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AMERICA'S PRISON SYSTEMS: BEGINNING THE SWITCH FROM PUNITIVE TO REHABILITATIVE

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AMERICA'S PRISON SYSTEMS: BEGINNING THE SWITCH FROM PUNITIVE TO
REHABILITATIVE

by

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Abstract

America has one of the highest rates of incarceration in the world, along with many issues that keep its inmate population and recidivism rates high. The current inmate population faces unique challenges as it disproportionally consists of racial minorities, those with mental illnesses, and nonviolent drug offenders. Correctional rehabilitative programing, while implemented with good intentions, lacks effectiveness. This is due to factors including institutional staffing mindset and minimal development to expand inmate programs. There is also a lack of overall access to drug and educational courses that are so greatly needed for the incarcerated population. The reentry process for inmates in many correctional facilities falls short in parole and internal case management services due to these same issues. Many internal case managers lack the qualifications needed to be successful, which in turn negatively impacts the effectiveness of reentry and continues the cycle of recidivism. Staff employed in correctional facilities face unique challenges that lead to massive turnover rates, burnout, and increased mental illness related to environmental stress and trauma. In correctional facilities, staff issues directly impact the environment and responses from inmates, often creating turmoil within a facility. This paper will consist of personal experiences working in the South Dakota State Penitentiary, first-hand experience working in case management for Pathways Shelter for the Homeless community transitional program, and published research. I will analyze why it is necessary to target the key areas of rehabilitative programing, correctional staff concerns, and the management of inmate's reentry process to change America's correctional systems from a punitive structure to a rehabilitative one. Creating a rehabilitative structure will in turn assist in lowering our high recidivism rates and improve the wellbeing of American society.

Literature Review

The History of Incarceration

      To create a better understanding of why Americas correctional system has so many flaws, we need to understand its history. Key events starting from the creation of the US correctional system to The War on Drugs in the 1970's have created a system that have snowballed our systems into what we see today. Historically, correctional focuses have shifted back and forth from punitive and rehabilitative. To begin understanding why this is, I first analyzed the 2016 Netflix documentary 13th by film maker Ava DuVernay, made in collaboration with activists, politicians, historians, and experts in corrections. The 13th amendment granted freedom to enslaved people in America and allowed them to be seen as citizens. The issue with this amendment is that it contained a loophole that many white people, especially in the American South, exploited to ensure cheap labor from formerly enslaved people. The Netflix documentary *13th* cites this amendment: "Neither slavery nor involuntary servitude, except as a punishment for crime whereof the party shall have been duly convicted, shall exist within the United States, or any place subject to their jurisdiction" (DuVernay, 2016). With this clause, the mass persecution of freed slaves began, keeping the idea of slavery alive. Towards the end of the century, reformers of the correctional system pushed "heavily on new social "scientific" ideas, "Progressive Era" reformers operated both under behaviorist models of correctional incentivization as well as eugenic theories about racial delinquency" (Delaney et al., 2016).

      Between the years of 1890 and 1925, the Industrial era of the correctional system focused on using labor to promote discipline and provide inmates with skills to assist them after release. These ideals sifted into the exploitation of inmate labor. "Convict leasing programs that operated through an external supervision model—in which incarcerated people were supervised entirely

by a private company that was paying the state for their labor—turned a state cost into a much-needed profit and enabled states to take penal custody of people without the need to build prisons in which to house them" (Delaney et al., 2016). Inmate labor is still being used today. While not the extent of this historical period, inmates still produce many products for companies and states. For example, in South Dakota, inmates at the state penitentiary produce all the road signs for the state.

Shifting from this inmate focused era, the Punitive Era began in 1935. This era focused on custody and institutional security to fix the shortcomings of the Industrial Era. Focus again shifted in the aftermath of WWII to a rehabilitative stance. The Treatment Era used diagnoses and medical models to assess inmates instead of focusing solely on their criminal behavior to promote rehabilitation. This progressive, rehabilitative era again shifted when former President Richard Nixon began the War on Drugs campaign. (Roberts, 1997)

During the peak of the Civil Rights Movement, crime began to rise. This crime spike was caused largely by the Baby Boomer generation coming of age, but as politicians were desperate to control the rise of the Civil Rights Movement, they attributed the crime boom to African Americans and other people of color. A quote said by Richard Nixion's top advisor at the time, John Ehrlichman, explains the startling goal behind his *War on Drugs* campaign:

> You understand what I'm saying? We knew we couldn't make it illegal to be either against the war or black, but by getting the public to associate the hippies with marijuana and blacks with heroin. And then criminalizing both heavily, we could disrupt those communities...we could arrest their leaders, raid their homes, break up their meetings, and vilify them night after night on the evening news. Did we know we were lying about the drugs? Of course we did. (Taifa, 2021)

The Inter-American Commission on Human Rights stated in their report that the effects of this war on drugs during the era of the Civil Rights Movement as well as in the present specifically targets African American communities. "The Commission has previously considered that the war on drugs exacerbates racial disparities in arrests. Police target poor black neighborhoods to make low-level drug arrests, funneling a disproportionate number of African Americans and other people of color into the criminal justice system. One study found that between 1980 and 2007, Blacks were arrested nationwide on drug charges at rates relative to the population that were 2.8 to 5.5 times higher than white arrest rates" (Inter-American Commission on Human Rights & OAS, 2018). This criminalization of poor communities of color was only amplified with Ronald Reagan's presidency. During Reagan's *War on Drugs* law enforcement numbers tripled, poverty was at its peak, and the 'terroristic' crack cocaine convictions were met with extreme mandatory sentencing. This period from 1980 to 1995 is labeled as the Warehousing Era, in which the focus promoted mass incarceration to 'protect society'.
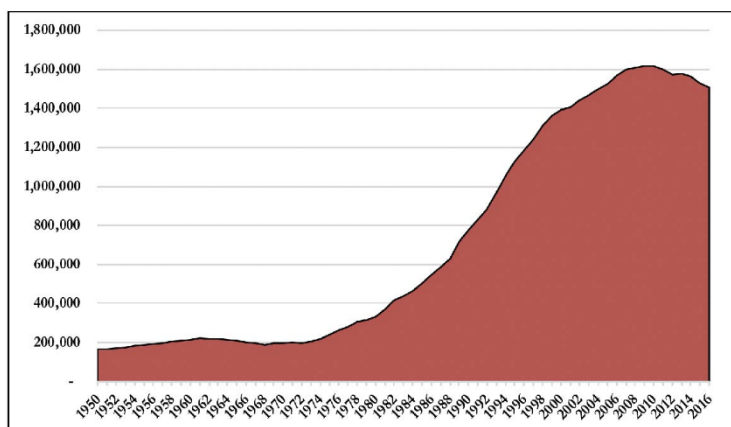

