inmates,” one wife told her husband after he barked orders at his children);
- they are afraid the officer will be hurt or killed;
- the officer *has* been hurt; or
- their friends and other family members think all officers are brutal Neanderthals.

Because family members are often the first to recognize when an officer needs help, they can also play a crucial role by encouraging the officer to seek assistance before the problem becomes severe.

back there to work again.” So I asked Nancy [Bohl] if the officers could bring their family members to any individual counseling they went for. The staff appreciated that opportunity.

Finally, because family members are often the first to recognize when an officer needs help, they can play a crucial role in encouraging the officer to seek assistance before the problem becomes severe. Family members are more likely to recognize stress and refer the officer to help if the signs of stress-related problems and the availability of services to treat these difficulties

have been properly explained to them. (See the box “A Wife Describes the Spouse Academy.”)

Why involve family members?

By training, counseling, and otherwise supporting family members, stress programs can do much to ensure that these husbands and wives not only receive the help they need but also remain or become sources of support rather than an additional source of stress for their officer spouses. Family members can add to an officer’s stress if they resent the officer’s odd hours, moodiness, or unwillingness to share experiences on the job, or if family members keep expressing their fears about the officer’s safety. Cathy Carlson, the Safety Office return-to-work coordinator for the California Youth Authority, reports that,

After inmates killed a civilian employee, a lot of wives said to their husbands, “You’re never going

The Collier County (Florida) Sheriff’s Office’s Spouse Academy

The Collier County Sheriff’s Office manages two jails with a rated capacity of 754 inmates supervised by 189 correctional officers. The department used a Corrections and Law Enforcement Family Support (CLEFS) grant from the National Institute of Justice to develop a stress prevention and reduction program for correctional and law enforcement officers. When the grant ended in

A WIFE DESCRIBES THE SPOUSE ACADEMY

Carol Johnson, the wife of a correctional officer, attended one of the Collier County Sheriff’s Department Spouse Academies. Johnson went because she wanted to know what went on with her husband’s work. “The most important benefit was that it felt good to learn what to do if my husband is involved in a critical incident.”

Johnson also learned that officers could make three free visits to see Riccardo Rivas, a psychologist who led some of the sessions. Johnson went home and encouraged her husband to make an appointment with Rivas because the officer was experiencing considerable stress after having failed by five points the academy test to become dually certified as a peace officer. In addition, they had a new baby to contend with. “If I hadn’t attended the academy,” Johnson said, “I would not have referred him because I wouldn’t have known about the free counseling.” Johnson’s husband went. Later, he told his wife it was helpful. Since going, Johnson has noticed that he relaxes more and takes the dogs out for more frequent walks. “Some nights he comes home and, instead of conking out, takes the baby out with the stroller. Last night he said he wanted to go out with his cousin for 2 hours.”

What was the reaction of Johnson’s husband to his wife’s attending the academy? “He felt it was good I went—he was proud; he even walked in with me to register.”

December 1998, Sheriff Don Hunter continued to fund one component, a semiannual Spouse Academy for the wives and husbands of correctional and law enforcement officers.

Hunter personally sent every officer's spouse a letter announcing the availability of the academy, stating, "The academy . . . will also provide me with a means to ensure an agency climate with less stress for each of us." Spouses were given two options: an academy held from 6:00 p.m. to 8:30 p.m. on four consecutive Wednesdays and an academy held from 9:00 a.m. to 2:00 p.m. on two consecutive Saturdays. Edward Ferguson, the agency's career development counselor, reports that some women telephoned, saying, "I'm officer so-and-so's significant other, and I heard of this academy. Can I come, too?" Ferguson accepted them, as well.

Each of the academies enrolled more than 35 family members. Ferguson ran the academies. Acey Edgemon, a corrections lieutenant, facilitated and taught in the academies. Exhibit 5-2 is an outline of the academy content. As shown, the academy addressed the psychological makeup of law enforcement and correctional officers, critical incident stress management, and services available under the agency's employee assistance program.

Snacks, lunch, and child care were provided at the academies. Each participant also received a comprehensive notebook of materials on stress reduction and agency benefits and materials provided by Concerns of Police Survivors (COPS).

Hunter spoke at the beginning of each academy. At the end of the course, he handed each graduate a certificate of attendance and a photo ID card stating that "I, Don Hunter, Sheriff of Collier County, hereby certify that _____ is a Family Member of Collier County Sheriff's Office."

Edgemon reported that "spouses on their registration forms told us over and over that they had no idea what their husbands and wives did in the jail—they were outside the loop. So we offered them a tour of the jail after the academy was over."

EXHIBIT 5-2. ACADEMY OUTLINE

ACADEMY OUTLINE

1. Introduction
 - Sheriff
 - Instructors
 - Schedule of speakers
 - Rational for Spouse/Family Academy
2. C.C.S.O.
 - Mission Statement
 - Structure
3. Psychological makeup of Law Enforcement/Correctional Deputies
4. Sheriff's Office programs designed to meet the needs of our Deputies
 - Pre-employment
 - Liberal Employees Assistance Program
 - CISM
 - Pre-incident
 - Post-incident
 - Training in stress management
5. How functional law enforcement agencies operate
 - Family concept
 - Information flow is essential
 - Conflict resolution
6. What to expect after the critical incident
 - Family involvement
 - Deputy rehabilitation
 - COPS
7. Sheriff's Office benefits package
 - Budget
 - Insurance
 - EAP
 - Retirement/Financial facts

(THE ABOVE OUTLINE WILL COVER THE 10 HOUR TIME PERIOD ALLOCATED FOR THE WEEKLY ACADEMY AND THE WEEKEND ACADEMY)

Riccardo Rivas, one of seven psychologists on the agency's insurance carrier list and a principal speaker at the academy, offered his clinical services. As a result, two officers' wives made appointments to see him after attending the Spouse Academy, one making a total of eight visits over 2 months. Since the academies were held, "We had about a dozen officers asking when the next one is because they want their spouses to attend," Edgemon reports. "About a dozen spouses called, too."

Hunter plans to spend \$3,000 for each of two more spouse academies to cover Rivas' fee, food for participants, materials, and postage. Hunter feels the academy provides two benefits.

First, it removes the anonymity of the agency because the spouses get to meet some of its administrators [including Hunter], and they gain confidence that the agency can take care of its spouses' needs.

Second, a spouse academy can instruct the officers' husbands and wives in specific types of stress management they can practice in their daily lives and with their [corrections] spouses. When officers know they can talk to their spouses about work problems, and when the spouses are interested and have finesse responding, the officers' stress levels are reduced.

Why are these two goals important?

Many officers bring their family problems to work and vice versa. If I can create cohesion in the family and galvanize a relationship, it makes for a healthier organization. A healthier organization

"If I can create cohesion in the family and galvanize a relationship [by offering a Spouse Academy], it makes for a healthier organization. A healthier organization can lead to reduced sick time, which reduces the need for overtime and the cost of corrections to the taxpayer."

— Collier County (Florida)
Sheriff Don Hunter

can lead to reduced sick time, which reduces the need for overtime and the cost of corrections to the taxpayer.

Gaining the participation of administrators, unions, officers, and family members is only part of the work involved in making the stress program a success. The following chapter identifies three other activities programs must successfully undertake to function effectively.

Note

1. For further information about the Connecticut Department of

Correction FOCUS program, contact Michael McGarthy, Personnel Officer, Central Office, 24 Wolcott Hill Road, Weathersfield, CT 06109, telephone number (860) 692-6808; or Lawrence Mens, Contract Manager, E.T.P., Inc., 111 Founders Plaza, East Hartford, CT 06108-3212, telephone number (800) 767-6171.

Chapter 6: Three Other Keys to Program Success

KEY POINTS

In addition to finding topnotch staff and gaining the involvement of key participants, stress programs need to tackle the following three activities if they are to be fully effective.

- Programs need to convince officers they can trust the program to maintain confidentiality.
 - Clinicians are required to keep records confidential. However, there are circumstances in which counselors must report what clients have told them.
 - Because they are unlicensed, peer supporters have no legal protection if their department or a court orders them to reveal conversations with fellow officers.
 - There are ways clinicians and peer supporters can maintain records of their contacts with officers and still maintain confidentiality.
- Debriefings should be only one of several responses to critical incidents.
 - Some clinicians and researchers argue that, by themselves, critical incident debriefings do not prevent long-term stress among trauma victims.
 - Critical incident debriefing experts report there should be multiple responses to reducing stress after a critical incident, ranging from humanitarian assistance, to educational debriefings, to followup individual counseling, to return-to-work strategies.
- Departments need to address the stress stemming from the corrections organization itself.
 - Some corrections departments have reduced stress through organizational change.
 - The principal areas in which departments can reduce stress relate to shift work schedules, understaffing, and mandatory overtime.

In addition to the importance of staffing the program properly and securing the participation of administrators, union officials, line officers, and family members, stress programs will not be fully effective unless they secure officers' trust in the staff members' ability to keep information confidential; provide an array of followup services after critical incidents, not just debriefings; and work with the department to reduce organizational sources of stress.

This chapter describes how stress programs have tackled each of these undertakings.

Securing Trust: Guaranteeing Confidentiality

The perception and reality of confidentiality are the most indispensable requirements of any stress program's

effectiveness. If officers suspect program staff are reporting them to supervisors without permission, the program's reputation will be quickly killed within the entire facility or department. However, the rules of confidentiality are different for licensed clinicians and peer supporters.

Clinicians

As a general rule, State law considers information that clients give to licensed mental health practitioners to be privileged communication that the counselor may not share with anyone else without the client's permission.¹

As Ellen Kirschman, a psychologist who treats law enforcement officers, notes, "Licensed mental health professionals are *required* by statute and their professional codes of ethics and conduct . . . to keep all records confidential. If they do not, they risk losing the license they need to practice, and they open themselves up to lawsuits."²

The perception and reality of confidentiality are the most indispensable requirements of any stress program's effectiveness.

Clinicians, and stress programs that use clinicians, can take special steps to ensure that client communications and records remain confidential:

- Minimize or refuse mandatory referrals (see the box "Accepting Mandatory Referrals Carries Risks").
- Secure informed consent from all clients at the beginning of the first counseling session.
- Prepare and disseminate a written confidentiality policy.

For example, the Rhode Island Department of Corrections "Operations Memorandum on the Departmental Stress Program" notes that

. . . it shall be the policy of the department to insure that all employees who participate in the program shall remain anonymous . . . and all records shall be kept strictly confidential. Only in the event of extreme danger to life or serious bodily harm to the employee, or to others from the employee, can information be revealed, and only to prevent said danger.

As the policy statement suggests, there are circumstances in which mental health professionals must by law break confidentiality:

THE IMPORTANCE OF KEEPING CLINICAL RECORDS

To make sure their services remain confidential, some clinicians may be tempted to keep no records. However, counselors must maintain appropriate client records to ensure good client care,* provide evidence of a clinician's use of appropriate treatment in case of a lawsuit (e.g., after a client commits suicide), and meet the requirements of some State statutes and licensing boards.

Jon Benson, a clinical psychologist who has treated officers from the Multnomah County jail, reports that "I keep regular notes [on the officers]—a treatment plan, log, issues addressed—in order to meet State and ethical standards [for proper and effective treatment]."

In addition to keeping proper records, it is critical to store them properly—that is, keep them physically inaccessible to anyone but authorized individuals. Programs need a written policy for how the information will be stored, who may have access to it, and how they gain access (e.g., by computer code, lock combination). Programs can consult with professional counseling organizations, including The Counseling Team and Family Service Society, for suggestions about how to write a watertight policy.

* Section 1.23 of the American Psychological Association's "Ethical Principles of Psychologists and Code of Conduct" (Washington, D.C.: n.d.) states, "Psychologists appropriately document their professional and scientific work in order to facilitate provision of services by them or by other professionals, to ensure accountability, and to meet other requirements of institutions and the law."

- If the client is a threat to someone else, the counselor must warn the intended victim and the police.
- If the client reveals he or she is abusing a child or elderly person, the counselor must tell the appropriate protective service agency and the police.
- If the client is suicidal, or so disabled that he or she cannot care for him- or herself, the counselor must take steps to find support for the person.
- If counselors treat clients for a work-related emotional injury, they must submit monthly reports to the workers' compensation agency, and these files become public record.³

Clinicians and peer supporters may also be obligated by State law or department policy (as well as by ethical concerns) to report information that relates to institution security.

Bonni Rucker, an assistant warden and Regional Staff Support Team member with Texas' Post

Trauma Support Program, gave an example in which confidentiality was legitimately broken.

There are circumstances in which mental health professionals must by law break confidentiality.

I helped run a debriefing after a trailer full of inmates on a work assignment tipped over. Before the debriefing, the officers involved were very upset at having messed up, but then they heard that the inmates were faking their injuries. As a result, at the debriefing the officers talked about getting back

at the inmates. I tried to steer the officers in a positive direction in terms of their obligation to follow the department's policy to take any inmate who says he or she is sick to medical for treatment. But I also told the warden [what the officers were saying]

because of the risk of injury to the inmates. As a result, the warden did not let the inmates return to work for several days until tensions died down.

Confidentiality is a complicated issue for peer supporters.

Peer supporters

Confidentiality is a more complicated issue for peer supporters. On the one hand, no program involving the use of peer supporters will survive if peers talk about individuals they support to other people. On the other hand, unless specifically addressed by State statute, communication between peer supporters and correctional employees is never privileged conversation under the law, regardless of department rules, because peers are typically not licensed mental health professionals. As a result, supervisors and courts have the legal right to ask what was said during these conversations.

Departments also cannot offer immunity from civil and criminal litigation to peer supporters who co-lead a debriefing and are later asked to testify at departmental hearings or in civil or criminal proceedings about what they heard. Participants in debriefings should be told this and warned against making comments that could be construed as admissions of wrongdoing, such as "If only I had . . ." or "I should have. . . ." Licensed clinicians who conduct debriefings are protected, however.

As with licensed counselors, peer supporters have a positive duty to report when employees being offered support appear to be a danger to themselves or others or say they

ACCEPTING MANDATORY REFERRALS CARRIES RISKS

If a program accepts mandatory referrals, correctional supervisors may demand to be kept informed of whether an officer sought assistance, is making progress, or is fit to return to duty* because the department, not the officer, may be considered the client. As a result, the Rhode Island DOC's "Operations Memorandum on the Departmental Stress Program" notes that participation in the Stress Unit is strictly voluntary and "an employee's decision to participate/not participate in stress counseling activities shall have no bearing on the established disciplinary process."

