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Workplace Violence, Trauma, and the Lived Experience of Corrections Officers: A Phenomenological Study

Amanda Smith
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Walden University

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Amanda Smith

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Walden University
2022

Abstract

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by

Amanda Smith

MPhil, Walden University, 2020

MS, Southern New Hampshire University, 2016

BS, New York City College of Technology, 2009

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Criminal Justice

Walden University

August 2022

Abstract

Corrections officers are required to ensure compliance from inmates, and sometimes they have to use force, resulting in violent encounters. Such incidents can be traumatic for those directly and indirectly involved. Previous studies examined the working conditions of jail staff, but their focus was not primarily directed toward corrections officers. The purpose of this qualitative phenomenological study was to explore how everyday occurrences of violence associated with working in jails influence corrections officers' physiological well-being. The theory of constructed emotions framed this study. Recruiting was conducted using a demographic and interest survey distributed through Facebook. Using purposive sampling, semi structured interviews were conducted using the Zoom platform (due to the COVID-19 pandemic) and face-to-face with 11 active-duty corrections officers working in a complex jail system in a northeastern metropolitan region. The study addressed the lived experiences of corrections officers who experienced or witnessed workplace violence by inmates and how inmates cope with trauma. Interview responses were coded and analyzed to identify common themes. The corrections officers' most common concerns were lack of follow-up after a use-of-force encounter and workplace policies about the use of force that are ineffective and detrimental. Other findings indicated fear, helplessness, stress, anxiety, and anger. Policymakers, key stakeholders, and others may lead to positive social change by using these findings in developing effective and competent strategic planning, management, and policy implementation to support corrections officers and offer them better ways to process the trauma that they experience throughout their careers.

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Dedication

“If you have the faith, you can move mountains; nothing is impossible; you shall overcome; just believe, and it shall be done” (Richard Smallwood, 1999). I dedicate this dissertation to honor my mother, the late Emma Ruth Smith. Losing you and living my life without you here is the worst pain a child could ever endure. Although I question God’s reasoning for you to be absent in the body but present in the spirit, I accept it was not meant to be. Not one day goes by that I do not think about you and wish you were here. Since you did not have an opportunity to realize your potential because of circumstances in life, I went the distance for the both of us, and I hope that I made you proud from the grave. Sankofa means “to go back and get it.” Learn from the past to inform the future. I dedicate this dissertation to my ancestors who toiled, suffered, and died in bondage, wishing that they could learn, read, write, and be educated. I did not take your struggles and agony in vain. I dedicate this to you, my ancestors. This dissertation is also dedicated to all teenage mothers and little black girls that society labels either as statistics or who seek to pigeonhole you. Do not let anything or anyone place limitations or boundaries on your greatness.

I dedicate this to you to my daughter, Laila, and my sons, Cordell and Sharif (Ryan), and I hope Mommy makes you proud. You three are my pride, my joy, and my strength. To my big sister, Isian had you not been in my corner from day one, pushing me and showing me support even though I was a teen mom, I would not be here today. We are the Alpha and Omega; I love you, sister. I dedicate this dissertation to my husband, Sharif, and thank you for supporting and motivating me to keep going and encouraging me every day not to limit myself. Lastly, I would like to dedicate this dissertation to the

men and the women who are the BOLDEST—the unsung heroes that suit up every day, knowingly and valiantly walking into danger to keep us all safe. Salute.

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looking at my shortcomings. I love you for that. Lastly and most certainly not least, I would like to acknowledge all my associates and colleagues who have endured this process from my CityTech days until this moment; thank you all.

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Chapter 1: Introduction to the Study

Problem Statement

The Occupational Safety and Health Act of 1970 was enacted to assure a healthy working environment be free from fatalities or injuries and created oversight agencies to monitor compliance (Public Law 91-596). The Occupational Safety and Health Administration (OSHA) mandates a hazard-free work environment to prevent fatalities or severe injury. However, studies have shown that nearly 50% of corrections officers (COs) experience some form of posttraumatic stress disorder (PTSD; Jaegers et al., 2019). A study by Ferdik and Smith (2017 as cited in Jaegers et al., 2019) explored the connection between workplace stress and the physical health of COs and found that COs suffer from heart disease, diabetes, high cholesterol, hypertension, and the risk of contracting infectious diseases. These psychological problems can be identified as PTSD, which can be attributed to acute stress disorder (ASD), a precursor to PTSD.