Prison System Growth (1950-2016)

Figure 1. Source: Cullen, J. (2018, July). *The history of mass incarceration*. Brennan Center for Justice. https://www.brennancenter.org/our-work/analysis-opinion/history-mass-incarceration

The boom in media coverage focused on crime made it impossible for politicians and presidential candidates to be "soft on crime." This hard-on-crime approach was extremely successful in presidential campaigns. Clinton's "mandatory minimums" in the 1994 crime bill was responsible for massive prison expansion. A report done by the ACLU and The Sentencing Project stated, "In General Recommendation 31 (2005), the committee advised all state parties to pay particular attention to these kinds of 'minimum punishments', as they disproportionately impact racial and ethnic minority groups. Consequently, the Committee recommended that the United States amend any such laws and policies that result in racially disparate sentencing" (American Civil Liberties Union & The Sentencing Project, 2022).

Further research from other historical and political experts confirms the harsh effects The War on Drugs had on the United States minority populations in the current Just Desserts Era. According to the Brennan Center for Justice, "The War on Drugs has targeted racial minorities through racial discrimination by law enforcement as well as by increasing enforcement in low-income urban areas, which are predominantly non-white" (Taifa, 2021). Nearly 80 percent of people in federal prisons and 60 percent of people in state prisons are black or Latino, which is significantly disproportionate to the amount of drug use in these communities when compared to white communities. Between the years 1980 and 1997, a span of only 17 years, the number of nonviolent drug offences went from 50,000 to 400,000. Today, close to half of currently incarcerated individuals in federal prisons have drug related charges (Stilkind, 2023).

Effective drug related programing for offenders has been lacking in its accessibility despite the growing need. According to the Bureau of Justice Statistics, "49% of state prisoners and 32% of federal prisoners who responded to their survey met the criteria for a substance abuse disorder, but just 12% of state inmates, and 15% of federal prisoners, received treatment in a

residential facility or unit since their incarceration" (Carson & Kluckow, 2023). Drug-related

programing is crucial for those with drug offences or active substance use disorders, as well as

for the general inmate population. In the same 2016 study, the BJS found that "nearly 90 percent

of state and 84 percent of federal inmate respondents reported ever using drugs, compared to 83

percent of state and 79 percent of federal prisoners in 2004" (Carson & Kluckow, 2023).

Comparing trends in our inmate population to trends in the public, we find other discrepancies

that suggest correctional programing has the potential to change. One notable discrepancy

between inmates and the general population is the prevalence of mental illness. The focus on

high rates of mental illness, along with other trends within the inmate population, has the

potential to shift the effectiveness of rehabilitative programing.

Rehabilitative Programming

In restructuring correctional programing, many aspects of the inmate population need to

be analyzed. High rates of untreated mental illness, low secondary education rates, and spiritual

leadership are all major areas that impact the effectiveness of correctional programs.

Understanding these factors will allow for an effective shift to a rehabilitation structure and

improve the overall correctional environment.

Mental Illness in Correctional Facilities

Mental illness is a widespread and serious issue in our society, so it's important to

address how mental illness, cognitive disabilities, and overall mental health are treated in

prisons. Compared to the general population, individuals with mental illness are three times more

likely to interact with police and are more likely to be arrested (Hoch et al., 2009). Statistics from

the Bureau of Justice Statistics report "Indicators of Mental Health Problems Reported by

Prisoners and Jail Inmates" found that "about two in five people who are incarcerated have a history of mental illness, which is twice the prevalence of mental illness within the overall adult population. About 63% with a history of mental illness do not receive mental health treatment while incarcerated in state and federal prisons. They also found that more than 50% of individuals who were taking medication for mental health conditions at admission did not continue to receive their medication once in prison" (Bronson & Berzofsky, 2017). Like the treatment of physical and cognitive disabilities, mental illnesses generate unique issues for facilities and staff that are often disregarded.

There has been a push by many organizations to create mental health related programs in prison facilities. However, routine issues in funding, staffing, and training have perpetuated the suffering of mentally ill prisoners. The Marshal Project, an organization dedicated to maintaining and improving the rights of inmates and previously incarcerated individuals, met with prison psychologists to see if initiatives to improve mental health have been successful. What they found was disheartening. "In 2014, amid mounting criticism and legal pressure, the Federal Bureau of Prisons imposed a new policy promising better care and oversight for inmates with mental health issues. But data obtained by The Marshall Project through a Freedom of Information Act request shows that instead of expanding treatment, the Bureau has lowered the number of inmates designated for higher care levels by more than 35 percent. Increasingly, prison staff are determining that prisoners—some with long histories of psychiatric problems— don't require any routine care at all" (Tompson & Eldredge, 2018). Continuous and individualized care is extremely important when it comes to addressing mental health, but some practices can do more harm than good.

When discussing mental health, the dangerous and growing issue of suicide must be presented. Disability Rights Oregon (DRO) published a report called "Grave Consequences: How the Criminalization of Disability Leads to Deaths in Jail", in which they investigated deaths in Oregon's jails and the events resulting in those losses. The research found, "the use of restraint practices that were banned in clinical settings, inadequacy in assessing medical conditions, inability to provide necessary treatment, and failure to take preventive measures in addressing suicide risks" (Disability Rights Oregon, 2021). They found that jail policies for suicide watches increased the likelihood of harm. "Most jails have limited options to keep inmates who pose a suicide risk safe. Jail protocols include segregation, denying phone calls and showers, or putting inmates in suicide smocks, stripping them of all other clothing and belongings. These protocols treat suicide risk punitively which deters people in jail custody from alerting jail staff of their suicidal ideation" (Disability Rights Oregon, 2021). Unfortunately, suicide is far from uncommon in correctional facilities, which I learned during my time at the South Dakota Penitentiary. In my working experience, suicide attempts were viewed as 'normal' within the facilities were. Instead of a typical trauma response that someone in the general population would have to witness a suicide attempt, inmates instead expressed frustration for the inconvenience another inmate's attempt had caused them. Those who attempted suicide often became the topic of jokes and gossip among the rest of the inmate population, labeled as weak or attention seeking. This labeling was not only done by the inmates, but staff as well. Inmates who survived attempts would be ridiculed in private when they came to staff with complaints or concerns. Limited and ineffective options for mental health treatment and actively ignoring and ridiculing inmates for their mental health should be deemed unethical practices. While changing the mindset of the entire prison and prison staff population cannot be achieved with policy alone,

the addition of education, training, and therapeutic resources can help shift action and responses to the topic of mental health.