* Appelbaum, P.S., and T.G. Gutheil, *Clinical Handbook of Psychiatry and the Law*, second edition, Baltimore: Williams and Wilkins, 1991: 5.

EXAMPLES OF WHAT TRUE CONFIDENTIALITY MEANS

- Patricia Carr is the wife of John Carr, the Rhode Island DOC Stress Unit clinical supervisor. As a peer supporter and a licensed clinician with the DOC, she says, "Officers come to me and say, 'John must have told you what a mess I was in,' but John doesn't tell me anything, and I don't tell him about the officers who seek my help."
- According to Mark Messier, coordinator of the Rhode Island DOC Stress Unit, "Guys I've helped 11 years ago come up to thank me, but I pretend I don't know what they mean to protect them. Later, I take them aside and tell them not to expose themselves—or me. People in an inservice class have yelled when I explain that I have helped officers deal with marital problems, 'Yeah, that was me!' and I have to play dumb to keep the other officers' confidence that the program is confidential."
- Richard Harding, a Massachusetts officer who has used the Peer Stress Unit, reports that "Dick Gould [a Stress Unit peer] has never—and I mean never—discussed another client with me."

have committed child or elder abuse, domestic violence, or a felony. According to Sergeant William Gatzge, a coordinator with the Multnomah County Peer Stress Program, "Confidentiality is the most talked about issue and concern [among officers]. But we've never had a breach yet. But, if someone gets into saying they're suicidal or doing illegal acts, I tell them, 'this won't stay confidential.'"

Pressure to reveal information

Mark Messier, the peer coordinator of the Rhode Island DOC Stress Unit, says, "Supervisors occasionally ask me what's going on with an officer, or when is he coming back to work, and I tell them I don't know." Supervisors sometimes also ask department benefits administrators when officers will be coming back to work.

PROGRAM LOCATION IS IMPORTANT TO CONFIDENTIALITY

The program's offices need to be accessible yet private.

- The Counseling Team's main office in San Bernardino is located in a three-story office building with other agencies and businesses.
- Rhode Island's Stress Unit office provides 24-hour access and it is only 1 or 2 minutes' drive from every facility. The office is in the central distribution building where officers come to pick up uniforms and supplies. The only indication the program office is located in the building is a cryptic sign which reads, "DSU" (Department Stress Unit).
- The Massachusetts Stress Unit's main office is located in a National Guard Armory 3 miles from the nearest correctional institution.

Both The Counseling Team and Post Trauma Resources (PTR) have branch offices. For example, PTR has part-time satellite offices in small towns within a 20- to 60-mile radius of its main office in Columbia. In one office, the organization shares with a chaplain space donated by a hospital. In the other locations, PTR rents shared space with other organizations. The satellite offices enable PTR staff to provide ongoing counseling to personnel in correctional agencies and other organizations for whom traveling to Columbia would be difficult or impossible.

Barry Levin, Rhode Island's DOC human resources assistant director, reports, "I get pressure from some supervisors asking why an officer is not back at work yet. Some deputy wardens tell me how much it's costing them in overtime to cover for the officer. I tell them the person isn't ready yet."

John Near, the South Carolina DOC's director of personnel, says that some supervisors call him and say, "So and so has been out of work 6 months, and I just saw him at the grocery store. What's up?" Near then calls Lawrence Bergmann, director of Post Trauma Resources (PTR), who may say to Near, "The officer's physical appearance is not the whole story" or "This is news to me; maybe he *is* ready to come back." Near calls the supervisor back to relay Bergmann's response but emphasizes that the decision to return is PTR's call.

Reporting

Reporting can be a concern in terms of maintaining confidentiality. For example, to get reimbursed, PTR counselors have to send clinical information to the workers' compensation provider. As a result, Larry Bergmann has developed a special form (see exhibit 6-1) to minimize the information his staff have to provide. Post Trauma Resources counselors always warn clients of this obligation. Ruth Ellis, one of the counselors, reports that "Plenty of clients are concerned about what goes into the note that I send, so I let them see what I have written."

The discussion of monitoring in chapter 7, "Evaluation, Funding, and Technical Assistance," provides detailed information about reporting procedures that provide useful information to administrators and coordinators without compromising officer confidentiality.

The bottom line on confidentiality

To minimize legal complications and avoid jeopardizing the entire stress program, program staff should consult with a local attorney regarding their State laws and applicable court rulings pertaining to confidentiality.

Scientific studies conducted with emergency service personnel suggest there is no difference in terms of long-term psychological health between individuals who have experienced a traumatic event and received a debriefing and similar individuals who have not been debriefed.

Multiple Interventions May Be Needed After a Critical Incident

Critical incident debriefings are intended to provide immediate support and referral to professional counseling services to reduce the chances that employees will develop long-term emotional problems.

An unproven intervention

It appears that debriefings may not help to prevent long-term emotional problems among trauma victims. While many victims report feeling better after a debriefing, scientific studies conducted with emergency service personnel suggest there is no difference in terms of long-term psychological health between individuals who have experienced a traumatic event and received a debriefing and similar individuals who have not been debriefed. Some researchers feel there is convincing evidence that debriefings can even be harmful in some cases for some participants.⁴

Researchers have also suggested that most individuals exposed to critical incidents—especially those without preexisting emotional problems—do not develop serious stress reactions or other symptoms.³ In fact, exposure to a critical incident may have positive effects for some individuals, including emotional growth and feeling more experienced about life, more self-assured, and more competent. As a result, debriefings, these researchers argue, should focus on survivor strengths, coping skills, and the use of social support. This suggests that debriefers should remind participants that most officers do well after a critical incident and should use the debriefing to identify who needs help rather than using the debriefing to provide help.

The empirical research that casts doubt on the effectiveness of debriefings has not been conducted with correctional officers. The nature of correctional work is different in important respects from the work of firefighters, emergency medical technicians (EMTs), and other public safety personnel—the types of individuals with whom debriefings' effects have been researched. Correctional

EXHIBIT 6-1. POST TRAUMA RESOURCES SESSION—PROGRESS NOTE FORM


Post Trauma Resources
"Solutions for Life's Toughest Problems"

Session -- Progress Note

Client Name: _____ **Date:** _____

A. Reported Symptoms

<u>Symptom/concern/complaint</u>	<u>Severity (1-10)</u>	<u>No Change Worse/Improved</u>
Orientation		
Suicidal/Homicidal Ideas/Plan		
Anxiety		
Dysphoria		
Trauma-related concerns		
Reexperiencing		
Withdrawal		
Psychophysiological		

B. Session Content

Homework Assignment Review

Problem-Solving

Information Giving

Skills Building and Practice

Supportive Techniques

Transference/Countertransference Issues

Cognitive Management

Ventilation

Conflict Management/Communication

Art/Play Therapy

Homework Assignment Given

C. Follow-Up/Collateral Contacts

Signed: _____

PREVENTION IS BETTER THAN CURE

Some stress programs attempt to “inoculate” correctional personnel against stress during academy training. However, according to Lt. Gary Cornelius, programs and recreation supervisor for the 1,200-bed Fairfax County (Virginia) Adult Detention Center, most recruits are not ready to believe they will experience stress on the job. The best time to reach them for prevention purposes, he says, is after they have been on the job for 6 to 8 months and have experienced some of the stresses but are not yet burned out.

Cornelius, the author of the American Correctional Association’s (ACA’s) book *Stressed Out: Strategies for Living and Working with Stress in Corrections* (see chapter 7 in this report, “Evaluation, Funding, and Technical Assistance”), conducts a 1-day inservice training session for ACA member departments. Cornelius’ training capitalizes on the first-hand experience of correctional officers (and other personnel) in prisons to provide them with strategies for avoiding stress, or reducing the consequences of stress, before stress-related problems become debilitating. In addition to discussions of the nature of stress and coping mechanisms, Cornelius talks about how stressed-out correctional workers are prone to inmate manipulation and how good stress management can improve institution security.

San Bernardino’s The Counseling Team conducts similar inservice training for the sheriff’s departments and State institutions it serves. Supervisors typically request the team to provide sessions on specific topics, such as staff emotional involvement with inmates.

officers are also different from the victims of natural disasters who have been studied. For example, after an inmate attack, officers typically go back to spending at least 40 hours a week locked up with members of the very same population that has attacked them. As a result, it is possible that some of the research that has found that debriefings do not benefit trauma victims may not apply to correctional officers. Nevertheless, it remains true that there have been no scientific studies that show that debriefings are effective in helping correctional officers cope with critical incidents.

Potential benefits of debriefings

While there is no evidence that debriefings can, in the long run, relieve the emotional consequences of critical incidents among correctional officers, there is anecdotal evidence that debriefings can provide three other benefits to some officers.

“I went home at 4:00 a.m. and sat in the bath debating whether I had failed. I expressed this concern during the [debriefing] session. What helped was other people telling me, thanks to you this and this happened. . . . The session helped build my confidence to return.”

*— the charge sergeant
during the Mohawk riot*

First, debriefings may relieve inappropriate feelings of guilt. For example, when a teacher was raped by an inmate, another teacher who did not leave the classroom to go to her aid when he heard the screams felt extremely guilty. At the debriefing, he felt some relief when he was told he should not have left to get help because there was an open toolbox in his room to which inmates could have gained access.

According to Susan Cooper, who co-led six debriefings after a major riot at the Mohawk prison in New York State, “[T]he dispatchers who came to the debriefings had feelings of helplessness

and guilt because they had heard what was going on [during the riot] but had been unable to be there [at the scene]. The officers gave them terrific support to relieve their guilt [feelings].” The chart sergeant during the Mohawk riot reported, “I went home at 4:00 a.m. and sat in the bath debating whether I had failed. I expressed this concern during the session. What helped was other people telling me ‘thanks to you this and this happened.’ So I

SHOULD SUPERVISORS ATTEND—OR LEAD—DEBRIEFINGS?

Most experts believe debriefings should not mix ranks. However, some debriefings involve ranking officers as participants or leaders. For example, an assistant warden in New York State attended a debriefing because the warden wanted to set an example of a top administrator participating to make clear the department approved of the process. After the negotiated release of an officer whom an inmate had taken hostage, Richard Watkins, a Texas warden, reported, "I went to the first debriefing, too," adding, "There is no support system for wardens."

A line officer who attended a debriefing that was co-led by a captain reported that

Even though the captain was great, I would not use them in the future. Even if they come from another facility, supervisors are supervisors, while lieutenants are thinking about becoming captains [and are therefore not entirely trustworthy in terms of keeping what they hear confidential]. You need to keep the supervisors out in the future and separate the ranks.

Another line officer reported, "As soon as I saw a captain there [as one of the debriefers], I lost faith in the process."

All ranks come to the same debriefing held by the Multnomah County Sheriff's Department's peer debriefing team. However, the trauma team sounds out the line officers in advance to make sure they are comfortable with having ranking staff present. The one time line officers expressed concern, the debriefing team held two separate debriefings.

got support at the session from the others. I would go again. The session helped build my confidence to return."

Second, debriefings can quash rumors and let everyone know what actually happened. Elaine Smith, coordinator of Texas' Post Trauma Staff Support Program, reports that "rumors fly without a debriefing in which everyone learns what actually happened." An officer who was very hostile to his corrections administration said, "I still benefited from it [the debriefing]. I was able to connect my experience [during the riot] with what everyone else was doing. I got a fuller picture of what happened and understood what happened better. I hadn't known what happened in the other parts of the riot."

Finally, debriefings demonstrate that the administration cares. A New York State correctional officer said after a debriefing following the Mohawk riot, "The most important benefit was knowing people here care enough to help out. Bob [the union president] first but the adminis-

tration, too." Deleta Jones, a Texas DOC officer taken hostage and held at gunpoint, said, "Initially I felt the debriefing was just another TDCJ [Texas Department of Criminal Justice] requirement, like filling out a report, so I might as well go. I didn't expect the leaders to be so supportive—really caring, not just going through the motions. They were genuinely concerned about the welfare of the employees."

While debriefings may provide these benefits, correctional administrators can conduct unstructured responses to critical incidents that may achieve the same goals. Furthermore, accord-

ing to Richard Gist, assistant to the director of the Kansas City, Missouri, Fire Department, who has researched and written extensively about debriefings, "An organization would be healthier if issues like these [quashing rumors, showing concern for personnel] were addressed every day as a part of competent management, command, and supervision."

"Programs must go beyond simply providing a debriefing to include a 'menu' of post-trauma interventions and activities."

— Larry Bergmann, director,
Post Trauma Resources

POST TRAUMA RESOURCES MENU OF RESPONSES TO A CRITICAL INCIDENT

Post Trauma Resources (PTR) chooses from among a variety of interventions in helping officers and departments respond effectively to critical incidents. Below is a partial list of the organization's menu of available responses.

- *Telephone hotline*, providing 24-hour crisis counseling to all employees between the time the institution first notifies PTR of the incident and when the first onsite services are provided.
- *Telephone check-ins*, before going onsite, with individuals reported to have been most affected by the incident or to be currently experiencing emotional symptoms independently of the incident to make sure they are all right, to provide basic information about initial stress reactions, and to offer further help.
- *Humanitarian assistance*, including coordinating the benefits to which the individuals are entitled.
- *Immediate onsite response*, assisting employees in leaving the site of the incident, reconnecting with their families, and resting.
- *Crisis intervention*, involving spending time individually with critical incident responders.
- *Psychological debriefing*, the group meetings that have been the mainstay of critical incident response.
- *Educational debriefing*, more like a seminar or workshop that teaches basic information and support skills after an incident to individuals with less exposure to the crisis.
- *Post-trauma individual counseling* that focuses on developing the skills necessary to facilitate recovery.
- *Followup debriefings*, 10 days to 3 weeks after the initial debriefings, to determine who is experiencing continuing difficulties and refer them to counseling.
- *Telephone followup* to check in with officers and show continued concern for those still struggling with recovery.
- *Return-to-work strategies* for helping employees increase their exposure gradually to the prison or jail and tasks associated with the incident and for monitoring their reactions carefully.

A smorgasbord approach

Lawrence Bergmann and others recommend that, since there is no empirical research that shows debriefings help officers deal with trauma in the long run, a more promising response may be for programs to "go beyond simply providing a debriefing to include a 'menu' of post-trauma interventions and activities" (see the box "Post Trauma Resources Menu (PTR) of Responses to a Critical Incident"). According to Bergmann, "Factors used in making decisions for options include the magnitude and severity of the victimization, immediate needs of survivors, number of survivors that develop stress-related symptoms, and prior preparation of the organization to manage such incidents." After an incident in a South

Carolina prison in which three employees were taken hostage and three other employees were injured, PTR provided 10 responses, including a telephone hotline, an immediate onsite response, psychological and educational debriefings, a final onsite meeting, post-trauma counseling, and return-to-work assistance.