A possible cause of this problem is that COs experience repeated workplace violence or trauma incidents, manifesting as ASD. Not everyone who develops PTSD has experienced ASD; however, people who experience ASD will likely develop PTSD later. Sharing the same criteria as PTSD, ASD involves severe acute stress reactions that can occur within the first month after a trauma (Bryant, 2013). Research suggests that survivors show rates of ASD ranging from 6% to 33%, and if a person has ASD, they will likely develop PTSD within 1 month of the trauma.

Research also suggests that harsh work conditions contribute to severe physiological problems, including cardiovascular, gastrointestinal, and other ailments and

disorders resulting from working in stressful environments (Bierie, 2012; Suliman & Einat, 2018). The life expectancy for COs based on job-related stress is 59 years, compared to the national average of 75 years (Ghaddar et al., 2008). This qualitative phenomenological study allowed COs to describe their workplace violence experiences and their influence on their physiological well-being. Interviewing was conducted to explore participants' lived experiences to recommend workplace conditions related to job responsibilities.

Purpose Statement

The purpose of this qualitative phenomenological study was to explore the perspectives of COs on how the everyday occurrences of violence associated with working in jails influence their physiological well-being. Although quantitative studies have invested in working conditions for staff in jails, research that focuses primarily on COs is minimal (Tracy, 2005). COs maintain security and are responsible for the care, custody, and control of inmates while overseeing many aspects of daily living for inmates (Smith, 2014).

COs may have to use force to compel compliance from inmates, and often these incidents incur violent encounters, which can be traumatic for some, whether witnesses or individuals who are directly involved. In New York, between 2015 and 2018, the total number of nonfatal occupational injuries and illnesses deliberately inflicted by other persons directed towards COs was 4,290. The average number of days that officers missed work was about 14 (Bureau of Labor Statistics, 2019). COs should have an opportunity to discuss how they view and experience violence in the workplace.

Phenomenological studies can help researchers understand and evaluate the experiences of individual participants and the trauma surrounding these experiences. This study allowed COs to describe their workplace violence experiences and to describe the impact of these experiences on their physiological well-being.

Significance

The fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-V) reclassified ASD as trauma and stress-related disorder, for which Criterion A includes exposure to death or serious injury, or the threat thereof, with the individual having experienced a traumatic event or witnessed traumatic events as they occurred to others (Substance Abuse and Mental Health Services Administration, 2016; U.S. Department of Veterans Affairs, 2018). ASD and PTSD share the same criteria. Critical differences are that ASD must occur before PTSD and must be ongoing for a specified period before being reclassified as PTSD; however, a person can sometimes develop PTSD without experiencing ASD.

This research contributes to an existing yet limited body of literature focusing on COs working in a violent and stressful setting where heightened exposure to hostile and dangerous incidents is a daily occurrence and has an adverse effect on mental and physical well-being from the perspective of these officers. According to Alexander and Klein (2001), daily traumas or critical incidents disturb or overwhelm an individual's coping mechanisms (p. 76). From the findings, this study offers correctional administrators recommendations on the development, improvement, and implementation

of mental health services so that officers may find strategies that will allow them to develop practical coping skills following a traumatic experience.

Background

The articles selected identified mental health, physical, and traumatic experiences related to COs. Keywords/terms utilized included *corrections officers, mental health, workplace stress, paramilitary, trauma, psychology, incidents, alarms, occupational hazards, officer safety, and PTSD*. Walden University's library database for peer-reviewed scholarly articles and Google Scholar were sources for relevant literature. I accessed electronic peer-reviewed academic articles and journals from EBSCOHost, SAGE, *Justice Policy Journal*, ScienceDirect, PubMed, PsycINFO, PsycARTICLES, and PsycBooks. These articles focused on the conditions of jails and work environment for COs.

- Bierie (2012) focused on the physical conditions of the prisons where corrections staff were employed and how working conditions were affecting the staff.
- Boudoukha et al. (2013) analyzed the relationship between posttraumatic stress, burnout, and violence exhibited against staff from inmates and identified who was prone to developing PTSD following a traumatic experience.
- Carleton et al. (2018) conducted a study regarding the relationship between mental illness and chronic pain comorbidity experienced by public safety employees and the likelihood of occurrence.