Advances in cognitive behavioral practices have shown great potential in not only addressing mental illness in prisons, but in its reduction of overall recidivism rates. In 2016 about 62% of those released from correctional facilities reoffend within three years, and 71% reoffend after five years (Clarke, 2022). Findings published in the National Library of Medicine found that "various psychological interventions have been used in custodial settings to improve outcomes for people released from prison, and to reduce reoffending. Some reviews suggested that cognitive behavioral therapy (CBT) programs are among the most effective interventions, with meta-analyses reporting recidivism risk reductions of 20–30%" (Davis et al., 2013). While these statistics are promising the current use of CBT is lacking with only 20% of American prisons using CBT programs and only 5% of individuals having access to them (Davis et al., 2013). Shifting focus and funding to therapeutic programs can help lower recidivism rates and improve the overall access to mental health treatment.

Robert Morgan, a professor of psychology at Texas Tech, has been developing a program called Changing Laves and Changing Outcomes. The focus of this program is to combine mental health and behavioral treatment to address criminal behaviors and reduce recidivism. With this combination of treatment, inmates learn to develop both coping skills in relation to their past behaviors and practical life skills. Morgans six-month program included a combination of individual and group therapy sessions. Focuses of these sessions included productive ways of handling emotions like anger and fear, how to interpret negative interactions with others, and education on effects and proper use of medication for their mental health treatments. Morgan found that "participants experienced decreased depression, anxiety, hostility, paranoid ideation,

psychoticism and reactive criminal thinking" (Morgan et al., 2013). In an explanation of his program Morgan states, "We learned through a series of studies that people with mental illness in the justice system are there in part because they present with criminal risk in similar ways to those who are not mentally ill—they interpret interpersonal situations differently than noncriminals. For example, this population is more likely to see someone bumping into them as asserting dominance rather than as an accident" (Stringer, 2019). However, this is not the only method in which rehabilitation can be achieved. The stigmatization of receiving mental health services, particularly for men, can be seen in the entirety of our society. To work around this, indirect ways one may improve their mental health can be achieved through other avenues, such as religious and educational programming.

Spiritual Programing

In my experiences at the South Dakota State Penitentiary, many who found religion expressed that it has helped set them on the right path and will continue to help them on the outside. As access to religion and religious practices are taken very seriously on state and federal levels for correctional institutions, many inmates take advantage of the opportunities provided. Even those who did not enter the correctional system practicing a religion will sign up to attend different religious services or events out of curiosity or to find social groups to join. Regardless of the reason for inmates taking part in a variety of religious services, it provides them with beneficial resources, educational opportunities, and new experiences to use as an outlet for boredom (Roman & Roman, 2016). Boredom can be disastrous among inmates, impacting their mental health and creating tension that ultimately leads to rule violations, fights, or time spent in disciplinary housing. States like South Dakota, who have a large Native American population, provide inmates access to culturally appropriate religious ceremonies and practices. In

conversations with Native American inmates who attended these services, they often expressed that a disconnection from their heritage impacts their mental health and leads them to become depressed or act out.

Other members of religious groups spoke highly of the religious leaders who volunteered their time at the Penitentiary. Not only do these leaders impact active inmates, but those recently released from incarceration. While providing case management for parolees at Pathways Shelter for the Homeless, I have seen many participants keep in regular contact with the religious leaders from their correctional facilities. Many pastors connect inmates with churches in their parole areas, allowing them access to a resource that would hold them accountable in their faith while keeping them from reoffending. While this method may not work for all, I have personally seen it be successful for many parolees in the Pathways program alone.

Educational Programing

Educational programing has also seen success in lowering recidivism rates. Research done by the Vera Institue of Justice found that 64% of the inmate population had only a high school diploma compared to about 50% of the general population. Even more concerning was that about 30% of the inmate population did not have a high school diploma at all, compared to only 14% of the general population (Oakford et al., 2019). Discrepancies in the levels in offender education can also be seen in recidivism rates. Offenders released from correctional facilities who did not complete a high school education were rearrested at the highest rate at approximately 60%, while those who had a college degree were rearrested at a rate of only 19% (Saris et al., 2016). In a meta-analysis of correctional education programing, RAND found significant improvements in literary for reading and math, employment, and recidivism rates for those who participated in available post-secondary educational programing. Results from this

study included 43% lower odds of recidivating and 13% higher odds of employment for those who participated in programming (Davis et al., 2013).

Successful State Programing

In a report done by National Reentry Resource Center, Reducing Recidivism: States Deliver Results (2014), 8 states were analyzed based on their successful reduction in recidivism rates and programs implemented to address these rates. The report looks at the three-year recidivism rate for prison releases in 2007 compared to a three-year recidivism rate for prison releases in 2010. With many states implementing changes in their probation and parole systems, data also analyzes changes in parole violations from 2007 to 2013. With this data, states then explain what of their policy changes and legislation has contributed the most to their success in lowering their recidivism.

North Carolina[16]

Three-year recidivism rate for 2006 prison releases	Three-year recidivism rate for 2010 prison releases	Percent decline in recidivism rate
35.8 percent	28.9 percent	19.3 percent

	2007	2008	2009	2010	2011	2012	2013
Prison Population	38,423	39,326	40,824	40,102	41,030	38,385	37,469
Admissions to Prison	27,934	28,535	30,350	28,164	28,975	24,036	21,538
Releases from Prison	26,986	27,637	28,860	28,889	28,048	26,685	22,455
	2007	2008	2009	2010	2011	2012	2013
Probation Population	113,376	113,027	109,820	107,696	104,095	98,752	99,089
Probation Violators: Technical Revocations*	17,555	18,059	19,540	19,045	19,455	15,588	9,458
Probation Violators: New Offense Revocations*	3,627	4,053	4,221	4,168	4,140	4,131	3,496
Probation Violators: Graduated Sanctions	-	-	-	-	-	1,974	8,240

* Revocations can be to prison or to local jails

Figure 2. Source: National Reentry Resource Center & The Council of State Governments Justice Center. (2014). Reducing recidivism: States deliver results (2014). *The National Reentry Resource Center*. https://nationalreentryresourcecenter.org/resources/reducing-recidivism-states-deliver-results-2014

North Carolina cites their impressive change in recidivism rates in four statewide changes. Graduated sanction options give parole officers the power to impose immediate sanctions on parole violators other than prison time. Increased emphasis on individualized case planning with risk and need assessments during incarceration ensures inmates receive needed services upon release. Monthly training for probation officers to ensure fidelity to evidence-based practices allows for them to create effective and informed case plans. Finally, the establishment of five local reentry councils across the state with a dedicated coordinator maintains relationships with state and local reentry agencies and stakeholders to enforce connections and provide resources. "These improvements and resulting cost savings have enabled the state to close 9 correctional facilities, fund 175 additional probation officers, and support community-based treatment programs" (NRRC & The Council of State Governments Justice Center, 2014).