Finally, the response to critical incident stress should include organizational change within the DOC or sheriff's department designed to prevent similar incidents in the future or to improve the agency's response to future critical incidents. Departments also need to reduce organizational sources of *chronic* stress so that critical incidents do not become the final straw in a correctional officer's inability to cope.

STRIKING WHILE THE IRON IS HOT

The best time to institute organizational change is after a critical incident (e.g., riot, hostage taking, officer suicide) when administrators and local government leaders will want to be seen as individuals who care about the wellbeing of correctional staff and may therefore support steps to prevent a recurrence of the incident.

After inmates killed an officer at a California Youth Authority facility, staff blamed management for the murder because they felt the killing would not have occurred if there had been adequate staff on duty. After 2 weeks of debriefings, Nancy Bohl suggested to upper management that the department should get staff involved in the institution's policymaking process to reduce the officers' anger. As a result, the facility broke the staff into several groups, assigning each group to examine one department policy and recommend how it could be improved. The Youth Authority then implemented the feasible suggestions. According to Cathy Carlson, the facility's Safety Office return-to-work coordinator,

It was a terrific idea. For example, the facility used to have inmates go to the Youth Authority hospital and crowd into the waiting room, tying up officers who had to transport the inmates and leaving their facilities short staffed. One staff group said, why not have a nurse go to the facilities and have onsite sick call? We implemented the change.

Bohl also recommended that the superintendent and assistant superintendent make themselves visible—"talk to the staff, go to the control centers, let them know you're here just as they are." They did. Later, Carlson and the assistant superintendent brought food they baked to the institution on Thanksgiving and Christmas. "We piggy-backed this idea off Nancy's idea to be visible," Carlson said. "Staff have said to me, 'My gosh, the super was in the control center at 6:00 a.m. this morning and actually chatted with me.'"

Reducing Organizational Sources of Stress

Correctional agencies themselves can be a significant source of stress for many officers. Interviews with individual officers conducted for this publication and surveys of correctional officers (see chapter 2, "The Extent and Sources of Correctional Officer Stress") have documented that organizational sources can cause significant stress for many officers including

- rotating work shifts,
- lack of opportunity for career advancement,
- frustration with supervisors' leadership styles and demands,
- understaffing, and
- mandatory overtime.

Despite obstacles, some programs have addressed sources of stress attributable to the way correctional systems operate.

Barriers to changing the organization

Unfortunately, stress program staff and volunteers often lack the time to work with management to eliminate organizational sources of stress. Some program directors feel they have to maintain scrupulous neutrality between labor and management, and suggesting

organizational changes might make them seem pro-labor. The Massachusetts Stress Unit's charter includes a statement that because of "its unique involvement with the employee, [the Stress Program] shall not take any role adversarial against the Management or the Union, and will maintain impartiality and neutrality with groups or causes unacceptable to Management, labor representatives, and Department employees."

Despite these obstacles, some programs have addressed sources of stress attributable to the way correctional systems operate. (See the box "Striking While the Iron Is Hot.") Indeed, the supervisory training discussed in chapter 4 is an organizational response to officer stress.

Organizational changes departments have implemented to reduce stress

Administrators in several departments have taken steps to modify their organization's operating procedures.

Make overtime voluntary

In 1999, the West Virginia Department of Corrections Commissioner locked down a prison for 8 days to alleviate stress on overworked staff. The prison administration had required officers to stay on the job to work the next shift several times a week. Some of the officers were sleeping in their cars. The commissioner informed the officers that overtime at the facility was strictly voluntary.⁶

Improve the shift schedule

An organizational development specialist with The Counseling Team suggested a 3–12 shift arrangement to one sheriff's department—working three 12-hour shifts and then having 3 days off. The specialist distributed a questionnaire to nine sergeants asking them how the new plan would affect them. The sergeants opposed it because they would never see each other. As result, the department changed the plan to 5 days on, 7 days off. The union agreed to modify the collective bargaining agreement to accommodate the change. Officers find the new arrangement is like having a mini-vacation every other week.

Show sensitivity to the work of high-stress correctional units

According to Ed Owens, deputy director of support services for Texas' Institutional Division, supervisors learned from the Post Trauma Staff Support Program that members of the tie-down team handling executions needed to be encouraged to rotate out of the assignment if they grew to dislike it because some of them, although they had become uncomfortable doing the work, were afraid to report that they did not want to do it anymore. Post Trauma Resources reported to the South Carolina DOC that some correctional officers in the maximum security facility were experiencing sadness after executions because they had come to know the inmates on death row. As a result, the department moved the execution site to another facility. The Rhode Island DOC has John Carr, director of the Family Service Society, coordinate the

bimonthly inservice training for the DOC's crisis negotiation team. Carr talks to staff during the training, sending a message that the DOC understands that what they do is stressful, that some of them may have difficulties coping, and that help is available if they need it. Other positions that may create unusually severe stress include those of disciplinary hearing officer, working the receiving area and mental health and protective custody units, and working the complaint desk in a jail.

Still other organizational changes departments can take to reduce officer stress include—

- Providing adequate training when a jail changes to direct supervision.⁷
- Conducting team building exercises involving correctional officers and teachers, officers and medical staff, and officers and other nonuniformed employee units so the officers can understand the programming and medical needs of the civilian units, and civilian staff can understand the custody concerns of officers.
- Training newly promoted officers to perform well in their new positions.
- Providing debriefings for officers who fail to get promoted to discuss why they were passed over and to let them share their disappointment and frustration.

No matter how well structured and well operated a stress program may be, without convincing evidence that it benefits officers and the department, it may experience funding cutbacks or even be jettisoned. The final chapter which follows suggests methods of evaluating the program and securing adequate funding.

Notes

1. Appelbaum, P.S., and T.G. Gutheil, *Clinical Handbook of Psychiatry and the Law*, second edition, Baltimore: Williams and Wilkins, 1991: 5.
2. Kirschman, Ellen, *I Love a Cop: What Police Families Need to Know*, New York: Guilford Press, 1997: 182.

3. Kirschman, *I Love a Cop*, 183–185.

4. See, for example, Gist, R., and B. Lubin (eds.), *Response to Disaster: Psychosocial, Community, and Ecological Approaches*, Philadelphia: Taylor and Francis, 1999.

5. Individuals with preexisting emotional problems may be more vulnerable to severe stress reactions after a

trauma. Debriefers and counselors should try to identify these individuals and provide special care for them.

6. "Commissioner Locks Down Prison to Improve Staff Morale," *The Corrections Professional* 3 (20) (1998): 2.

7. Bickle, Bruce, "Stress and the Direct Supervision Jail Officer," *American Jails*, September/October 1998: 66–70.

Chapter 7: Evaluation, Funding, and Technical Assistance

KEY POINTS

- Monitoring program activities is essential for convincing administrators to support the program and for learning how it may need to be improved.
- Conducting an impact evaluation is also important for learning whether the program is achieving its goals and for convincing administrators to continue to fund—or increase funding for—the program.
 - An evaluation by the Connecticut Department of Correction involves surveying 4,100 employees to compare before-and-after self-reported stress levels, absenteeism, drinking behavior, intentions of resigning, and other attitudes and behaviors.
 - Using department records, the Collier County (Florida) Sheriff's Office compares before-and-after rates of absenteeism, sick time, job-related accidents, and disciplinary reports among officers, and compares the findings with those for officers in another sheriff's department that has no stress program.
- Logic suggests that stress programs save departments of corrections and sheriff's departments money by reducing sick time and stress-related disability retirements. A few empirical studies add concrete evidence to this hypothesis.
- Most stress programs share certain cost elements, such as personnel and trainer fees.
 - However, program costs among programs vary considerably, depending on how much programs rely on volunteers and in-kind services.
 - Some programs have obtained outside funding from State and Federal agencies and from officer unions.

A number of sources of help are available for setting up or improving a stress program, including program and government materials, articles, public and private agencies and associations, and stress program coordinators and correctional officer stress experts.

This chapter examines how to monitor and evaluate stress programs, how to estimate program costs, and where to get help in planning or improving a program.

Monitoring

Administrators of any program are often reluctant to monitor or evaluate their efforts because of lack of time, lack of expertise, or concerns about confidentiality.

However, as two very different correctional staff explain, tracking program performance is essential:

“The important thing [with providing stress services] is: How successful was the program?”

—Maria Houser, deputy commissioner for administration, Connecticut Department of Correction

“Jim Hollencamp [the Massachusetts DOC's Stress Unit coordinator] makes the [stress] program work

because he keeps all the statistics which validate the program. Without him, the DOC doesn't know it's getting its money's worth."
—Dick Gould, member of the Stress Unit

"The important thing [with providing stress services] is: How successful was the program?"

— Maria Houser, deputy commissioner of administration for the Texas prison system

Programs can collect and report several types of information related to professional counseling and peer support without breaching confidentiality, including—

- Number of clients or contacts.
- Nature of the clients' problems (e.g., domestic violence, alcohol abuse, marital difficulties, suicidal tendencies).
- Whether assistance was provided on or off duty.
- Type of client (correctional officer, civilian employee, family member, child).
- Number and types of referrals.

Unit staff support team members in Texas complete an incident log (see appendix F) on which they record—

- Date, shift, number, and gender of employees affected by a critical incident.
- The type of critical incident.
- Any medical attention that was required.
- The time involved in providing support.
- Whether the regional team was notified.

Unit team members turn in their logs to their unit team leaders. Unit team leaders submit the information to the regional team coordinator. Exhibit 3–5 in the case study describing the Texas Post Trauma Program in chapter 3 shows the annual report Elaine Smith, the program coordinator, submitted to the department for 1999 that incorporates these data.

Evaluation

Programs can implement two types of evaluations: a process (or formative) evaluation and an impact (or outcome) evaluation.

Process evaluation

When information gathered by program monitoring is used to judge the quality, adequacy, or appropriateness of program operations, the assessment is referred to as a process evaluation. The focus of a process assessment is the implementation of the program, not program impact. When Elaine Smith scans the Texas DOC's Emergency Action Center daily printout of serious incidents to make sure wardens activate unit teams whenever one of eight mandated types of incidents occurs, she conducts a process evaluation. Smith also sends questionnaires each year to the regional teams and facility administrators asking for comments on the program's effectiveness. The regional teams, in turn, obtain comments from officers who have participated in debriefings.

Another process evaluation goal is to determine whether supervisory training results in increased referrals to the stress program or employee assistance program (EAP).

Another process evaluation tool is to determine whether supervisory training results in increased referrals to the stress program or employee assistance program (EAP). Exhibit 7–1 displays data provided by the New York State Department of Correctional Services' EAP program indicating the dates on which it provided training to frontline supervisors (sergeants) in eight prisons

along with the number of officers and supervisors referred to the EAP during the 3 months before and 3 months after the training (excluding the month in which the training was conducted). By comparing the two sets of data, it is possible to determine whether referrals increased after—and presumably because of—the training. As shown, there was a slight overall increase from 20 referrals before the training to 25 after the training. Anecdotal information—often a valid source of data for a process evaluation—also suggests that referrals may have increased after the training. According to the State EAP assistant program manager, "Anecdotally, it appears that after supervisor EAP

training, referrals increase dramatically, but then they fall back.” According to an EAP coordinator who has conducted the training many times, “I’ve seen a big increase in referrals [since the training was first offered]. I’ve been [EAP] coordinator for several years and never had any before, and now I’ve had six in the last year.”

Impact evaluation

An impact evaluation is designed to show the effects a program has had on its clients and the department as a whole. Two examples of impact evaluations follow.

Connecticut Department of Correction evaluation

In 1999, the Connecticut Department of Correction planned a new stress program funded by the National Institute of Justice to offer officers seminars addressing five topics, such as parenting skills, financial management, and conflict resolution. Two evaluators from the University of Connecticut designed a questionnaire for measuring what the seminars achieve (see appendix G).

The evaluators will survey 4,100 employees in five facilities before the seminars begin. A followup survey will be given to the 1,000 officers who attend the seminars and to 300 randomly selected officers from among the 3,100 officers who fill out the initial questionnaire but do not

attend the seminars. The surveys will compare before-and-after self-reported stress levels, absenteeism, drinking behavior, intentions of resigning, and other attitudes and behaviors.

The evaluators will ask the officers to record a number on their answer sheet on both the pre- and post-questionnaire—the last four digits of their Social Security number, the last four digits of their home telephone number, and their birthday. These identifiers will not only enable the evaluators to compare individual officers in terms of initial and followup stress but also to compare stress levels among facilities.

The evaluators will not make adjustments for officers who answer the initial questionnaire but not the follow-up questionnaire—for example, because they were transferred to other prisons, retired, or were sick. These unavailable officers may be personnel who benefited from the seminars more or less than other officers (for example, if they retired because of stress). As a result, the survey findings may not be entirely valid.

Collier County (Florida) Sheriff’s Office evaluation

The Collier County Sheriff’s Office used a Corrections and Law Enforcement Family Support (CLEFS) grant from NIJ to develop and evaluate a stress prevention and

EXHIBIT 7-1. NUMBER OF REFERRALS NEW YORK CORRECTIONAL FACILITY SUPERVISORS MADE TO THE EAP DURING THE 3 MONTHS BEFORE AND AFTER SUPERVISOR TRAINING IN 1998

Correctional Facility	Supervisors Trained	Before Training	Month of Training*	After Training
Cape Vincent	8	1	0	0
Coxsackie	27	2	2	4
Gouverneur	8	1	1	1
Greene	30	2	0	3
Orleans	32	1	0	3
Otisville	10	10	2	8
Riverview	10	1	0	0
Watertown	7	2	5	6
Total	132	20	10	25

* Referrals during the month in which training took place may have occurred before the training, after the training, or both.

FOCUS GROUPS CAN HELP IDENTIFY CORRECTIONAL OFFICER STRESS

Departments of corrections and sheriff's departments can tailor their inservice stress training to their employees' particular needs if they first determine what the most serious sources of stress are for *their* employees—institution by institution.