- Researchers Lewis et al. (2013) conducted a study and found through statistical analysis that there is a correlation between negative job impact, traumatic stress experience by probation officers because of exposure to trauma, length of duty in this profession, and length of time exposed to a case.
- Rhineberger-Dunn et al. (2016) informed future research because their findings offered clear evidence that the longer officers are exposed to offenders convicted of various violent offenses, the higher the prevalence of these officers experiencing secondary trauma.
- Suliman and Einat (2018) analyzed how work stress hurts employees, focusing specifically on neuroticism. They found that new officers were being placed in jails without being adequately trained on how to handle the stresses of working in a volatile environment. These officers could not develop coping skills, finding that their personalities changed negatively despite appearing as if they were okay.

Theoretical Framework

The theoretical framework for this study was the theory of constructed emotion by Barrett and Hutchinson, who posited that the primary purpose of an organism's brain is to regulate physiological resources required to meet the organism's imminent needs for action and learning in the short term (Fridman et al., 2019). Based on extensive literature in the neuroscientific and physiological field, this theory supports the concept of allostasis. Allostasis suggests that managing energy needs and anticipating bodily needs such as cognition, emotion, perception, and action are predictive. Proponents of this

theory aim to understand decision making in stressful occupational settings such as law enforcement (Fridman et al., 2019).

Research Questions

- RQ1. What are the lived experiences of corrections officers who experience or witness workplace violence by inmates?
- RQ2. How do corrections officers who have witnessed or experienced workplace violence by inmates cope with the trauma?

Nature of Study

COs work in an environment where violence and trauma can occur. I explored the trauma derived from the violence that COs experience or witness because of incidents involving force used with inmates. Researchers using phenomenology seek to describe events, activities, or phenomena and understand the lived experiences of individuals. (Burkholder et al., 2016). Focusing on the experience, allowing the researcher to participate, and treating the other participants as coresearchers allow complete subjectivity (Grand Canyon University, 2019). I used a phenomenological approach and constructed research questions to address the research problem.

This research contributes to an existing yet limited body of literature about the trauma from working in a correctional setting where heightened exposure to hostile and dangerous incidents is a daily occurrence and fosters an adverse effect on mental and physical well-being from the perspective of these officers. This research design aligned with the research problem and purpose to describe lived experiences from the COs' perspective.

Definition of Terms

Acute stress disorder (ASD): An anxiety disorder precipitated by an experience of intense fear or horror while exposed to a traumatic (especially life-threatening) event. Dissociative symptoms characterize the disorder, along with vivid recollections of the traumatic event (i.e., recurrent dreams, illusions, flashbacks); avoidance of stimuli associated with the traumatic event; and a constant state of hyperarousal (i.e., hypervigilance, irritability, being easily startled) for no more than 1 month (National Institutes of Health, 2021)

Burnout: A prolonged response to chronic emotional and interpersonal stressors on the job (Maslach & Leiter, 2016) that is defined by professional inefficacy (inability to perform) and cynicism (attitude toward a profession based on distrust of colleagues and superiors).

Corrections officer (CO): A sworn officer who is responsible for the care, custody, and control of individuals who have been arrested and are awaiting trial or who have been sentenced to serve a specified period of incarceration within a correctional setting. In addition, COs are responsible for enforcing rules and regulations in jails and maintaining overall safety. (Bureau of Labor Statistics, 2021).

Clinic: Unit within a jail where medical treatment is offered and rendered to inmates.

Daily traumas (critical incidents): Events or series of incidents such as assaults, threats, or injuries that can interrupt coping methods and create a considerable risk to physical or mental health for an individual.

Depersonalization: Occurs when an individual is detached from other individuals.

Derealization: A mental state of feeling detached from one's surroundings or experiencing altered perception of one's surroundings that seem unreal.

Dissociative amnesia: Inability to recall an essential aspect of a trauma (National Institutes of Health, 2021).

Dissociative symptoms: A subjective sense of numbing, detachment, absence of emotional responsiveness, reduction in awareness of surroundings, derealization, depersonalization, and/or dissociative amnesia.

Exhaustion: The feeling of becoming emotionally depleted at an individual's emotional detriment.

Gang: A prison gang is any violent organization operating within the premises of a prison as a self-proclaimed criminal organization comprising a selected group of inmates perceived as leaders because of their physical look and the reason behind their imprisonment (Gundur, 2020).

General population (GP): Housing area in a jail that allows inmates to come in with living privileges who do not need special housing.