Another notable state's programing success is Wisconsin with a 9.1% reduction between its three-year return to prison rate for 2007 to the three-year return rate in 2010.

Three-year return-to-prison rate for 2007 releases	Three-year return-to-prison rate for 2010 releases	Percent decline in return-to-prison rate	Wisconsin[22]			
56.2 percent	51.1 percent	9.1 percent				
Three-year reconviction rate for 2007 prison releases	Three-year reconviction rate for 2010 prison releases	Percent decline in reconviction rate				
32.8 percent	29.6 percent	9.8 percent				
	2007	2008	2009	2010	2011	2012	2013
Prison Population	23,542	23,219	23,007	22,571	22,521	22,494	22,469
Admissions to Prison	14,249	14,739	14,651	14,758	13,659	12,607	12,674
Releases from Prison	13,976	15,107	14,903	15,237	13,763	12,668	12,725
	2007	2008	2009	2010	2011	2012	2013
Probation Population	53,056	50,273	47,666	46,504	46,794	46,689	47,328
Probation Violators: Technical Revocations*	2,172	2,001	1,858	1,663	1,481	1,395	1,501
Probation Violators: New Offense Revocations*	632	639	549	616	548	511	588
Parole Population	16,683	18,049	18,838	19,663	19,784	19,733	19,952
Parole Violators: Technical Revocations*	3,269	2,904	3,055	2,876	2,739	2,665	2,548

Figure 3. Source: National Reentry Resource Center & The Council of State Governments Justice Center. (2014). Reducing recidivism: States deliver results (2014). *The National Reentry Resource Center*. https://nationalreentryresourcecenter.org/resources/reducing-recidivism-states-deliver-results-2014

Like North Carolina, case planning/risk assessment and alternative sanctioning power for community corrections agents were cited as reasons for success in their recidivism rates. Uniquely, Wisconsin uses a unified case planning system along with reassessments through inmate's stages of incarceration that allow agencies and community partners access to case plans. This constant work on inmate's case plans through various stages and multiple case workers allows for individualized plans that can change based on an individual's changing needs and environments. Wisconsin DOC has also partnered with many state development boards to promote employment readiness. These state boards work through the "Windows to Work

program, which offers comprehensive reentry services (3 to 9 months prior to release) and post-release programming (for approximately 12 months after release) with a focus on skills training, financial literacy, and other assistance needed to help participants find and maintain employment" (NRRC & The Council of State Governments Justice Center, 2014). Finally, Wisconsin has increased community-based alternatives to sending parole violators back into prison. These alternatives include, "cognitive behavioral programming, alcohol and drug treatment, education, vocational and employment opportunities, and treatment for individuals with serious mental disorders" (NRRC & The Council of State Governments Justice Center, 2014). The progress these states have achieved through evidence-based practices and programing is a hopeful step in the push towards lowering recidivism rates and overall rehabilitation.

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Barriers to Rehabilitation

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Staff Recruitment, Training, and Retention

In the development of rehabilitative programing, staffing structure plays an important role in how effective the outcome of those programs will be. With high rates of burnout, turnover, and generally negative mindsets, staff can be a barrier to the inmate population's chances at rehabilitation.

Staff Stress and Burnout

The unique nature of correctional facilities generates issues for staff who work within its walls. The work that officers and unit staff do as well as the often-violent nature of inmates impacts the mental health and attitude of staff. In a journal published by the National Library of Medicine, researchers state that, "correctional officers report significant rates of depression, physical health problems (stress-related illness, heart attacks, blood pressure, ulcers), burnout,

compassion fatigue, work-home conflict, divorce, and even a shortened life span" (Fusco et al., 2021). During the 2023 NIJ National Research Conference, Natasha Frost, a professor and associate dean at Northeastern University, presented her team's research on correctional officer well-being, officer suicidality, and the effects of officer suicide on colleagues. Frost's research found that "about 25% of correctional officers in the study self-reported symptoms consistent with at least one psychological distress outcome. The average suicide rate for the Massachusetts Department of Corrections officers over this period was approximately 105 per 100,000 — at least seven times higher than the national suicide rate" (Kohl et al., 2023).
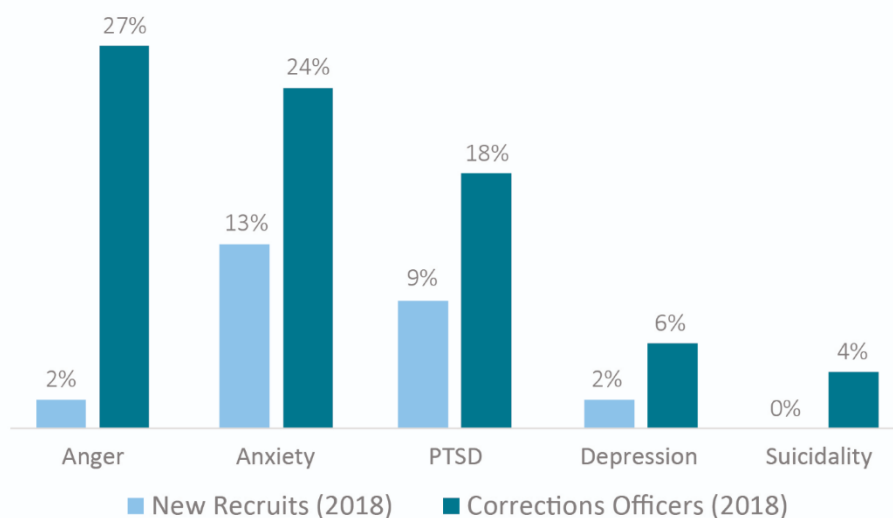
Figure 4. Source: Natasha Frost et al., "Turning Points in the Correctional Career: A Longitudinal Study of Occupational Stress, Trauma Exposure, Psychological Distress, and Suicide Risk Among Correction Officers," PowerPoint presentation, NIJ Research Conference, 2023

Due to the often-violent nature of correctional facilities, correctional officers tend to have a higher prevalence of PTSD and PTSD related symptoms. A study done by the Office of Justice

Programs found that approximately 27% of a total of 3599 correctional officers in the United States had PTSD (Spinaris et al., 2012). This study also found that "correctional workers screening positive for PTSD demonstrated statistically significant higher frequencies of memory impairment, depression, sleep difficulties, digestive problems, heart disease, skin conditions, and obesity than those screening negative" (Spinaris et al., 2012). It is not only the active violence in correctional facilities causing this prevalence in PTSD and stress, but also the threat of violence.