As part of its new stress program, the Connecticut Department of Correction has asked the researchers who will evaluate the program's effectiveness to run 10 focus groups to identify what officers consider to be their primary sources of stress. John Rogers, one of the researchers, suggests that the focus groups will also serve as a marketing tool for the program: "As members share information about the program with their coworkers, this will increase officers' buying into the survey that will follow." The researchers developed a sampling plan for deciding which officers to include in the focus groups based on gender, race, shift, facility, rank (officers and sergeants), and length of service. The DOC agreed to arrange for the focus group members to participate on released time. The unions will hand out and collect the questionnaires.

reduction program for its correctional and law enforcement officers. The evaluators, two researchers from Florida Gulf Coast University, use agency records to examine changes before and after the program in terms of

- absenteeism,
- sick time,
- tardiness,
- job-related accidents,
- civilian complaints (primarily for road deputies),
- disciplinary reports, and
- positive supervisory reports.

The evaluators have already used three other before-and-after measures of program effectiveness:

- Stress measured by the Occupational Stress Inventory (OSI), Index of Family Relations (IFR), and Index of Clinical Stress (ICS).
- Alcohol- and drug-related problems as measured by the Michigan Alcoholism Screening Test (MAST).
- Overall personal health and job and family satisfaction as measured by a general health survey the evaluators developed.

A psychologist hired under the grant administered the tests to 33 law enforcement and 44 correctional officer

recruits during their preacademy training and again at the end of the recruits' 16-week field training experience. The same battery of tests was also administered to 262 law enforcement officers and 97 correctional officers who received inservice training in stress reduction and stress resolution training.

The psychologist is also collecting data from a voluntary group of correctional officers and their spouses who agreed to be tracked annually over a 3-year period. Each pair has been administered the Hilson Spouse/Mate Inventory and the Hilson Relationships

Inventory for Public Safety Personnel.

The evaluators are using two comparison groups:

- (1) Treatment groups of law enforcement and correctional officers in preacademies and law enforcement and correctional officers in a 40-hour inservice training program.
- (2) A group of 63 officers from the Charlotte County Sheriff's office, a comparable county in southwest Florida 50 miles from Collier County, who have not received stress education.

The evaluators [of the Collier County (Florida) stress program] are examining changes before and after the program in terms of absenteeism, sick time, tardiness, job-related accidents, civilian complaints (primarily for road deputies), disciplinary reports, [and] positive supervisory reports.

More modest evaluations

Program coordinators can also implement less comprehensive, but still useful, evaluations.

For 3 years, the South Carolina DOC tracked 28 employees who were held hostage or injured during a riot in 1986 and compared their retirement and sick time usage with other employees who were not involved in the riot. There was less turnover and sick time among the riot-involved employees—all of whom had received individual or group debriefings from Post Trauma Resources—than among the uninvolved employees.

Edward Stelle, coordinator of the Multnomah County Sheriff's Department Peer Support Program, compared the number of correctional officers on sick leave in July 1997 with those on sick leave in July 1998, a year after the program had substantially increased its effort to provide peer support to correctional officers. Stelle found there were 40 officers on sick leave in 1997, 24 of whom

had problems related to stress. In 1998, there were 20 officers on sick leave, only 2 of whom had stress-related problems.

Managing Program Costs and Securing Funding

Most DOCs and sheriff's departments have incomplete information about how much their stress programs cost because of difficulty estimating expenses: separate budget line items for the operation of in-house programs generally do not exist; staff, office space, and equipment may be shared with other department units; and in-kind contributions of space, supplies, and personnel are often used.

Independent mental health professionals who consult to correctional agencies may also have difficulty estimating their counseling costs because officers typically constitute only a part of their practice, reimbursement varies

DO STRESS PROGRAMS SAVE DOCs AND SHERIFFS MONEY?

Common sense suggests that stress programs save DOCs and sheriff's departments money by reducing the need for overtime to cover for officers who take sick time, disability leave, or early retirement because of stress. While no one has demonstrated empirically that a stress program can save a DOC or sheriff's department money, a study conducted by the San Bernardino Sheriff's department suggests it can.

In the early 1980s, Deputy Chief James Nunn of the San Bernardino Sheriff's Department was in charge of internal affairs and a member of the county retirement board. After every critical incident, Nunn would see officers' names on the retirement list, with each premature retirement costing \$750,000 to \$1 million in unfunded liability to the retirement fund.* As a result, the department contracted for stress services with The Counseling Team in San Bernardino.

Nunn looked at the number of stress-related retirements that officers and deputies took after critical incidents for a 10-year period before the contract and found they cost the county \$20 million. For 6 years after the program had been in place, there were none. The sheriff's department estimated that it had saved \$13 million by avoiding increases in its annual fee for membership on the retirement board.

* Most correctional officers in California work for the State and are part of the Public Employee Retirement System, a huge retirement fund. Employers and employees contribute money into the fund. When employees retire, the fund sends them a monthly check for the rest of their lives. However, the employers' contributions are calculated under the assumption that their employees will, on average, retire after 20 to 40 years of work. When an officer retires after, say, 8 years because of a work-related, stress-related disability, the extra money for the added 12 years of checks is not available in the fund—creating a so-called unfunded liability. The fund raises the employer's contribution to the fund for the next year to make up for this loss. Reducing early retirements precludes the need for the sheriff's department to pay more into the fund each time an officer retires prematurely.

according to a given officer's insurance coverage, and staff may provide pro bono services to the departments they serve by way of free counseling, training, or crisis intervention.

Identifying cost elements

Many programs, however, share certain cost elements:

- personnel;
- consultants (e.g., trainers, clinicians);
- rent and utilities;
- vehicles (or mileage reimbursement if personal cars are used) for responding to emergencies and meeting clients away from the program's offices;
- equipment and supplies (e.g., beepers, business cards, program brochures, training materials, coffee);
- telephone, fax, and postage; and
- travel (e.g., to conferences and seminars).

Newly begun programs will incur some one-time startup costs that established programs typically no longer have to pay for, such as the purchase of office furniture, computers and duplicating machines, and initial staff training.

Actual program budgets

As shown in exhibit 7-2 and explained below, there is considerable variation in program budgets.

- In 1985, the Rhode Island DOC signed a 1-year \$6,000 contract with Family Service Society as a test. Under the most recent 3-year contract (July 1, 1997, through June 30, 2000), the State reimbursed Family Service Society at the rate of \$55 per counseling and training hour not to exceed \$16,500 per fiscal year.
- The San Bernardino Counseling Team's contracts with correctional agencies provide for charging \$60 to \$125 for each hour of critical incident response time and \$175 for each officer who attends the program's peer supporter training course. The contracts provide for free short-term counseling for employees on an as-needed basis with caps that depend on the size of the department.
- With one exception, the Massachusetts DOC does not have to pay additional salaries for its stress unit because the five full-time peer supporters are correctional officers who were transferred into the unit and not replaced by new hires in the institutions from which they came. (With more than 4,000 correctional officers, the department has no difficulty transferring existing officers to take the place of the transferred peer supporters. Smaller departments that need to hire

EXHIBIT 7-2. SAMPLE STRESS PROGRAM 1999 BUDGETS

Rhode Island Department of Corrections	
Contract with Family Service Society	\$16,500
Massachusetts Department of Correction	
Coordinator's salary (half-time)	\$12,240
Beepers (\$90 a week per peer)	\$17,280
Total budget	\$29,520
Multnomah County Sheriff's Department	
Counseling	\$50,000
Training	\$10,000
One-third coordinator's and secretary's salaries	\$27,280
Total budget	\$87,280
Texas Institutional Division	
Coordinator's and secretary's (half-time) salaries	\$36,966
New York State Department of Correctional Services	
	no cost

new staff to replace transferred officers or to pay current officers overtime to cover for them will, of course, incur a considerable cost in adopting this type of peer support program.)¹ Stress unit members receive no overtime, and they are all at maximum salary of \$44,000. Members receive \$90 a week for carrying a beeper. Furthermore, the department called a former correctional officer out of retirement to coordinate the unit, paying him \$12,240 for a 20-hour week with no fringe benefits. Assuming four of the five unit members carry a beeper in any 1 week for 48 weeks a year, the total expenses for the stress unit come to \$29,520.

- The Multnomah County Sheriff supports the Peer Support Program with \$50,000 for outside psychologists to provide free counseling to officers (capped at four visits per officer), \$10,000 for training, \$20,280 for one-third of the coordinator's 30-hour week (he receives no fringe benefits), and about \$7,000 for a part-time secretary. The total program budget comes to about \$87,280. The money comes out of the sheriff's administrative budget.
- With the exception of the coordinator, who spends 80 percent of her time on the Post Trauma Program, and a secretary, who spends half time on the program, Texas' Post Trauma Program consists entirely of volunteers. In 1999, the director's and secretary's salaries pro rated for the time they spent on the program was \$36,966. When regional and unit team members travel for training, individual wardens arrange transportation in State vehicles and meals in the prison nearest the training site. When overnights are needed, regional Institutional Division coordinators pay for hotels and food from their security operations budgets.
- The New York State Department of Correctional Services' all-volunteer program has no expenses. The department has twice secured Federal grants for training.
- The State workers' compensation carrier reimburses Post Trauma Resources \$70 per hour for each approved counseling hour. The carrier reimburses PTR \$127 per staff hour for critical incident debriefings. The DOC

pays the bill if the carrier rejects PTR's claim. The DOC reimburses PTR separately for execution team debriefings, awarding the contract after a competitive procurement.

The program costs identified above do not reflect the cost of paying officers overtime to cover for peer supporters during training. Some departments pay peers overtime if they are called in from home or remain on the job after their shift ends to provide support after a critical incident.

Funding sources

Many programs are funded entirely by the correctional agency or agencies they serve. However, some programs have secured supplemental funding from other sources. The three unions representing correctional officers in Connecticut each offered to contribute \$3,000 to the department's new stress program in return for extending the stress survey of 4,100 officers from four to five institutions (see the section "Collaborating With the Union" in chapter 5).

Several DOCs have secured funds from the National Institute of Corrections (NIC) for training peer supporters and other staff. For example, the Texas Institutional Division secured a \$6,000 NIC training grant, and the New York State Department of Correctional Services twice arranged for NIC to pay up to \$10,000 to experts to provide critical incident debriefing training for several of its employees. Finally, sheriffs in California can obtain reimbursement from the California Standards and Training for Corrections Commission for The Counseling Team's fee to train their peer supporters.

Sources of Help in Setting Up or Improving a Stress Program

There are several resources for learning more about setting up, expanding, or improving a stress program. The list of resources below is based on a limited search and is therefore not comprehensive.

Materials, agencies, and associations

Stress programs have prepared a number of materials, some of which have been included in the appendixes to this report, that can be useful in planning or improving a stress program for correctional officers. Other program materials, along with additional materials of assistance in developing a stress program, are listed in appendix H.

... [C]hapter 3, "Program Case Studies," provides the names of program coordinators after each case study who are available to provide consultation over the phone.

Individuals with experience in correctional officer stress programming

The individuals identified in the chart below are available to provide technical assistance related to stress programming by telephone. In addition, chapter 3, "Program Case Studies," provides the names of program coordinators after each case study who are also available to provide telephone consultation.

dinators after each case study who are also available to provide telephone consultation.

Publications

The notes to chapter 2, "The Extent and Sources of Correctional Officer Stress," reference literature that discusses correctional officer stress. Woodruff, L., "Occupational Stress for Correctional Personnel: Part One," *American Jails* 7 (4) 1993: 15-20; "Part Two," 7 (5): 71-76, presents recent research findings on the effects of stress on correctional officers.

Note

1. Of course, by not replacing officers transferred to the stress unit, it is possible that the stress levels of remaining personnel may increase as they struggle to take on the work of the departed officers.

INDIVIDUALS WITH EXPERIENCE IN STRESS PROGRAMMING FOR CORRECTIONAL OFFICERS				
The following individuals have agreed to respond to telephone calls or faxes for technical assistance with developing or improving a stress program for correctional officers. The individuals are members of the project advisory board, program staff interviewed in the preparation of this report, or both.				
Name	Title or Position	Address	Telephone Numbers	Areas of Experience
Bruce W. Baker	Assistant Commissioner	New York State Dept. of Correctional Services Building 2 1220 Washington Ave. Albany, NY 12226-2050	(518) 457-9887	<ul style="list-style-type: none"> • Program planning and startup • Program coordination
Lawrence Bergmann	Director	Post Trauma Resources 1811 Bull Street Columbia, SC 29201	(803) 765-0700 (800) 459-6780 fax: (803) 765-1607 bergmann@posttrauma.com www.posttrauma.com	<ul style="list-style-type: none"> • Program coordinator training • Peer supporter training • Program design and planning • Critical incident debriefing • Individual counseling
Nancy Bohl	Director	The Counseling Team 1881 Business Center Dr. Suite 11 San Bernardino, CA 92408	(909) 884-0133 fax: (909) 384-0734	<ul style="list-style-type: none"> • Services for small departments • Peer support • Organizational change • Critical incident debriefing • Peer training • Individual counseling
John Carr	Director	Family Service Society 33 Summer Street Pawtucket, RI 02860	(401) 723-2124 fax: (401) 723-0566	<ul style="list-style-type: none"> • Peer training and supervision • Critical incident debriefing • Individual counseling

INDIVIDUALS WITH EXPERIENCE IN STRESS PROGRAMMING FOR CORRECTIONAL OFFICERS (CONTINUED)				
Name	Title or Position	Address	Telephone Numbers	Areas of Experience
Gary Cornelius	<ul style="list-style-type: none"> • Lieutenant • Programs and Recreation Supervisor 	Adult Detention Center Fairfax County Sheriff's Office 10520 Judicial Drive Fairfax, VA 22030	(703) 246-4440 fax: (703) 273-2464	<ul style="list-style-type: none"> • Nature of correctional officer stress • Author, <i>Stressed Out: Strategies for Living and Working with Stress in Corrections</i> • American Correctional Association (ACA) trainer
James Hollencamp	Stress Unit Coordinator	Massachusetts Department of Correction 91 Everett Street Concord, MA 01742	(617) 727-8563	<ul style="list-style-type: none"> • Program coordination
Roger Johnson	Director of Programs	Safety and Health Council Inc. Northeastern New York 845 Central Ave. Albany, NY 12206	(518) 438-2365 fax: (518) 453-2339	<ul style="list-style-type: none"> • Nature of correctional officer stress • Providing stress seminars
Jess Maghan	<ul style="list-style-type: none"> • Associate Professor • Editor, <i>The Keepers' Voice</i> 	Department of Criminal Justice (MC 141) 1007 West Harrison Street Chicago, IL 60607	(312) 413-7691	<ul style="list-style-type: none"> • Nature of correctional officer stress • Officer training
John Maloy	Superintendent	Training Academy New York State Department of Correctional Services 1134 New Scotland Road Albany, NY 12208-1097	(518) 453-1885	<ul style="list-style-type: none"> • Officer training • Employee Assistance Program (EAP) operations • Prison warden
Michael A. Marette	Director, Corrections United	American Federation of State, County and Municipal Employees 1625 L Street NW Washington, DC 20036	(202) 429-1285	<ul style="list-style-type: none"> • Nature of correctional officer stress • Stress seminars for line officers
Elaine Smith	<ul style="list-style-type: none"> • Victim Services Coordinator • Post Trauma Staff Support Coordinator 	Institutional Division Texas Department of Criminal Justice P.O. Box 99 Huntsville, TX 77342-0099	(936) 437-8588	<ul style="list-style-type: none"> • Program startup • Program coordination • Program monitoring • Peer supporter training
Edward J. Stelle	<ul style="list-style-type: none"> • Chaplaincy Coordinator • Coordinator, Peer Support Program 	Multnomah County Sheriff's Department 12240 Northeast Gleason Portland, OR 97230	(503) 255-3600, ext. 406	<ul style="list-style-type: none"> • Program startup • Program coordination • Individual counseling