Intake area: A designated area within a jail where an inmate is processed into the system, searched for weapons or any other contraband, and placed in a housing unit.

Jail: A correctional facility or detention center where inmates are housed to serve a time of incarceration of 1 year or less or await trial for criminal offenses alleged or after sentencing. Inmates who violate the condition of release (probation, parole) are also housed in jail facilities.

Mental health unit: A unit within a jail facility in which patients are observed for a specified amount for determination of mental fitness or treatment for mental health-related illnesses; designated unit that provides mental health services to inmates.

Mental illness (MI): A treatable health condition involving changes in one's thinking, emotional behavior causing distress, and problems functioning in social, work, or family activities (APA, 2022)

Mess hall: Designated area for inmates to eat meals.

Occupational stress: Stress elements found in the work environment that an individual will react to, thus influencing their behavior.

Oleoresin capsicum (OC) spray: Aerosol dispenser commonly referred to as *pepper spray* that is authorized for use by law enforcement officers to incapacitate or disable disruptive, assaultive, or armed inmates who pose a threat to the safety of others.

Posttraumatic stress disorder (PTSD): A disorder that develops in some people who have experienced a shocking, scary, or dangerous event. To be diagnosed with PTSD, an adult must have all of the following symptoms for at least 1 month:

- at least one re-experiencing symptom (i.e., flashbacks, dreams, thoughts that trigger reliving the event)
- at least one avoidance symptom (i.e., staying away from places, events, or objects that are reminders of the traumatic experience; avoiding thoughts or feelings related to the traumatic event)
- at least two arousal and reactivity symptoms (i.e., easily startled, tension, sleep difficulties, irritability)

- at least two cognition and mood symptoms, such as trouble remembering critical features of the traumatic event, negative thoughts about oneself or the world, distorted feelings such as guilt or blame, loss of interest in enjoyable activities (National Institutes of Health, 2021)

Punitive segregation (seg): A housing area where disruptive inmates who violate correction rules are housed temporarily and restricted to their cell as a sanction.

Use of force (UOF): Any instance in which staff use their hands or other parts of their body, objects, instruments, chemical agents, electronic devices, firearms, or any other physical method to restrain, subdue, or compel an inmate to act or stop acting in a particular way (City of New York Department of Corrections, 2022).

Assumptions

This section identifies the assumptions of self-evident truths that otherwise would not be questioned. There were several assumptions included in this study. The primary assumption was that violent incidents associated with jails are common and influence the physiological well-being of COs. Additional assumptions for this study included the following:

- Study participants answered the questions openly and truthfully to the best of their ability. Deception at any point of this study would have threatened its credibility.
- Participation was voluntary, and the information obtained was safeguarded.
- The participants could recall information about workplace violence incidents that they had experienced or witnessed in the jails with a high degree of

accuracy, even though these incidents may have occurred several months or years ago.

- It was assumed that the participants employed as COs have direct inmate contact daily.
- The COVID-19 (2019 Novel Coronavirus) pandemic was an external stressor that may have influenced how COs responded to violent incidents in jails.

Scope and Delimitations

The lack of research on COs and their experiences regarding how the everyday occurrences of violence associated with working in jails influence their physiological well-being determined the scope of this study, along with the qualitative research design. Although quantitative studies have addressed working conditions for staff in jails, research that focuses primarily on COs is minimal (Tracy, 2005). This study explored participants' lived experiences to recommend workplace conditions related to job responsibilities. The study used semistructured interviews from researcher-generated, open-ended questions, surveys, and secondary data to collect data. The delimitations in this study were formed based on the study objectives in exploring daily occurrences of workplace violence from inmates and their influence on the physiological well-being of COs. To gain perspectives from COs, I delimited this study to a sample of COs employed in a complex jail system located in a metropolitan region of the northeastern United States. When selecting participants, I recruited COs with a minimum of 5 years of active-duty service with direct inmate contact. This was not an exhaustive sample of COs; the sample encompassed COs from predominantly one area. Because the study only used

participants who worked in the northeastern metropolitan region in a jail setting, the findings may not be generalizable. However, generalizability in quantitative research is considered more as credibility and transferability in qualitative research (Leung, 2015).