During my time working at the South Dakota State Penitentiary, "code reds" were often heard over the radio. During code reds, it is important for all surrounding staff to respond as quickly as possible. Code reds could range anywhere from a medical emergency, a fight between inmates, a staff assault, or simply if an officer's radio tipped to a 90-degree angle. Code reds could be heard frequently throughout the facility, creating a stressful sense of unknowing. This impending sense that violence could happen at any time made it impossible to fully relax, even after leaving the facility. I would find myself jumping at loud noises more than usual while off work. In addition, it took longer for me to calm down after being startled. It was this stress that began to change my positive mindset while at work. I entered the system wanting to see the best in people, and in a mere seven months I found myself becoming bitter towards inmates. This loss of a positive mindset was even more prevalent in my coworkers who have worked in corrections for many years.

In a comparative perspective on officer wellness: American reflections from Norwegian prisons, researchers analyzed workplace dynamics in countries outside of the US to lower American correctional staff stress. "This study examines the perspectives of staff and leaders from the Pennsylvania Department of Corrections who traveled to Scandinavia as part of a correctional exchange. Each day of the trip, correctional staff recorded their qualitative

reflections and completed a basic survey about their observations and experiences. This article examines both forms of data to explore correctional officer wellness from the perspective of American correctional officers" (Horowitz et al., 2021).
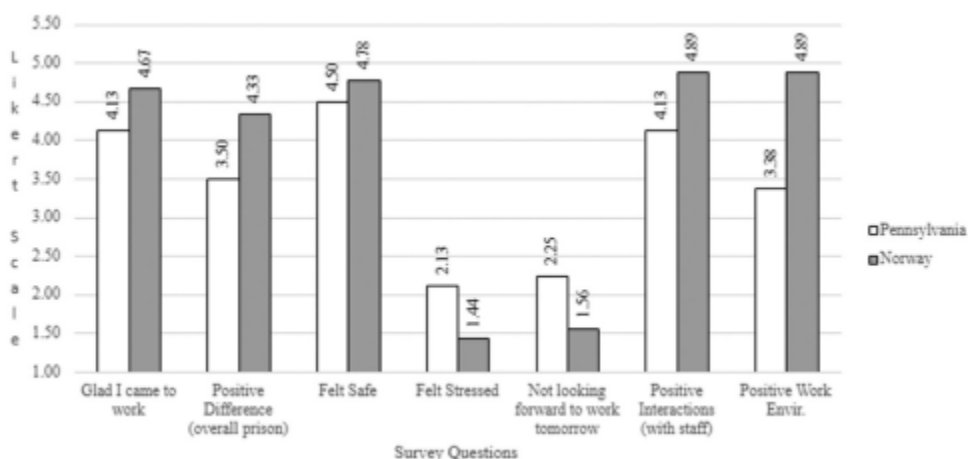

Figure 5. Source: Horowitz, V., Greberman, E. R., Nolan, P. E., Hyatt, J. M., Uggen, C., Andersen, S. N., & Chanenson, S. L. (2021). A comparative perspective on officer wellness: american reflections from norwegian prisons. *Criminal Justice Studies*, *34*(4), 477–497. https://doi.org/10.1080/1478601x.2021.2001231

After the trip concluded, both staff from Pennsylvania and Norway answered a questionnaire on a scale of one to five, one being strongly disagree and five being strongly agree. While the small sample pool from this project did not have statistical tests, the keys take aways were that American correctional officers felt safer in the Norwegian prisons and that the Norwegian work environment was far more positive than their own. The general mindset of correctional staff impacts inmates because of the constant interaction staff and inmates have. Improving work environment to reflect that of Norwegian facilities will overall reflect in staff and inmate relations.

Normalization

With the normalization of certain interactions between staff and inmates, changes in staff mentality will be a difficult process. My experiences entering the correctional system as an employee with no previous experience working with this population made me realize there is a normalization of what we see. Those on the outside do not realize how much of a sheltered system the prison environment is. Here are a few things that seem to be normal following my experiences working in corrections:

- An inmate had boiling water mixed with baby oil thrown in their face by their cellmate.

- Some inmates in the mental health unit would regularly disembowel themselves.

- An inmate to told me the next time they try to kill themselves they won't be able to be resuscitated.

- Multiple stated to me that if "shit goes down" I won't have anything to worry about because I'm "one of the good ones."

- One of my coworkers casually talked about how someone overheard inmates saying they were going to kill her and rape her dead body.

- I read reports about how my coworker was ganged up on and beaten. For the next month, I saw that coworker with a severely bruised face.

- I had insults screamed at me by men twice my size.

- I've read the countless rape charges of the staff orderlies who cleaned my office.

- I heard anywhere from 1 to 5 code reds called over the radio daily.

- I listened to many coworkers tell me how they want to "beat the shit out of every inmate here."

- "Spray" would be yelled as a warning by officers as they tried to break up fights. I was not upset by the violence, but by the fact I would be coughing uncontrollably for the next three hours because of the OC spray.

- I received multiple kites, a written method of communication between inmates and staff, from inmates begging to move halls because if someone learned about their charges, they were going to get hurt. Each time, I would catch myself thinking that they deserve it.

Nobody should have to experience these things, let alone have them so normalized in daily work life. While much of this comes from the unique culture of correctional institutions, they still need to be talked about not only among internal staff but also among the public. If those on the outside of the correctional system - especially those in positions of legislative and policy power - understood why our system functions this way, then we may have more ability to make changes, as well as to improve staff's work environment and mindset.

In a study comparing stress and burnout rates of US and Canadian correctional officers, an interesting result was found when it comes to officer ideologies. "Overall, officers who possess a human service/rehabilitation orientation experienced considerably less job stress than those who did not endorse such a position" (Dowden & Tellier, 2004). While this was true for Canadian officers, the opposite results were found among American officers. "Correctional personnel working in institutions in the United States are more vulnerable to stress due to the competing ideologies of punitive/custody and rehabilitation. In other words, correctional officers who espouse a human service/rehabilitation orientation may be in direct conflict with the predominant or equal emphasis placed on the custody/control functions of the correctional officer" (Dowden & Tellier, 2004). These results reinforce the need for environmental changes within American correctional facilities. Changing this system's structure to be more focused on

rehabilitation will be extremely difficult to implement giving staffing mindset, which is largely focused on punishment of the inmates. However, if changes to these facilities are introduced in a slow, controlled manner in collaboration with increased training of staff, overall staff mindsets have a better chance of pivoting to rehabilitation without backlash. This will improve stress levels for correctional officers overall. It's this change in staffing mentality that will allow rehabilitative programming to be successful with less fear of punishment from correctional officers.