Glossary

Critical incident	An event that affects performance, exceeds the individual's coping skills, and creates stress for even normal individuals.
Debriefing	A specially structured meeting, usually in a group setting, for employees who have been involved directly or indirectly in a critical incident. Sessions are led by individuals trained to conduct debriefings, with a licensed mental health worker present or acting as a coleader. Generally held within 72 hours after the incident, the 1- to 8-hour session allows employees to discuss their behavior during the incident and the thoughts and feelings the incident caused.
Defusing	A meeting held immediately following a critical incident with employees who have been affected directly or indirectly by the incident. A defusing provides information about possible stress reactions, emphasizes that most reactions are normal, identifies resources for further help, and assesses the need for debriefing.
Educational debriefing	Workshops in which participants are given information about the facts of the event and told psychological help is available if needed.
Employee assistance program (EAP)	A program that provides referrals for counseling or, less commonly, actual counseling for employees experiencing problems that may affect their ability to perform their jobs.
Peer supporters	Correctional employees, uniformed or civilian, who typically listen to coworkers' problems and decide whether to refer them for professional counseling. Because they have no training as clinicians and no protection against requests to disclose conversations with other officers, peer supporters should never engage in counseling.

Appendixes

Appendix A: Texas' Post Trauma Staff Support Program— Unit Staff Support Officer Application Form

POST TRAUMA STAFF SUPPORT PROGRAM Unit Staff Support Officer (USSO) Application Form

Name: _____ Job Title: _____

Social Security Number: _____

Unit/Dept.: _____

Shift and Hours Scheduled to Work: _____

Shift Card #: _____

Supervisor's Name: _____

Work Telephone: (____) _____ Home Telephone (____) _____

Length of Service with TDCJ-ID: _____

1. Are you willing to respond to emergency calls outside your normal duty hours?
YES _____ NO _____
2. Are you willing to participate in training that will be provided?
YES _____ NO _____
3. Are you willing to attend regular scheduled meetings?
YES _____ NO _____
4. Although not a requirement, have you had any prior experience or training related to critical incidents?
YES _____ NO _____ If yes, briefly explain.

5. Do you speak a language other than English? (Not a requirement)
YES _____ NO _____

If yes, what language(s) do you speak? _____

At what level? Minimal _____ Moderate _____ Fluent _____

6. Why are you interested in being a USSO member? _____

7. As a TDCJ-ID employee, have you directly received any services from a post trauma team as a result of critical incident?

YES _____ NO _____ If yes, briefly describe.

IT IS UNDERSTOOD THAT THE USSO PARTICIPATION OUTSIDE NORMALLY SCHEDULED WORK HOURS WILL BE COMPENSATED IN ACCORDANCE WITH EXISTING AGENCY POLICY.

IT IS UNDERSTOOD THAT THE USSO MEMBER WILL PARTICIPATE FOR A TERM OF ONE YEAR, AT WHICH TIME THEY MAY REAPPLY.

Signature of Applicant: _____ Date: _____

Appendix B: Post Trauma Resources Case Study and Role Profiles for Debriefing Training

Case Study

A group of inmates gathered in the cafeteria as breakfast was ending and surrounded three well-known officers. They began hitting and stabbing them with pieces of wood and shanks. Two other inmates grabbed two cafeteria workers and moved them to the kitchen area where they were quickly tied up. Reinforcements in the form of correctional officers tried to enter the area where the disturbance was taking place but could enter only long enough to rescue the injured officers.

The cafeteria area was quickly sealed off, but a group of fifteen inmates continued to hold the hostages. One was released after two hours and the others after eight hours. Further physical injuries occurred. Later, everyone would know that the disturbance was planned.

Role 1

Hostage 1

After having worked with the Department of corrections for more than 10 years, F. was looking forward to retiring on his state and military pension later in the year. During the hostage crisis, F. spent most of the time watching the inmates' behavior and trying to figure out a method for escape. In addition, he was working hard to protect Hostage 2 who was at work for the first time the day of the disturbance.

Role 2

Hostage 2

S. had been wanting to leave the fast food business for more than two years, especially after the robbery. The training for the Department of corrections had been great and he/she had been looking forward to the on-the-job training. S. had not been in a prison before and was a little bit hesitant about all the gates and locks. He/she was walking into the main kitchen area when the disturbance occurred. S. was quickly grabbed by an inmate, threatened with a knife and tied up. S. was not threatened again and was a cooperative and effective hostage. He/she was released after eight hours in captivity.

Role 3

Correctional Officer Who Was Injured

After hearing the emergency call on the radio, B. had raced to the cafeteria where he/she witnessed the stabbing and beating of the three officers. After a moment of hesitation, B. ran into the disturbance and pulled one officer out. The others were quickly rescued. B. has worked as an officer in the system for six years without a promotion and feels he/she has been passed up because of the "good old boy" system.

Role 4

Correctional Officer

N. had grown up in a rough neighborhood and was physically and psychologically prepared for just about anything. He/she had certainly done his/her part the day of the incident but was not prepared to see his/her best friend beaten so severely. He/she ran toward the cafeteria when he/she realized there was a problem and turned to see four inmates kicking and beating his/her friend. N. would later say, "It was a bloody mess."

Role 5

Correctional Officer

J. should probably have never been a correctional officer anyway. a very religious individual, J. often thought that he/she would serve God best as a church musician or preacher. The day of the riot, J. was not aware of the tension in facility that led many to believe that there could be trouble. When the incident occurred, J. was in the cafeteria and was immediately targeted by the inmates. Not having the physical skills of the others, J. left the scene as soon as he/she could. The most common reaction of the other staff involved in the incident is not anger but a sense that J. needs to be protected.

Appendix C: The San Bernardino Counseling
Team's Supervisory Training Syllabus

THE COUNSELING TEAM
1881 Business Center Drive, Suite 11
San Bernardino, CA 92408
(909) 884-0133
www.tcteam.com

Dealing with Critical Incident Stress in Corrections

Definition of Critical Incidents

- * Generates Profound Emotion
 - * Impacts Present or Future Performances
 - * Surpasses Coping Skills
 - * Evokes Stress in any Normal, Healthy Person
- Dr. Jeffrey Mitchell

Critical Incidents

- * Major Disasters
- * Earthquake/ 5:04 pm. October 17, 1989
- * Hurricane (Andrew)
- * Terrorism
- * Transportation Traffic Collision

Personal Critical Incidents

- * Sudden Infant Death Syndrome
- * Major illness
- * Loss of a family member
- * Accidental injuries
- * Extreme attempts where lives are lost
- * Personnel helpless to save victim(s)
- * Unusually gruesome crime in correctional facility
- * Death or serious injury of a inmate involving equipment or personnel
- * Victim known to personnel
- * Malfunctioning of equipment
- * Fire/Explosion in facility
- * Riots
- * Possible exposure to communicable diseases
- * Correctional officer gone bad
- * Death/Injury of a correctional officer
- * Officer involved shooting

- * Hostage or barricaded situation
- * Physical/Sexual assault on a correctional officer
- * Suicide of an inmate
- * Negative news media
- * Suicide of a co-worker
- * School shooting (previous contact with juvenile)

Who is subject to Critical Incident Stress?

- * Dispatcher/Firefighter/Paramedic/Law Enforcement Officer/Correctional Officer/Hospital Personnel/Coroner

The Effects of Critical Incidents

Perceptual Distortions

- * Time-slow motion/fast motion
- * Auditory-diminished sound/intensified sound
- * Visual- tunnel vision/heightened sense of detail

Shock and Disruption

- * Initial denial
- * Autopilot
- * Difficulty remembering
- * Isolation
- * Heightened sensitivity

Emotional Numbing

- * May be in shock
- * Keeps from feeling pain
- * Must succeed at job/feels lack of support
- * Peer pressure

Hostility and Anger

- * Non-directed
- * Short-fused with others
- * Can be short-lived
- * Can cause relationship discord
- * Can cause performance problems

Fear:

- * Fear comes with the perception of danger

Depression

- * Irritability-Oversensitive/Defensive/Argumentative/Insubordinate

Isolation

- * No one cares
- * No one understands
- * Experiences agitation/frustration

Intrusive Thoughts

- * Relive event over and over
- * Can't turn off video tape
- * Feels it happening again
- * Exaggerates details
- * May change final outlook

Anchors

- * Time, Names, Dates, Places

Flashbacks

- * Re-experiencing the event as though it is happening again

Sleep Difficulties

- * Insomnia
- * Nightmares
- * Coldsweats
- * Exhaustion
- * Grinding teeth
- * Early morning wake-up
- * Dreams

Guilt

- * Responsibility guilt

Anxiety

"Pressure-Cooker Model"

- * External stress events add more pressure until the "Cooker" cannot handle the force and explodes into illness

Burnout

Loss of interest

- * Difficulty with work routine
- * Request transfer
- * Work feels boring
- * May change careers

Loss of Enthusiasm

Emotional Conflict

- * Family vs. Sense of duty
- * Peer pressure vs. Real feelings
- * Control issues

Family/Marital discord

Family Problems

- * Lack of communication
- * Repress feelings
- * Spouses' awareness of vulnerability
- * Sexual difficulties
- * Substance abuse
- * Spouse gives double message

Re-Evaluation

- * Goals
- * Priorities
- * Family
- * Career

What if

Vulnerability

- * How to Psychologically Survive
- * Psychological Services...
- * The Counseling Team/Available 24 hours

Defusing

Immediately Following the Traumatic Event...

- * Shorter in length (1 hour)
- * Can eliminate a formal debriefing
- * Can enhance a formal debriefing

Debriefings

Introduction Phase

Introduces confidentiality, peer support personnel and the facilitator

Fact Phase

Where the facilitator elicits from the members what activities they performed during the critical incident and what they heard, saw, smelled and did at the scene

Thought Phase

Where the facilitator encourages members to share with others what they were thinking at the scene and whether they have ever had these thoughts before

Reaction Phase

Where the facilitator encourages members to share with others the feelings they had at the scene and are having now, and whether they have ever had these feelings before

Symptom Phase

Where the facilitator focuses on the psychological and physical after effects that the members experienced since the incident

Unfinished Business Phase

Where the members discuss those past emotional experiences which have not been resolved

Teaching Phase

Where members are reminded that the symptoms they have experienced are normal response to extraordinary circumstances and the rationale for their stress response is explained

Wrap-up Phase

To conclude the debriefing, answer questions, and allow the members to develop a plan of action

Round-Robin Phase

Where members make any last comments to each other and no one responds

Focus on support systems...

- * Peers
- * Family Members
- * Clergy
- * Professional

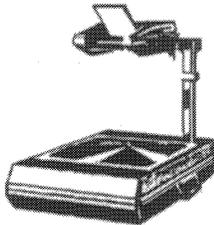
"That which does not destroy me will make me stronger"
-Nietzsche

Remember:

Correctional personnel are not immune to horrible human tragedy!

Appendix D: New York State's Department of Correctional Services Scenario for Training EAP Coordinators to Motivate Employees to Accept Professional Help

Supervisors and NYS/EAP in the New York State Work Force*



Referral Process to EAP

- Put up overhead, "REFERRAL PROCESS TO EAP," pages 12-14 in participant materials. Say, "Let's look at how a referral to EAP works. We will go through this flow chart using a fictitious employee to demonstrate the process." **(You are encouraged to adapt this section to reflect how a referral to your organization's EAP works.)**
- As a supervisor, you may be observing your employees and see that something is not going very well for one of them. Let's call this employee Joe. You watch what is going on and may begin to make a few notations on what you see. Joe is late on Tuesdays, Thursdays and Fridays. He is irritable and his assignments are sloppy. This may be a good time to consult with your EAP Coordinator for guidance on when and how to introduce EAP to the employee.
- Over a period of time, you notice that things aren't improving with Joe. It has been a week or two and his time lines and work are getting worse. You have documented all of this in very concrete terms and have included all the times and dates when you noticed poor performance. You sit and talk with Joe, letting him know that you are concerned with the drop in his work performance. You talk about performance expectations and changes that need to be made for improvement.
- Here is where you can first offer EAP. You might say, "Gee Joe, are you aware that our agency has an Employee Assistance Program? It is a program that can help you if you are having any personal problems that may be having some impact on your work. Here is the brochure and the name and phone number of our EAP Coordinator."

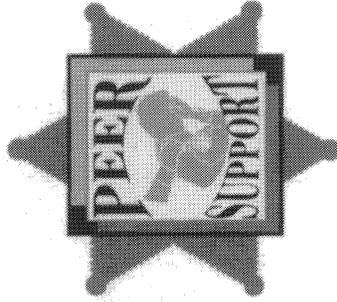
* Excerpted from "Instructor's Manual: Supervisors and NYS/EAP in the NYS Workforce." This material is reprinted with permission from The New York State Employee Assistance Program and The New York State Governor's Office of Employee Relations.