Limitations

Accessibility of participants was a limitation because some COs work extended schedules, including overtime, covering other shifts. Movements such as Black Lives Matter (BLM), “defund the police,” and the ongoing COVID-19 pandemic limited the study’s overall design. Through this phenomenological study, I sought to understand lived experiences using qualitative interviews. However, COs were apprehensive about sharing their experiences, fearing retaliation. Although I was responsible for executing safety measures in this qualitative research to protect participants and data, some officers would not participate. The reluctance to participate was because of a general mistrust in any form of research and the fear of contracting COVID-19, threatening the study’s dependability. I used the teleconferencing software Zoom to resolve this matter for participants who did not want to speak face-to-face.

This study used interviews as a data collection tool, presenting a limitation that threatened trustworthiness. The purpose of qualitative interviewing is to capture how the interviewee views their world, to learn their terminology and judgments, and capture the complexities of their perceptions and experiences (Patton, 2015). In this study, I relied on the participants to be honest regarding their experiences with workplace violence and trauma. Because this study was qualitative, reviewing court-certified documents and press release statements from the district attorney’s office enhanced trustworthiness.

Another limitation was gender and race. More males participated than females, and participants identified with only two out of the nine racial/ethnic options. This could have been due to the overall demographic makeup of the organization threatening the dependability of the study; this is addressed in further detail in Chapter 4.

Summary

In summary, COs sometimes must use force to compel compliance from inmates, and often these incidents incur violent encounters. Studies have shown that 50% of COs experience some form of PTSD (Jaegers et al., 2019). Additionally, COs may experience physical or somatic ailments. In Chapter 2, a review of the literature includes the most current research focused on working conditions for staff in jails and serves as background for the research study that I conducted.

Chapter 2: Literature Review

Introduction

The work of a CO involves dangerous duties in an environment that carries an increased risk of harm (Ferdik, 2017). The purpose of this qualitative phenomenological study was to explore the perspectives of COs on how the common occurrences of violence associated with working in jails influence their physiological well-being. Although quantitative studies have addressed working conditions for staff in jails, research focusing primarily on COs has been minimal (Tracy, 2005). COs maintain security and are responsible for the care, custody, and control of inmates while overseeing many aspects of daily living for inmates (Smith, 2014).

COs may have to use force to compel compliance from inmates, and often these incidents incur violent encounters, which can be traumatic for some, whether they are witnesses or directly involved. In the literature review, I aimed to identify the basis of these claims and support the view of COs by answering the following questions: (a) What are the lived experiences of correction officers who experience or witness workplace violence by inmates? (b) How do corrections officers who have witnessed or experienced workplace violence by inmates cope with the trauma? (c) How has experiencing or witnessing workplace violence impacted them in their daily lives?

Problem Statement

The Occupational Safety and Health Act of 1970 was enacted to assure a healthy working environment free from fatalities or injuries and created oversight agencies to monitor compliance (Public Law 91-596). OSHA mandates a hazard-free work

environment to prevent fatalities or severe injury. However, studies have shown that nearly 50% of COs experience some form of PTSD (Jaegers et al., 2019). Previous studies have indicated a connection between occupational stress and the physical health of COs and have concluded that COs subjected to these conditions undergo health complications such as heart disease, diabetes, high cholesterol, and hypertension and risk contracting infectious diseases (Jaegers et al., 2019). These psychological problems can be identified as PTSD, which can be attributed to ASD, a precursor to PTSD.

A prevalent cause of PTSD and ASD is workplace violence and trauma associated with working the role of a CO. Not every individual who suffers from PTSD experienced ASD. ASD is a more severe condition that develops a shorter time before the onset of PTSD (Bryant, 2017). However, individuals with ASD are likely to develop PTSD at a later stage. Briefly, ASD develops within a month after a trauma. Harsh work conditions also contribute to severe physiological problems such as cardiovascular, gastrointestinal, and other ailments and disorders resulting from working in a stressful environment (Suliman & Einat, 2018). Occupational stress also affects the life expectancy of a CO. A CO under occupational stress has a life expectancy of 59 years, compared to the national average of 75 years (Colorado Workers for Innovative and New Solutions [Colorado WINS], 2018). This qualitative phenomenological study allowed COs to describe their workplace violence experiences and their influence on their physiological well-being. Interviewing was conducted to explore participants' lived experiences to recommend workplace conditions related to job responsibilities.