Staffing Dynamics and Retention

The prevalence of PTSD among correctional staff can also lead to behavior and mindsets that generate a cycle of mistrust and rule violations in the inmate population. The time I spent working at the South Dakota State Penitentiary allowed me to see this firsthand. I would regularly hear statements from staff who have worked there for longer periods of time regarding the feelings they had for the general population of inmates. A statement from one officer specifically stood out to me in my work at the penitentiary. In a frustrated tangent over an argument with an inmate regarding a clothing policy, he stated to me that he "hated the inmates, every single one of them." Statements of hatred of the inmates were not uncommon to be shared among staff. It is language like this that brought up a concern for the effectiveness of rehabilitation of the inmate population. I noticed that inmates who often received writeups and spent time in disciplinary housing seemed to be doing it out of rebellion from interactions with staff. When staff go out of their way to give out write-ups or get into verbal altercations, the atmosphere becomes more hostile and mistrusting. With general disrespect and disregard for the other party's wellbeing, correctional staff and the inmate population perpetuate a hostile and untrusting environment unsuitable for any kind of progress (Forman-Dolan et al., 2022). This

means that any changes implemented to further rehabilitation efforts must also address staff relationships to be effective.

In my research into staffing retention in correctional facilities, I found that implementations focused on relieving the stress of the staff had an overall positive effect. However, the effectiveness of these ideas when put into practice could present some unexpected problems. There are many factors when it comes to working with the unique population of inmates that must be analyzed to change the impact of programming. The aspects I searched for in my research were how these changes could be brought about in a way that inmates would tolerate and respect. "Overall, institutional corrections generally prioritize their custodial or surveillance objectives over their behavioral change objectives" (Dowden & Tellier, 2004). Many solutions found would most likely be effective, but there is one thing commonly left out in research: how quickly the shifts would be. From my experience, rapid changes in staffing cause disturbances in inmate culture and routine.

Based on the environment in correctional facilities, many inmates attribute their survival to their manipulation of the staff during their incarceration. That desire to manipulate is heightened when large staffing changes are made. In the eyes of inmates, so-called "working the system" is a practice many inmates who have been incarcerated for many years feel they excel at. There are two approaches to manipulation I have seen: policy and emotional. Policy changes made by institutions are almost immediately known to inmates, whether that's from their access to written policy or through word of mouth. I have met many inmates who have memorized the written policy provided to them and will seek out every opportunity to sue the institution. This habit can become tiresome for staff, especially those who work in unit staffing since their main focuses are on factors unrelated to security. This policy manipulation also creates an issue with

new staff as it takes many months or even years to memorize the extensive number of polices

institutions have in place. In my experience, it is the emotional manipulation that leads to new

staff, officers and unit staff alike, to be exploited and ultimately fired, adding to corrections poor

retention rates. This exploitation is often exasperated by sex differences in staff and inmate

population. As a woman working in a male facility, I was warned in training that the inmates

would attempt to form a relationship with me. Even though the issue was expressed in training, I

found these attempts to be far more aggressive than expected. In Prison Guard Predators: An

analysis of inmates who established inappropriate relationships with prison staff, published

research in Deviant Behavior: An Interdisciplinary Journal, researchers have described three

types of inmates who enter sexual relationships with authority figures in corrections.

Descriptions are based off observed behaviors from inmates in their staff manipulation. The

research labels these categories the Heartbreakers, Hell-raisers, and Exploiters. (Worley et al.,

2003)

> Heartbreakers engage in a courtship process, such as a touching "game" to
> determine the staff's boundaries and to minimize the power differential. The Hell-raiser's
> goal is to create difficulties for the correctional facility, enjoying the notoriety of the
> inappropriate relationship and enjoying the embarrassment of the corrections
> administration. Finally, the Exploiter is skilled at identifying vulnerable staff. He
> intimidates and uses the romance to improve his status in the prison economy. He does
> favors for staff or gives them presents to begin a relationship, and later blackmails them
> for breaching the policy of accepting gifts; this is one way for inmates to obtain
> contraband. Techniques used by inmates to start relationships may include isolating staff

from their colleagues, testing boundaries, extortion, negotiation, and ingratiation. (Cooke

et al., 2019)

It took months and experienced staff's supervision for me to develop the personality

change needed to not only ignore advances but shut them down entirely. Unfortunately, many of

the female staff fall victim to inmates' constant advances and in turn lose their jobs over personal

relationships with inmates. This is not only an issue in the men's facility, but in the women's

facility as well with male staff. More developed training on the risk of manipulation of opposite

gender staff needs to be provided continually. The only time I was trained on this issue was at

the beginning of my internship.

A collaboration between RAND and the University of Denver found some promising

solutions to retaining staff in their study. As most correctional facilities in the US have their

primary focus in facility security, they looked for effective ways in shifting that model with the

goal of staffing retention. The 13 participants in this study consisted of a mixed number of

agency executives and scholars with a focus in correctional research. The responses from

participants after a 2-day intensive workshop called for a "shift in orientation from a

punitive/surveillance model to more of a human-services model as it may attract recruits in larger

numbers, mitigating vacancy issues. Such a model may also result in more manageable

workloads, a less stressful work environment, and ultimately, better outcomes for incarcerated

individuals, which can all help mitigate turnover issues" (Russo, 2019). They also determined

that a "shift toward an increased human-services role, along with a corresponding change in the

competencies sought would help the sector attract a broader base of new talent" (Russo, 2019).

Young staff are needed, as I mostly saw middle-aged individuals who worked in the facility for

many years during my internship. Of my training class of seven officers, only one remains after

less than a year of working. It is essential for facilities to hire and retain younger employees in their workforce.

Recommendations and Changes for South Dakota

Addressing Staffing Concerns

With issues involving staffing mindset, burnout, and retention it is difficult for facilities to place qualified individuals in important human service positions. Case management positions especially play a crucial role in developing inmate reentry plans and program placements. Collaboration between internal and external justice based human service roles can help educate correctional facilities case managers and improve inmates' overall reentry plans.