Supervisors and NYS/EAP in the New York State Work Force

- The best case scenario is that Joe says, "Yeah boss, you're right, I need some help," and then goes to see the Coordinator. The Coordinator does an assessment and formulates a plan of action for Joe. Then Joe is asked if he would sign a copy of the release of information we talked about earlier and says yes. Joe accepts the referral, gets help, things improve and all is well. That's the easy one.
- Let's say Joe refuses assistance and says, "I don't have any problems and my work is fine. You've got the problem." As the supervisor, you continue to monitor performance. If it doesn't improve, you could again offer EAP in your next meeting with Joe. You might say, "Joe, remember I told you about EAP? Well, they can help if there is anything going on that you might need some outside help with. Here is the name and number again in case you lost it." You could also say that if Joe doesn't feel comfortable calling the EAP Coordinator, he could call the EAP Main Office and get linked with someone else in EAP that could help. Remember that you can only suggest EAP and Joe has to choose to come. But continuing to recommend EAP as you progress through your supervisory process can reinforce the availability of EAP and reduce any stigma there may be for getting help.
- Tell the group that at any point in this process, the supervisor may consult with EAP on best approaches to take with an employee. Remind the group that each individual is unique and that not all approaches will work with everyone.

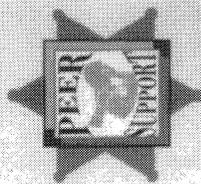
Appendix E: Riverside County (California) Sheriff's Department
Peer Support Program Brochure

**“PEOPLE
WHO
CARE”**



**RIVERSIDE COUNTY
SHERIFF'S DEPARTMENT**

LARRY D. SMITH, SHERIFF



Need More Information?

Department Chaplain Fred Hüscher,
our Peer Support coordinator,

is always ready

to answer questions and is available

for your special needs with trusted

confidentiality.

He can be reached at

(909) 955-8994

or pager number

(909) 872-9174.

RIVERSIDE COUNTY SHERIFF'S DEPARTMENT
1398

What is Peer Support?

It's a way for employees and/or family to confidentially talk about personal or professional problems with trained co-workers who have "been there" and understand what it's like.

Peer Support is:

- ✓ A large diverse support network of caring and trained peer supporters available on a 24-hour basis for members of the law enforcement profession and their families.
- ✓ An opportunity for peer supporters to reduce stress levels and prevent conflict by offering a variety of ways for self-help.
- ✓ The assurance to respect anonymity, to preserve confidentiality, and a building of a new trust level that will affect every area of one's life.
- ✓ On-going training of peer supporters for providing the most effective help needed.
- ✓ A referral system of professionals and agencies chosen for their broad understanding of the concerns shared by members of the law enforcement family.

Why Peer Support?

STRESS is the key word. Positive stress, as a survival tool, is essential in life. Negative stress can create many problems such as memory loss, difficulty in making decisions, forgetfulness, not getting along with others (especially family), self-destructive behavior, health and emotional problems, job burnout, and the list goes on.

Who Are The "Trained Co-Workers" Who Become Peer Support Members?

They are your partners, friends who have been trained to LISTEN, to ASSESS the nature and depth of the stress, to EXPLORE avenues for resolving the stress, and, whenever necessary, to REFER you to the appropriate services of a professional in your need area.

Does The Program Have The Support Of Our Sheriff?

The Sheriff and his administration believe the Peer Support Program best serves the many needs of all Department members and their families.

Examples are:

- Immediate professional assistance provided at no cost to the employee whenever a member of the Department is involved in a critical incident (e.g., officer involved shooting, or any trauma or tragedy.)
- In less urgent matters, the Peer Support member may refer an employee to any number of resources and programs.

What Kinds Of Problems Can Be Shared With Peer Supporters?

There is no limit as to the types of "life problems" you can discuss with a peer supporter. Many problems will resolve themselves when just given a chance to be heard.

Some of the most common concerns brought to peer supporters' attention are: divorce, retirement, disability, problems with co-workers or administration, family, marriage, financial, grief, substance dependency, religious or spiritual matters, legal issues, emotional/physical health, career goals.

But, What About Confidentiality?

This is where trust begins. All communication between you and a peer supporter is CONFIDENTIAL and considered privileged by the Department, except for matters which involve a threat to life or a serious or dangerous violation of the law or policy.

Peer Supporters shall not be interviewed, nor shall they discuss details of a support session with any other employer personnel.

When And Where Are Peer Support Sessions Held?

Unless the circumstance demands immediate attention, sessions are conducted during off-duty time at a location that will provide the greatest amount of privacy and comfort for effective sharing.

How Can Peer Support Be Contacted?

The names, business and home telephone numbers of Department peer supporters will appear on posted lists at all stations and bureaus. From the list, find a peer supporter you are comfortable with and telephone that person.



TYPE EVENT CODES

- T - Threat of death or psychological assault**
- R - Riot or hostage situation**
- A1 - Assault (physical assault of a seriousness nature)**
- U - Unnatural event (witnessing of suicide or attempted suicide of staff or offender); Exposure to life threatening disease**
- M - Matters related to natural disaster or fire**
- A2 - Assault, sexual in nature**
- S - Situations unusual enough for trauma but not noted above (i.e. death of staff or offender)**

Appendix G: Connecticut Department of Correction
Stress Program Questionnaire








Families, Officers & Corrections Understanding Stress

Dear AFSCME Correction Officer,

Some months ago, the Connecticut Department of Correction was awarded a grant from the National Institute of Justice to implement an educational program related to the impact of stress on the lives of Correction Officers and their families. Recently, you should have received a brochure that provided an overview of the Families, Officers, and Corrections Understanding Stress (FOCUS) Project. In that brochure, we indicated that the goal of the project was to reduce Correction Officer and family stress through education and training. The FOCUS project is the collaborative effort of AFSCME Council 4 and the Connecticut Department of Correction, in conjunction with ETP Inc. and Drs. M. E. Sullivan and J. B. Rogers (S & R Associates).

The following survey was developed through that collaboration. In order to insure that the results of this survey accurately represent the perceptions of the Correction Officers, we want to urge you to answer each question as honestly as possible. To insure your confidentiality, the completed survey will only be handled by the AFSCME liaison and returned directly to S & R Associates for analysis.

The Connecticut Department of Correction, AFSCME (Locals 387, 391, and 1565), ETP Inc., and S & R Associates hope that we can begin to effect a significant change in the lives of all Correction Officers and their families with your help. We want to thank you for providing us with your effort and time.


 John J. Armstrong,
 Commissioner
 Connecticut Department of
 Correction


 David Moffa,
 President AFSCME
 Local 387


 Michael Minney,
 President AFSCME
 Local 391


 David LaPointe,
 President AFSCME
 Local 1565


 Donald Sevas,
 Staff Representative
 AFSCME, Council 4


 Larry W. Mens
 ETP Inc.


 Mark E. Sullivan, Ph.D.
 S & R Associates


 John B. Rogers, Ph.D.
 S & R Associates

The National Institute of Justice Grant Award #98-FS-VS-003 funds this program

CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Indicate the last 4 digits of your Social Security number:

____/____/____/____

Indicate the last 4 digits of your telephone number:

____/____/____/____

Directions: Please check (✓ or X) the categories for each question that applies to you. Do not leave any question blank nor select more than one option per question. If you feel that the question does not apply to you, mark Not Applicable (NA).

1. GENDER:		2. DATE OF BIRTH:	
Male <input type="checkbox"/>	Female <input type="checkbox"/>	Month/Day/Year	____/____/____
3. RACE:			
African American ----- <input type="checkbox"/>	Asian American ----- <input type="checkbox"/>	Hispanic ----- <input type="checkbox"/>	Native American ----- <input type="checkbox"/>
White ----- <input type="checkbox"/>	West Indian/Caribbean ----- <input type="checkbox"/>	Other _____ (Specify)	
4. EDUCATION: What is the highest level of education that you have completed?			
Less than High School ----- <input type="checkbox"/>	High School Diploma/GED ----- <input type="checkbox"/>	Technical degree ----- <input type="checkbox"/>	Some College ----- <input type="checkbox"/>
AA / AS degree ----- <input type="checkbox"/>	BA / BS degree ----- <input type="checkbox"/>	MA / MS degree ----- <input type="checkbox"/>	Ph.D. ----- <input type="checkbox"/>
5. MARITAL STATUS: What is your present marital status			
Single ----- <input type="checkbox"/>	Widowed ----- <input type="checkbox"/>	Married ----- <input type="checkbox"/>	Separated ----- <input type="checkbox"/>
Divorced ----- <input type="checkbox"/>	Live-in Partner/Significant Other ----- <input type="checkbox"/>		
6. Have you ever been divorced?		NA <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Number of times _____
7. Has your spouse/significant other ever been divorced?		NA <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Number of times _____
8. Does your spouse/significant other have a job?		NA <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/>
9. What is the highest level of education completed by your spouse/significant other? NA <input type="checkbox"/>			
Less than High School ----- <input type="checkbox"/>	High School Diploma/GED ----- <input type="checkbox"/>	Technical degree ----- <input type="checkbox"/>	Some College ----- <input type="checkbox"/>
AA / AS degree ----- <input type="checkbox"/>	BA / BS degree ----- <input type="checkbox"/>	MA / MS degree ----- <input type="checkbox"/>	Ph.D. ----- <input type="checkbox"/>
10. LEVEL OF FACILITY: NA <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>			
11. How long have you worked for the Connecticut Department of Correction? _____ years _____ months			
12. About what is your total family income before taxes? \$ _____, _____,00			
13. Including yourself, how many people in your household? _____			
14. What shift do you primarily work? 1 st <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd <input type="checkbox"/> Rotating <input type="checkbox"/>			
15. What is your current rank? Cadet <input type="checkbox"/> Probationary Officer <input type="checkbox"/> Officer <input type="checkbox"/> 5 and 2 Officer <input type="checkbox"/>			
16. Have you served in any military organization?		No <input type="checkbox"/> Yes <input type="checkbox"/>	Length of service _____ years
17. Have you worked for any other correctional organization?		No <input type="checkbox"/> Yes <input type="checkbox"/>	Length of service _____ years
18. On average, how many OTs per pay period do you work?			
19. Have you worked for any police force?		No <input type="checkbox"/> Yes <input type="checkbox"/>	Length of service _____ years
20. Are you currently serving in any military organization in the US or abroad? No <input type="checkbox"/> Yes <input type="checkbox"/>			
21. Has any member of your immediate family ever worked for the Connecticut Department of Correction? No <input type="checkbox"/> Yes <input type="checkbox"/>			
If yes, please indicate which family members		Spouse/Significant Other ----- <input type="checkbox"/>	
Mother ----- <input type="checkbox"/>	Father ----- <input type="checkbox"/>	Daughter ----- <input type="checkbox"/>	Son ----- <input type="checkbox"/>
Aunt ----- <input type="checkbox"/>	Uncle ----- <input type="checkbox"/>	Other _____ (Specify)	

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

22. Please indicate which of the following you are a member of-
 NA K9 CERT SOG CISRT HONOR GUARD

23. Indicate the facility that you presently work in-

Enfield CI ----- <input type="checkbox"/>	Northern CI ----- <input type="checkbox"/>
Osborn CI ----- <input type="checkbox"/>	Robinson CI ----- <input type="checkbox"/>
Willard-Cybulski CI ----- <input type="checkbox"/>	Bridgeport CC ----- <input type="checkbox"/>
Cheshire CI ----- <input type="checkbox"/>	Garner CI ----- <input type="checkbox"/>
New Haven CC ----- <input type="checkbox"/>	Manson YI ----- <input type="checkbox"/>
Brooklyn CI ----- <input type="checkbox"/>	Webster CI ----- <input type="checkbox"/>
Corrigan CI ----- <input type="checkbox"/>	Gates CI ----- <input type="checkbox"/>
Northeast CI ----- <input type="checkbox"/>	Radgowski CI ----- <input type="checkbox"/>
York CI ----- <input type="checkbox"/>	Hartford CC ----- <input type="checkbox"/>
MacDougall CI ----- <input type="checkbox"/>	Walker RSMU ----- <input type="checkbox"/>
UCONN Health Center ----- <input type="checkbox"/>	CTU ----- <input type="checkbox"/>
CTSD ----- <input type="checkbox"/>	Other _____ (Specify)

24. How would you describe your current post assignment?

General Housing Unit ----- <input type="checkbox"/>	Restrictive Housing Unit ----- <input type="checkbox"/>
Sick/Annual/Spare ----- <input type="checkbox"/>	Tower/Perimeter Duty ----- <input type="checkbox"/>
Control Center ----- <input type="checkbox"/>	Other _____ (Specify)

For each of the following, indicate your overall level of satisfaction.

	Very Unsatisfied	Unsatisfied	Somewhat Satisfied	Satisfied	Very Satisfied
25. Your job -----	<input type="checkbox"/>				
26. Your life -----	<input type="checkbox"/>				
27. Your present relationship with your spouse/significant other NA <input type="checkbox"/> -----	<input type="checkbox"/>				

In the last 3 months, have you-

28. been late for work? ----- No Yes If yes, how many days? _____

29. left work early? ----- No Yes If yes, how many days? _____

Have you ever been diagnosed as having-

30. Diabetes? ----- No <input type="checkbox"/> Yes <input type="checkbox"/>	Was this condition diagnosed before being hired? No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/>
31. Chronic low back pain? ----- No <input type="checkbox"/> Yes <input type="checkbox"/>	
32. Clinical depression? ----- No <input type="checkbox"/> Yes <input type="checkbox"/>	
33. High blood pressure? ----- No <input type="checkbox"/> Yes <input type="checkbox"/>	
34. Liver disease? ----- No <input type="checkbox"/> Yes <input type="checkbox"/>	
35. Heart disease? ----- No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>

36. Do you smoke cigarettes? No Yes If yes, about how many pack(s) per day? _____

37. Are you presently taking any medication for depression? ----- No Yes

CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Indicate how confident you think you are about doing each of the following. Your answers should be what you think you can do and not what you think you are expected to do.

	Not Very Confident	Not Confident	Not Sure	Confident	Very Confident
38. Accepting criticism from my peers -----	<input type="checkbox"/>				
39. Speaking up when something is wrong -----	<input type="checkbox"/>				
40. Resolving disagreements -----	<input type="checkbox"/>				
41. Assessing a dangerous situation -----	<input type="checkbox"/>				
42. Responding to the injuries or illnesses of inmates -----	<input type="checkbox"/>				
43. Evaluating and implementing an emergency plan -----	<input type="checkbox"/>				
44. Describing proper procedures for a medical emergency -----	<input type="checkbox"/>				
45. Providing emergency medical care -----	<input type="checkbox"/>				
46. Safely restraining an inmate out of control -----	<input type="checkbox"/>				
47. Verbally defusing a potentially dangerous situation -----	<input type="checkbox"/>				
48. Fulfilling the requirements of the job -----	<input type="checkbox"/>				

In the last 3 months, were you away from work due to-

If yes, how many days?