Case Management

Case management is extremely important both inside and outside of correctional facilities. Case managers create individualized case plans that will help guide their client towards success based on their needs (Healey, 1999). "A program needs to be delivered at the right time on the individual's trajectory of change to promote successful reentry. Individuals may want to change, but they might have a different underlying issue. One program alone would not address smaller underlying issues; matching appropriate services with needs at the right time would be more effective" (Martin & Garcia, 2022). The case manager's job is to have the right experience and to coordinate with services to provide successful case management. With massive caseloads, as well as the impacts of each parolee's environment, it is extremely important for unit case managers to set up an effective individualized program while inmates are still incarcerated. This sets inmates up for the best chance for success in reentry. More coordination needs to be had between correctional case managers and parole case managers.

An issue I saw with case management during my internship at the prison was the qualifications of the unit case managers. What often happens is correctional officers who have been working at the penitentiary for a couple years would apply for open unit staff positions. Seniority was very important in the hiring decisions of those positions, so most were filled internally. The problem with this is that those who filled the case management positions did not have any experience in case management and did not have degrees in fields that would qualify them for case management. Many of them did not care for the actual work that case managers would do. They just pursued the position for the desk job, hours, pay, or something different to do in the facility. If correctional facilities focused more of their efforts on finding outside employees or qualified internal employees with experience in case management or degrees in fields like social work, case management and related programs would become more efficient and effective. This would also alleviate some of the pressure put on parole officers with high caseloads. Martin and Garcia found that, "smaller caseloads give community corrections officers a greater ability to accurately assess clients' needs and direct them to more beneficial treatment programs based on those assessments" (Martin & Garcia, 2022).

Collaboration Between Resources

With so many areas of the criminal justice system, the different environments and backgrounds of those who work in this system are extremely varied. These varying environments create different ideals and beliefs on how offenders should be managed. One big difference between the justice systems professionals who work outside of correctional facilities and those who work in correctional facilities lies in the lack of understanding in each other's working environments. "There tends to be a conflicting relationship between corrections staff and justice involved individuals. This conflict stems from the involuntary conditions inherent to this work

setting. The primary task of corrections professionals to ensure safety and security often results in a firm disciplinary approach when managing the justice-involved population, an approach that requires control over people and conditions, and with an "us against them" perspective being frequently the outcome. Consequently, correctional staff tend to be perceived by justice-involved individuals as adversarial and depriving them of freedoms" (Kohl et al., 2023). These clashing ideals make it difficult for those who work in corrections and other justice-based disciplines to work together. If they were to be able to better understand the reasonings behind the others' stances on a larger scale, it may make it easier for the two groups to begin to create policy that initiates the change into a rehabilitative system. For example, correctional staff being educated on the history of corrections and the systematic oppression that many inmates groups face may change the perspective of staff. For those who don't work directly with prison populations inside the walls, working to understand the feelings correctional staff have and why security is their priority can help improve relations. There are many things correctional staff see and experience that would shock the outside world. The normalization of these experiences often creates a hardened demeanor, pushing staff to follow a punitive structure. This can make it difficult to promote successful rehabilitative changes.

Changes to Rehabilitation

With disproportionally high rights of mental illness and substance use among the inmate population, it is important to address these issues if other programing is to be effective. With increased assessments for mental health and substance use, internal programs as well as programs entered into upon release would be aware of an offender's needs. If programs and services take into account the individualized needs of inmates and parolees, case plans have the potential to be far more effective.

Mental Health and Drug Programing

With limited access to mental health services during incarceration, it is important to assess inmates' mental health needs before they are released so proper referrals can be made. There is often a waiting period for community behavioral health services just for an initial assessment appointment. If that assessment is done by a qualified mental health professional during incarceration, it eliminates the wait time once released and allows offenders to obtain medications at their place of parole. As we do not provide mental health assessments at Pathways, it is up to the individual to tell us whether they would like a referral to mental health services or not. Many inmates say no during their intake but indicate later in programing that they would like the referral. Clients who I have seen released with prescriptions for mental health medications are more motivated to obtain employment and follow their case plans than those who exit needing us to give referrals to services. This is also the case for substance use assessments. In 2022, South Dakotas DOC report found that 43.1% of court commitments and 46.4% of technical parole violation returns were on controlled substance abuse charges (South Dakota Department of Corrections, 2022). While those incarcerated on these charges are highly encouraged to take CBISA, Cognitive Behavorial Interventions for Substance Abuse, and other educational substance use courses, they are not required to. Making these courses a requirement during incarceration as well as providing them with resources to addiction support groups upon release may decrease the staggering percentage of substance-related parole violations. Assessments on substance use and mental health would allow case workers and parole officers to determine what level of services they would benefit from referrals to, such as inpatient and outpatient services, community behavioral health programs, and support groups, creating beneficial individualized case plans.

Managing Reentry

In a recent meeting between the DOC and Pathways Shelters case management team, many points were brought up regarding our Community Transition Program. This is a parole program the DOC funds allowing for eight beds in Pathways to be designated to those exiting South Dakota's male correctional facilities. We work with the parole agents of this program and provide specialized case management based on their unique needs. In this meeting we discussed where internal correctional case management is falling short and how South Dakotas new reentry division can begin achieving its goal of lowering recidivism rates. What our staff brought up during this meeting were patterns we have seen our participants facing immediately after release and during their parole that have impacted their success in reentry. These patterns we seek to change within the South Dakota DOC include increased mental health assessments, vital document applications, child support adjustments, and other human service referrals.

Improving Case Management

One of the biggest issues we have seen is the lack of vital documents offenders have when they're released. Vital documents include birth certificates, social security cards, and IDs. As the name implies, these documents are vital to obtaining jobs, housing, bank accounts, and various government assistance programs. Birth certificates specifically are the most important as these allow one to obtain the other vital documents. Not having this immediately can severely delay efforts in finding employment after release as it is not a quick document to obtain. Whether it is an issue of correctional case managers not knowing how to obtain these documents or an unwillingness to do so, it needs to be addressed to allow case managers like the ones at Pathways to begin finding housing and jobs for offenders. Without these documents, it can take up weeks

of the limited time we have with the participants in our program and lower chances for a successful exit.

Another issue I have seen in both my time working at the state penitentiary and pathways is large amounts of back child support. While incarcerated, inmates can petition for modification of their child support payments as they will have little to no income. This is something many inmates and staff alike do not know about, resulting in building of debt based on the income they had on the outside. This petition must be filed by the individual who is court ordered to pay. It's recommended that this motion be completed as soon as the individual is incarcerated. Those who owe large amounts of backed child support can have additional barriers. Some issues include not being able to obtain a driver's license or other professional/recreational licenses, withholding of future income tax returns and social security benefits, and added jail time if serious enough.

According to the Prison Policy Initiative, "People with disabilities are overrepresented at all stages of the criminal justice system, from jail and prison to probation and parole. Compared to 15% of the United States general population, 40% of people in state prisons have a disability...and 23% of those on parole or probation report a disability" (Wang, 2022). With this population reporting a disproportionate number of disabilities, it is important for case managers to understand the workings of social security and disability benefits. Whether internal case managers walk those eligible through the application for these benefits or allow an educational program through their tablets, inmates need to have applied during their incarceration. The application and approval process for these programs can take up to six months, meaning those being released who need these services will be receiving little to no income for that time, creating a barrier for effective reentry. Along with a lack of income, offenders are often released without any access to insurance, making access to medical providers, medications, and medical

equipment difficult to obtain without knowledge of the area's services. With South Dakotas approved Medicaid expansion, adults who meet the income requirement can receive Medicaid. As many of those exiting incarceration do not have employment, most should qualify.

Working with case managers from programs like Pathways can help internal correctional case managers as well as parole agents in giving offenders a head start in the reentry process. It's important to understand what resources would benefit this population and aid inmates in achieving their goals on the outside. Employment and housing assistance needs to be addressed earlier than an inmate's release to place of parole. A few resources we saw to be effective when provided immediately upon release were meetings with the Department of Labor or Vocational Rehabilitation, obtaining a cell phone, and understanding the local transportation system. Department of Labor and Vocational Rehabilitation are specialists when it comes to seeking employment. Often, the Department of Labor uses funding to assist in the purchase of specialized work clothing for those released. Vocational Rehabilitation specializes in helping those with disabilities gain part-time employment to supplement their Social Security Benefits and helping advocate for accommodations within the workplace to promote success. When it comes to obtaining a cellphone, progress can be seen much quicker as it is difficult for potential employers, service providers, medical providers, potential landlords, and the courts to get in contact with parolees. While normal phone plans may not be attainable based on the income of newly released offenders, places like Walmart as well as other government resources provide affordable or income-based service plans and devices.

Lastly, finding transportation in the location of parole, especially for those unfamiliar with the area is crucial in finding employment, meeting with their parole officer, and obtaining services. Most offenders being paroled out to services like halfway houses or shelters do not

have access to a vehicle of their own or a family member with a vehicle. Knowledge and access to bike sharing programs and public transportation can help relieve the barrier many parolees face upon release. Overall, case managers from services like Pathways are more than willing to provide correctional case managers and parole agents on where to find and obtain services that would greatly assist in an offender's reentry process. If internal and external case managers worked together to provide individualized case management plans and education of resources, South Dakotas' recidivism rates could be greatly reduced.

Life Skills Courses

Another aspect of the DOC's new reentry division brought up during this meeting between Pathways and the South Dakota DOC is the possible development of life skills courses accessible to inmates through their state issues tablets. These tablets contain access to media, messaging, commissary, legal documents, and policy. The addition of online life skills courses, especially for those who will be paroled soon, would greatly benefit internal and external case managers. If inmates had access to knowledge of services before their parole, they would be better equipped to be successful in those programs. There are a few areas that these courses would be beneficial in from my perspective as a case manager for parolees. First, financial literacy is an issue a lot of our clients struggle with as they have not had to manage their money on the outside for a long period of time. I also found that younger parolees who have been a part of the correctional system from a young age do not have a good understanding of basic banking resources and money management. This becomes an issue when it comes to finding an apartment as well.

Obtaining housing in general is extremely difficult for felons as most landlords run background checks on their applicants. Pathways has a program called "Ready to Rent" that

helps our participants learn about how to find housing options that accept their criminal background. In addition to finding initial housing, participants also learn how to create a good relationship with their landlord, how to manage rent, and how to navigate the application process. The application process for rentals can be a daunting task as most applications are long and complex. Section 8 housing, also known as low-income housing, has its own set of challenges that can be a difficult task to understand without previous knowledge or proper guidance during the form process. Giving inmates a head start with a tablet-accessible program will allow them to find rental options in their area of parole and successfully complete the application process. This gives them the opportunity to focus on other matters once they are released.

Like obtaining housing, finding work with a felony background has many barriers. Most employers do background checks on their applicants. Furthermore, many inmates do not have degrees, so most job opportunities are lower paying. While many correctional facilities offer GED programs, there are a limited number of inmates who can take these courses at a time. To remove this waitlist barrier, more coursework can be moved to their individual tablets. Providing more opportunities to take these courses will not only improve their ability to obtain jobs but also improve basic skills like reading and math. While working at the Penitentiary, I encountered several inmates who could not read or write. If basic educational courses were accessible to inmates to complete at their own pace, even if it was not for a GED program, it would still improve their chances of success once released.

The final consideration for tablet courses would be education of accessible services. Many participants in the Pathways program have little understanding of social services like TANF, Medicaid, Social Secuity, and Disability. This lack of understanding is also perpetuated

by correctional case managers' limited understanding of how to access these services. As many of these services have processing periods, some take months to begin receiving. Understanding these services before being released is important for the parolees who will not have access to case management on the outside. Other services that can seem complex to those not well versed in them would be obtaining an ID, social security card, and birth certificate. These are necessary documents to obtain employment, housing, and other social services. While correctional case managers should be assisting them in getting these documents, most inmates are released without proper documents. If inmates can access information on how to complete this process, it can speed up the turnover time in obtaining employment and housing after release.

Conclusion

There is no single solution in addressing the many issues our correctional systems are facing. Correctional facilities face many barriers in mental health and substance abuse rates within its inmate population. Increased usage and funding for evidence-based practices like Cognitive Behavorial Therapy has seen improvements in inmate wellbeing and in lowering recidivism rates. Individualized programing within correctional facilities needs to be prioritized by policies, funding, and staff. This prioritization can not only change the mindsets of inmates but also impact the overall environment of correctional facilities. It is important to remember when implementing change, staff's direct interactions with inmates contribute to the effectiveness of programming and development. Changing the staffing mindset, addressing burnout, and increasing education through training will better the relationship between inmates and staff leading to improved staff morale and retention. Focus on staff's qualifications in case management roles will create more individualized and effective reentry plans, allowing inmates an increased chance of success in their parole. Coordination between internal case management,

parole officers, and case managers from human service programs like Pathways will create a better understanding of what offenders need to do to be successful as well as highlight areas of improvement needed in programing.

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