49. personal illness? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
50. sick family member (child/spouse/significant other)? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	
51. taking care of an elderly parent? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	
52. mental health day? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	
53. work related injury? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	
54. personal leave/emergency? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	
55. planned vacation? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	
56. stress related? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	
57. an administrative leave with pay? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	
58. an administrative leave without pay? -----	No <input type="checkbox"/> Yes <input type="checkbox"/>	

How often do you drink-

	Never	1-2 times per month	1-2 times per week	3-4 times per week	Daily	Number of drinks per occasion?
59. Beer? -----	<input type="checkbox"/>	<input type="text"/>				
60. Wine? -----	<input type="checkbox"/>	<input type="text"/>				
61. Mixed liquor drinks? -----	<input type="checkbox"/>	<input type="text"/>				
62. Straight liquor? -----	<input type="checkbox"/>	<input type="text"/>				

63. Have you increased your consumption of alcohol over the last 6 months? ----- No Yes

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

***Read each statement carefully and decide if this is how you feel about your job. If you have not had this feeling, mark/check never. However, if you have had this feeling indicated how often you have felt that way.**

	Never	1 - 2 times a year	Once a month	A few times a month	Once a Week	A few times a week	Every Day
64. I feel emotionally drained from my work.	<input type="checkbox"/>						
65. I feel used up at the end of the workday.	<input type="checkbox"/>						
66. I feel fatigued when I get up in the morning and have to face another day on the job.	<input type="checkbox"/>						
67. Working with the inmates all day is really a strain for me.	<input type="checkbox"/>						
68. I feel burned out from my work.	<input type="checkbox"/>						
69. I feel I'm working too hard on my job.	<input type="checkbox"/>						
70. Working with the inmates directly puts too much stress on me.	<input type="checkbox"/>						
71. I feel like I'm at the end of my rope.	<input type="checkbox"/>						
72. I feel I treat some of the inmates as if they were impersonal objects.	<input type="checkbox"/>						
73. I've become more callous towards the inmates since I took this job.	<input type="checkbox"/>						
74. I worry that this job is hardening me emotionally.	<input type="checkbox"/>						
75. I do not really care what happens to some of the inmates.	<input type="checkbox"/>						
76. I feel the inmates blame me for some of their problems.	<input type="checkbox"/>						
77. I can easily understand how the inmates feel about things.	<input type="checkbox"/>						
78. I deal very effectively with the problems of the inmates.	<input type="checkbox"/>						
79. I feel I'm positively influencing the lives of the inmates and their families through my work.	<input type="checkbox"/>						
80. I feel frustrated by my job.	<input type="checkbox"/>						
81. I feel enthusiastic after working closely with the inmates.	<input type="checkbox"/>						
82. I feel very energetic.	<input type="checkbox"/>						
83. I can easily create a relaxed atmosphere with the inmates.	<input type="checkbox"/>						
84. I have accomplished many worthwhile things in this job.	<input type="checkbox"/>						
85. In my work, I deal with emotional problems very calmly.	<input type="checkbox"/>						

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Read each of the following carefully and decide if you have experienced any of these feelings. If you have not had the experience, check never. However, if you have had this experience indicated how often.

	Never	1-2 times in last 6 months	Once a month	A few times a month	Once a week	A few times a week	Daily
86. Pains or pounding in your chest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
87. Faintness or dizziness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
88. Loss of sexual interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
89. A feeling of no energy or excessive tiredness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
90. Thoughts of ending your life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
91. Feelings of being trapped	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
92. Headaches or pressure in your head	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
93. Feeling blue or depressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
94. Trouble catching your breath or shortness of breath	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
95. Nausea, upset stomach, or stomach pains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
96. Sudden feelings of fear or panic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
97. A feeling that something bad was going to happen to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
98. Feeling that everything that goes wrong is your fault	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
99. Migraines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
100. Pains in your back or spine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
101. Reoccurring bouts of the flu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
102. Trouble getting to sleep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
103. Trouble staying asleep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
104. Finding it difficult to get up in the morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
105. Sweaty or damp and clammy hands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
106. Feeling nervous or fidgety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
107. A change in appetite	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
108. Taking prescription drugs to relieve stress and/or anxiety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
109. Crying spells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
110. Lack of emotional responsiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
111. Inability to find pleasure in anything	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
112. Feeling of hopelessness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
113. Feeling of worthlessness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The National Institute of Justice Grant Award #98-FS-VS-003 funds this program

CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Read each statement carefully and indicate your level of disagreement/agreement with each.

	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
114. My home life interferes with my responsibilities at work, such as getting to work on time, accomplishing daily tasks, and working overtime.-----	<input type="checkbox"/>				
115. The facility that I work in promotes a sense of excellence.-----	<input type="checkbox"/>				
116. The pay is good.-----	<input type="checkbox"/>				
117. The goals and objectives for my job are clearly defined.-----	<input type="checkbox"/>				
118. Due to work related duties, I have to make changes to my plans for family activities.-----	<input type="checkbox"/>				
119. The conditions of my life are excellent.-----	<input type="checkbox"/>				
120. Roll call provides a chance to discuss policy with immediate supervisors.-----	<input type="checkbox"/>				
121. I just don't seem to be able to make important decisions any more.-----	<input type="checkbox"/>				
122. My job lets me use my skills and abilities.-----	<input type="checkbox"/>				
123. I worry about exposing my family to communicable diseases.-----	<input type="checkbox"/>				
124. The physical surroundings at work are pleasant.-----	<input type="checkbox"/>				
125. I work on unnecessary things.-----	<input type="checkbox"/>				
126. The department is concerned about giving everyone a chance to get ahead.-----	<input type="checkbox"/>				
127. I received the proper training to perform my job requirements.-----	<input type="checkbox"/>				
128. At work, I am at risk of having urine or feces thrown at me.-----	<input type="checkbox"/>				
129. My family does not enjoy doing some of the things that I'd like to do.-----	<input type="checkbox"/>				
130. I am constantly thinking about leaving corrections.-----	<input type="checkbox"/>				
131. The people I work with are competent in doing their jobs.-----	<input type="checkbox"/>				
132. I regularly read "This Week."-----	<input type="checkbox"/>				
133. Family-related strain interferes with my ability to perform job-related duties.-----	<input type="checkbox"/>				
134. The department's mission statement is consistent with my views.-----	<input type="checkbox"/>				
135. After work, I come home too tired to do some of the things I'd like to do with my family.---	<input type="checkbox"/>				
136. I have gotten the important things in life so far.-----	<input type="checkbox"/>				
137. Roll call provides information about what happened on the previous shift.-----	<input type="checkbox"/>				
138. The job security is good.-----	<input type="checkbox"/>				
139. I feel certain how I will be evaluated for my annual review.-----	<input type="checkbox"/>				
140. Lately, I feel confused most of the time.-----	<input type="checkbox"/>				
141. The work I do is meaningful.-----	<input type="checkbox"/>				
142. Roll call provides guidance.-----	<input type="checkbox"/>				
143. I put a lot of effort into my job beyond what is required.-----	<input type="checkbox"/>				

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Read each statement carefully and indicate your level of disagreement/agreement with each.

	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
144. Sometimes I have to violate a rule or policy in order to carry out an assignment.-----	<input type="checkbox"/>				
145. Supervisors show favoritism. -----	<input type="checkbox"/>				
146. I am adequately trained to work with the population of inmates in my facility. -----	<input type="checkbox"/>				
147. At work, I am at risk of exposure to communicable diseases (AIDS, Hepatitis-C, TB). -----	<input type="checkbox"/>				
148. My spouse/significant other wants me to spend more time with them. -----	<input type="checkbox"/>				
149. I feel content working as a correction officer.-----	<input type="checkbox"/>				
150. The people I work with are friendly. -----	<input type="checkbox"/>				
151. The information that is in "This Week" is generally accurate. -----	<input type="checkbox"/>				
152. My spouse/significant other and I have different ideas about who our friends should be. ----	<input type="checkbox"/>				
153. The facility that I work in ensures a secure, safe, and humane environment for the inmates. -	<input type="checkbox"/>				
154. My family dislikes how often I am preoccupied with my work while I am at home. -----	<input type="checkbox"/>				
155. If I could live my life over, I would change almost nothing. -----	<input type="checkbox"/>				
156. If you ask questions during roll call, you are considered a trouble maker. -----	<input type="checkbox"/>				
157. My fringe benefits are good.-----	<input type="checkbox"/>				
158. I have to work under vague directives or orders. -----	<input type="checkbox"/>				
159. Lately, my ability to cope on a daily basis has been really reduced. -----	<input type="checkbox"/>				
160. I feel personally responsible for the work I do. -----	<input type="checkbox"/>				
161. Roll call provides information/communication that is important.-----	<input type="checkbox"/>				
162. My job requires that I do the same thing over and over. -----	<input type="checkbox"/>				
163. I have to do some things that go against my conscience. -----	<input type="checkbox"/>				
164. Lately, things that I once found enjoyable no longer interest me. -----	<input type="checkbox"/>				
165. I work at the correctional facility of my choice. -----	<input type="checkbox"/>				
166. I worry about my family's safety.-----	<input type="checkbox"/>				
167. I sometimes find myself treating my loved ones like inmates. -----	<input type="checkbox"/>				
168. I have to do things that I don't agree with.-----	<input type="checkbox"/>				
169. I receive assignments based on my ability not my gender. -----	<input type="checkbox"/>				
170. At work, I am at risk of verbal abuse from inmates.-----	<input type="checkbox"/>				
171. My spouse/significant other and I have different ideas about spending time with relatives. ---	<input type="checkbox"/>				
172. The facility that I work in is committed to protect the public and staff. -----	<input type="checkbox"/>				
173. Because of my work demands, I am irritable at home. -----	<input type="checkbox"/>				
174. The chances for promotion are good.-----	<input type="checkbox"/>				

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Read each statement carefully and indicate your level of disagreement/agreement with each.

	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
175. The facility that I work in promotes a sense of professionalism.-----	<input type="checkbox"/>				
176. Things I want to do at work don't get done because of the demands of my family.-----	<input type="checkbox"/>				
177. The facility that I work in promotes a sense of dignity.-----	<input type="checkbox"/>				
178. I'm finding it harder and harder to cope on a daily basis.-----	<input type="checkbox"/>				
179. I have the opportunity to develop my own abilities.-----	<input type="checkbox"/>				
180. Roll call provides support among officers.-----	<input type="checkbox"/>				
181. The main satisfaction in my life comes from work.-----	<input type="checkbox"/>				
182. I am clear on what I am expected to do.-----	<input type="checkbox"/>				
183. I generally want to be left alone.-----	<input type="checkbox"/>				
184. Transfers within the department are always available.-----	<input type="checkbox"/>				
185. I worry about taking my family out because we may run into an ex-inmate.-----	<input type="checkbox"/>				
186. My job requires that I keep learning new things.-----	<input type="checkbox"/>				
187. I work with inconsistent policies and guidelines.-----	<input type="checkbox"/>				
188. The department generally is more lenient in enforcing the rules for members of the opposite sex.-----	<input type="checkbox"/>				
189. At work, I am at risk of physical abuse from inmates.-----	<input type="checkbox"/>				
190. My spouse/significant other and I have different preferences with respect to entertainment.-----	<input type="checkbox"/>				
191. It would be very hard for me to leave my job even if I wanted to.-----	<input type="checkbox"/>				
192. The demands of my family or spouse/significant other interfere with work related activities.-----	<input type="checkbox"/>				
193. I get a feeling of accomplishment when I do a good job.-----	<input type="checkbox"/>				
194. The facility that I work in promotes a sense of respect among staff, management, and the inmates.-----	<input type="checkbox"/>				
195. There is effective cooperation between shifts.-----	<input type="checkbox"/>				
196. You don't know from one day to the next how the department expects you to perform.-----	<input type="checkbox"/>				
197. Things I want to do at home do not get done because of the demands my job puts on me.-----	<input type="checkbox"/>				
198. This job provides me with opportunities to do work that I feel is important.-----	<input type="checkbox"/>				
199. Roll call provides an opportunity for officers to have a "bitch" session.-----	<input type="checkbox"/>				
200. The only reason I work here is to get a paycheck every two weeks.-----	<input type="checkbox"/>				
201. Responsibilities are clearly defined.-----	<input type="checkbox"/>				
202. Things that used to slide right off my back now really irritate me.-----	<input type="checkbox"/>				
203. No matter how hard I try, I feel no sense of accomplishment.-----	<input type="checkbox"/>				
204. I worry about being recognized by ex-inmates.-----	<input type="checkbox"/>				

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Read each statement carefully and indicate your level of disagreement/agreement with each.

	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
205. My job requires that I be creative.	<input type="checkbox"/>				
206. I receive inconsistent requests from two or more supervisors.	<input type="checkbox"/>				
207. The rules are more leniently enforced depending on your race.	<input type="checkbox"/>				
208. At work, I am at risk of verbal abuse from co-workers.	<input type="checkbox"/>				
209. My spouse/significant other and I have different goals for us as a couple.	<input type="checkbox"/>				
210. I have too much at stake in my job to change jobs now.	<input type="checkbox"/>				
211. I trust my co-workers.	<input type="checkbox"/>				
212. My job as a correction officer measures up to the expectations I had when I started.	<input type="checkbox"/>				
213. The department's newsletter provides information helpful in performing my work.	<input type="checkbox"/>				
214. I have to put off doing things at work because of demands on my time at home.	<input type="checkbox"/>				
215. The facility that I work in promotes a sense of personal integrity.	<input type="checkbox"/>				
216. My job produces strain that makes it difficult to fulfill family duties.	<input type="checkbox"/>				
217. My life is as close to my ideal as possible.	<input type="checkbox"/>				
218. Roll call provides an opportunity to share stories about success and failure in dealing with inmates.	<input type="checkbox"/>				
219. Travel to and from work is convenient.	<input type="checkbox"/>				
220. I feel certain about how much authority I have.	<input type="checkbox"/>				
221. I just can't seem to remember things any more.	<input type="checkbox"/>				
222. I worry about protecting my family from ex-inmates.	<input type="checkbox"/>				
223. I get to do a number of different things on my job.	<input type="checkbox"/>				
224. I do things that are apt to be accepted by one supervisor and not accepted by others.	<input type="checkbox"/>				
225. I receive assignments based on my ability not my race.	<input type="checkbox"/>				
226. Promotions within the department are handled fairly.	<input type="checkbox"/>				
227. At work, I am at risk of physical abuse from co-workers.	<input type="checkbox"/>				
228. My job makes it difficult to be the kind of spouse/parent I'd like to be.	<input type="checkbox"/>				
229. I am searching for a new career.	<input type="checkbox"/>				
230. My co-workers are helpful in getting the job done.	<input type="checkbox"/>				
231. The work is interesting.	<input type="checkbox"/>				
232. The newsletter "This Week" is informative.	<input type="checkbox"/>				
233. If I had a chance to do it all over again, I would still want to be a correction officer.	<input type="checkbox"/>				
234. If a good friend of mine were interested in being a correction officer, I would strongly recommend the job.	<input type="checkbox"/>				

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Read each statement carefully and indicate your level of disagreement/agreement with each.

	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
235. I can see the results of my work.	<input type="checkbox"/>				
236. My hours are good.	<input type="checkbox"/>				
237. I am fairly rewarded considering my responsibilities.	<input type="checkbox"/>				
238. You must keep conversations with an inmate short and businesslike.	<input type="checkbox"/>				
239. I receive an assignment without the necessary staff to complete it.	<input type="checkbox"/>				
240. Supervisors are generally the first ones to praise a CO for a job well done.	<input type="checkbox"/>				
241. It is important for a CO to have compassion.	<input type="checkbox"/>				
242. Supervisors maintain a high standard of performance in their own work.	<input type="checkbox"/>				
243. The best way to deal with inmates is to be firm and distant.	<input type="checkbox"/>				
244. Sometimes a CO should be an advocate for an inmate.	<input type="checkbox"/>				
245. The administration trusts me.	<input type="checkbox"/>				
246. I am fairly rewarded taking into account my education and training.	<input type="checkbox"/>				
247. I receive an assignment without adequate resources.	<input type="checkbox"/>				
248. I seem to have enough time to get everything done that I am expected to do.	<input type="checkbox"/>				
249. The CO's only concern is with facility security.	<input type="checkbox"/>				
250. Supervisors are competent.	<input type="checkbox"/>				
251. The way to get respect from inmates is to take an interest in them.	<input type="checkbox"/>				
252. Administration cares more about the inmates than about the COs.	<input type="checkbox"/>				
253. I am fairly rewarded in view of the amount of experience I have.	<input type="checkbox"/>				
254. I have the freedom to decide what I do on the job regarding inmates.	<input type="checkbox"/>				
255. If a CO wants to do counseling, they should change jobs.	<input type="checkbox"/>				
256. I am asked to do excessive amounts of work.	<input type="checkbox"/>				
257. A CO should work hard to earn trust from inmates.	<input type="checkbox"/>				
258. Supervisors encourage innovative/creative thinking.	<input type="checkbox"/>				
259. Any infraction of the rules by an inmate should result in disciplinary action.	<input type="checkbox"/>				
260. If it is an officer's word against an inmate's, the administration will generally believe the inmate.	<input type="checkbox"/>				
261. I am fairly rewarded for the amount of effort I put forth.	<input type="checkbox"/>				
262. It is basically my own responsibility to decide on how to handle inmates.	<input type="checkbox"/>				
263. I have enough authority to do my job.	<input type="checkbox"/>				
264. The job demands more than I can fit into a workday.	<input type="checkbox"/>				
265. Rehabilitation programs should be left to mental health professionals.	<input type="checkbox"/>				

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Read each statement carefully and indicate your level of disagreement/agreement with each.

- | | Strongly Disagree | Disagree | Undecided | Agree | Strongly Agree |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 266. The supervisor who evaluated me for my annual review had first hand knowledge of my performance. | <input type="checkbox"/> |
| 267. With some inmates, an officer becomes a substitute parent. | <input type="checkbox"/> |
| 268. Supervisors are respectful to the COs. | <input type="checkbox"/> |
| 269. I am fairly rewarded for the stress and strains of the job. | <input type="checkbox"/> |
| 270. I have a lot to say about what happens on my job. | <input type="checkbox"/> |
| 271. When an officer is injured by an inmate, the administration is there for support. | <input type="checkbox"/> |
| 272. I am required to do an excessive amount of overtime. | <input type="checkbox"/> |
| 273. Counseling is a job for counselors, not correction officers. | <input type="checkbox"/> |
| 274. No one ever asks COs for suggestions relating to their job. | <input type="checkbox"/> |
| 275. Improving facilities for inmates makes the officers' job more difficult. | <input type="checkbox"/> |
| 276. Supervisors are helpful in getting the job done. | <input type="checkbox"/> |
| 277. If a CO does good work, they get recognition. | <input type="checkbox"/> |
| 278. The administration is supportive when there is an incident concerning an inmate. | <input type="checkbox"/> |
| 279. I decide when I take breaks. | <input type="checkbox"/> |
| 280. Management expects too much work from COs. | <input type="checkbox"/> |
| 281. A personal relationship with an inmate invites problems. | <input type="checkbox"/> |
| 282. Most lieutenants and captains are concerned about their COs' morale. | <input type="checkbox"/> |
| 283. Supervisors know their job well. | <input type="checkbox"/> |
| 284. Rehabilitation programs are a waste of time and money. | <input type="checkbox"/> |
| 285. The administration is supportive when an officer is the subject of an investigation due to inmate accusations. | <input type="checkbox"/> |

Over the past 6 months-

- | | Gotten worse | Not changed | Improved a little | Improved a lot |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| 286. the quality of service to the inmates has | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 287. the behavior of the inmates has | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 288. the physical surroundings have | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 289. my relationship with supervisors has | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 290. the department has | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 291. the type of inmate sent to my facility has | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

During the past 6 months, how often have you-

- | | | | | | | |
|--|--------------------------------|---|--|--------------------------------------|---|--------------------------------|
| 292. blamed yourself for things that are not under your control? | <input type="checkbox"/> Never | <input type="checkbox"/> Once in 6 months | <input type="checkbox"/> A few times a month | <input type="checkbox"/> Once a week | <input type="checkbox"/> A few times a week | <input type="checkbox"/> Daily |
| 293. had a loss of any feelings for family and friends? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 294. experienced mood swings? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 295. felt guilty about everything that went wrong? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 296. been concerned about being able to pay the bills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 297. had to work overtime to make ends meet? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 298. had to work a part-time job in order to pay the bills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 299. had a concern about having enough money for retirement? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 300. found yourself living from paycheck to paycheck? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

During the past 6 months, after a stressful situation, how often did you-

- | | | | | | | |
|--|--------------------------------|---|--|--------------------------------------|---|--------------------------------|
| 301. draw on past experiences from similar situations? | <input type="checkbox"/> Never | <input type="checkbox"/> Once in 6 months | <input type="checkbox"/> A few times a month | <input type="checkbox"/> Once a week | <input type="checkbox"/> A few times a week | <input type="checkbox"/> Daily |
| 302. seek advice from a senior officer? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 303. want to be left alone? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 304. seek advice from a friend or relative? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 305. seek advice from your spouse/significant other? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 306. exercise to relieve the stress? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 307. seek professional help (for example EAP)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

During the past year, have you or anyone in your immediate family experienced the following?

- | | | |
|---|-----------------------------|------------------------------|
| 308. The death of an inmate? | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| 309. Trouble with a co-worker? | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| 310. An inmate accuse you of abuse? | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| 311. A change in work location? | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| 312. Trouble with a supervisor? | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| 313. An involuntary transfer? | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| 314. A change in shift assignment? | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| 315. A disciplinary action? | No <input type="checkbox"/> | Yes <input type="checkbox"/> |

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CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

During the past 6 months, during a stressful situation, how often did you-

- | | | | | | | | | | | | | | |
|------|---|--------------------------|-------|--------------------------|------------------|--------------------------|---------------------|--------------------------|-------------|--------------------------|--------------------|--------------------------|-------|
| 316. | respond to the source of stress by shouting/yelling?----- | <input type="checkbox"/> | Never | <input type="checkbox"/> | Once in 6 months | <input type="checkbox"/> | A few times a month | <input type="checkbox"/> | Once a week | <input type="checkbox"/> | A few times a week | <input type="checkbox"/> | Daily |
| 317. | become argumentative?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 318. | kick or slam your fist against something?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 319. | strike out at the source of the stress?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 320. | use physical force to end the situation?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |

In the last 6 months, how often have you-

- | | | | | | | | | | | | | | |
|------|---|--------------------------|-------|--------------------------|------------------|--------------------------|---------------------|--------------------------|-------------|--------------------------|--------------------|--------------------------|-------|
| 321. | watched television?----- | <input type="checkbox"/> | Never | <input type="checkbox"/> | Once in 6 months | <input type="checkbox"/> | A few times a month | <input type="checkbox"/> | Once a week | <input type="checkbox"/> | A few times a week | <input type="checkbox"/> | Daily |
| 322. | read a newspaper, magazine, or a book?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 323. | visited with family, friends, or neighbors?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 324. | played sports (baseball, basketball, volleyball, golf, bowling, etc.)?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 325. | worked on hobbies?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 326. | worked around the house?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 327. | dined out at a restaurant?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 328. | gone to the movies?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 329. | gone to a party/dancing?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 330. | gone to a nightclub or bar?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 331. | gone bike or motorcycle riding?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 332. | gone walking, running, jogging, swimming, and/or hiking?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 333. | gambled at a casino or on a sports event?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 334. | worked out at home or a gym?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 335. | gone fishing/hunting?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |
| 336. | used a computer?----- | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | |

The National Institute of Justice Grant Award #98-FS-VS-003 funds this program

CONNECTICUT CORRECTION OFFICER FOCUS SURVEY

Thank you. We want to assure you again that your responses will be strictly confidential. If you have any questions concerning this survey please call or e-mail us at the numbers below.

S&R Associates

John B. Rogers, Ph.D.
(860) 928-6211
jbrogers08@snet.net

Mark E. Sullivan, Ph.D.
(860) 228-1154

Again, Thank you.

The National Institute of Justice Grant Award #98-FS-VS-003 funds this program

Appendix H: Additional Materials for Developing a Correctional Officer Stress Program

Peer Support Training Manual

The Counseling Team

This 160-page manual provides extensive information on peer supporter services, basic support methods, listening skills, critical incident stress, grief and bereavement, assessment and referral, and suicide. The Counseling Team charges a \$15 handling and postage fee for the manual.

The Counseling Team
Suite 11
1881 Business Center Drive
San Bernardino, CA 92408
(909) 884-0133
fax (909) 384-0734

Post Trauma Staff Support Program Operations Manual

Texas Department of Criminal Justice, Institutional Division

This 15-page manual presents detailed lists describing the responsibilities of program participants and criteria for their appointment (see the Texas case study in chapter 3), as well as several forms included in an appendix.

Elaine Smith
Victim Services Coordinator
Texas Department of Criminal Justice
Institutional Division
P.O. Box 99
Huntsville, TX 77342-0099
(409) 437-8588

Critical Incidents Standard Operating Procedures

Shelby County (Memphis, Tennessee) Sheriff's Office

In addition to describing procedures and each group's responsibilities, this manual includes sources of employee benefits, ranging from the National Sheriff's Association to workers' compensation to support groups.

Donald Gregory
Shelby County Division of Corrections Training Academy
993 Dovecrest Road
Memphis, TN 38134
(901) 377-4545
fax (901) 387-5761

Stressed Out: Strategies for Living and Working with Stress in Corrections

American Correctional Association

This book by Gary F. Cornelius discusses the nature of correctional officer stress and provides concrete approaches for preventing and treating stress. The advice reflects first-hand knowledge of the correctional environment—the author is a lieutenant in charge of programs and recreation for the Fairfax County (Virginia) Adult Detention Center.

American Correctional Association
4380 Forbes Boulevard
Lanham, MD 20706
(301) 918-1800

Preventing Inappropriate Staff/Inmate Relationships

Arizona Department of Corrections, December 1994

This lesson plan for training officers in how inappropriate staff-inmate relationships begin includes indicators of a developing relationship and methods of intervening.

National Institute of Corrections
Training Center
(800) 877-1461, ext. 110

Promising Practices and Strategies for Victim Services in Corrections

National Center for Victims of Crime

This 210-page curriculum for training correctional agencies to respond to victimized staff includes a student manual that addresses the culture of corrections and provides correctional program options and sample State agency policies and procedures for responding to critical incidents. The curriculum includes trainer lesson plans to help workshop participants educate others about staff victimization issues.

Trudy Gregorie
Director
Victim Services and Program Development
National Victim Center
Suite 300
2111 Wilson Boulevard
Arlington, VA 22201
(703) 276-2880
fax (703) 276-2889

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About the National Institute of Justice

The National Institute of Justice (NIJ), a component of the Office of Justice Programs, is the research agency of the U.S. Department of Justice. Created by the Omnibus Crime Control and Safe Streets Act of 1968, as amended, NIJ is authorized to support research, evaluation, and demonstration programs; development of technology; and both national and international information dissemination. Specific mandates of the Act direct NIJ to:

- Sponsor special projects and research and development programs that will improve and strengthen the criminal justice system and reduce or prevent crime.
- Conduct national demonstration projects that employ innovative or promising approaches for improving criminal justice.
- Develop new technologies to fight crime and improve criminal justice.
- Evaluate the effectiveness of criminal justice programs and identify programs that promise to be successful if continued or repeated.
- Recommend actions that can be taken by Federal, State, and local governments as well as by private organizations to improve criminal justice.
- Carry out research on criminal behavior.
- Develop new methods of crime prevention and reduction of crime and delinquency.

In recent years, NIJ has greatly expanded its initiatives, the result of the Violent Crime Control and Law Enforcement Act of 1994 (the Crime Act), partnerships with other Federal agencies and private foundations, advances in technology, and a new international focus. Examples of these new initiatives include:

- Exploring key issues in community policing, violence against women, violence within the family, sentencing reforms, and specialized courts such as drug courts.
- Developing dual-use technologies to support national defense and local law enforcement needs.
- Establishing four regional National Law Enforcement and Corrections Technology Centers and a Border Research and Technology Center.
- Strengthening NIJ's links with the international community through participation in the United Nations network of criminological institutes, the U.N. Criminal Justice Information Network, and the NIJ International Center.
- Improving the online capability of NIJ's criminal justice information clearinghouse.
- Establishing the ADAM (Arrestee Drug Abuse Monitoring) program—formerly the Drug Use Forecasting (DUF) program—to increase the number of drug-testing sites and study drug-related crime.

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