Literature Review Methods

The literature review contents were collected, reviewed, and synthesized from different databases involving psychology, criminal justice, sociology, health sciences, and arts dated between 2016 and 2020. These articles were selected from the Walden University library and other sources of peer-reviewed scholarly articles such as Google Scholar, which has a host of electronic peer-reviewed academic articles and journals from EBSCOHost, SAGE, *Justice Policy Journal*, ScienceDirect, PubMed, PsycINFO, PsycARTICLES, and PsycBooks. The keywords used to guide the searches included *corrections officers, mental health, workplace stress, paramilitary, trauma, psychology, incidents, alarms, occupational hazards, officer safety, and PTSD*. The reviewed empirical articles covered different nations. Most articles addressed stress and coping among COs, while others included information on occupational stress because of occupational PTSD and physiological impact. The reviewed articles included studies involving COs with a focus on the conditions of jails and work environment for COs.

Theoretical Framework

The study used a theoretical framework based on Barrett's (2017) theory of constructed emotion. The theory suggests that the brain helps regulate physiological resources needed to satisfy the minimum requirements for action and learning in the short term (Fridman et al., 2019). Based on extensive literature in the neuroscientific and physiological field, this theory supports the concept of allostasis. Allostasis suggests that managing energy needs and anticipating bodily needs such as cognition, emotion, perception, and action are predictive. Those who apply this theory aim to understand

decision-making in stressful occupational settings such as law enforcement (Fridman et al., 2019).

Job Duties and Responsibility of Corrections Officers and Work Environment

A CO is responsible for the care, custody, and control of inmates and moderates and regulates every aspect of living in jail among this demographic. While patrolling jails, COs are responsible for supervising inmates of various demographic makeups (i.e., age, sex, race, gender identification, orientation) as well as inmates who may or may not have been identified as having mental-health-related issues (Gordon et al., 2013; Thomas, 2012). Exposure to inmate assaults, suicides, or use-of-force incidents on duty could be traumatic to COs and is common. (Armstrong et al., 2015; Keinan & Malach-Pines, 2007; Summerlin et al., 2010). Previous studies have shown that COs either experienced or witnessed physical or verbal attacks at the hands of inmates (Keinan & Malach-Pines, 2007). This type of violence contributes to physiological and psychological distress (Clemente et al., 2015; Misis et al., 2013).

Studies have shown that officers who have frequent exposure to inmates experience stress at higher levels and have an increased risk of developing mental-health-related issues (Denhof & Spinaris, 2016). Concerns expressed by COs include safety within jails. In a mixed-methodology study, over 60% of research participants identified their working environment as stressful (Martin et al., 2012). COs work in a setting where heightened exposure to hostile and dangerous incidents occurs daily and fosters an adverse effect on mental and physical well-being. Exposure to such frequent workplace violence hurts these officers professionally and strains family relationships. This type of

work environment leads to occupational disruptions (Bride & Kintzle, 2011; Keinan & Malach-Pines, 2007) and negatively impacts the mental and physical well-being of COs (Denhof & Spinaris, 2016; Martin et al., 2012; Wells et al., 2009). Restrictive emotionality is another way that violence in the workplace has a deleterious impact on the psychological wellness of officers (Levant et al., 2015). Physical impact includes heart disease, weakened immune systems, and increased fatigue (Martin et al., 2012; Wells et al., 2009). Research indicates that COs display symptoms consistent with depression and PTSD due to their frequent aggression levels while at work (Denhof & Spinaris, 2016).

COs' environment is considered to be in a state of ongoing tension where the inmate population is perceived as challenging and volatile (Hogan, 2010; Lambert & Clemente et al., 2015; Mani, 2012; Misis et al., 2013; Valentine et al., 2012). For example, in New York, between 2015 and 2018, the total of nonfatal occupational injuries and illnesses deliberately inflicted by other persons and directed towards Cos was 4,290, where the average number of days that officers missed work was 14 (Bureau of Labor Statistics, 2019). Factors linked to increased violence in prison facilities include overcrowding and a disproportionate ratio of officers to inmates. Ongoing conflicts among the inmate population spread throughout the prison, creating a tense environment (Martin et al., 2012; Misis et al., 2013). Working in a tense prison environment leads to high levels of stress, impacts COs' health, promotes deviant workplace behavior such as absenteeism, and contributes to work–family conflicts (Armstrong et al., 2015; Clemente et al., 2015; Valentine et al., 2012).

Job Stressors Present Among Corrections Officers

In the law enforcement/criminal justice community, COs are burned out and face many professional challenges (Tracy, 2005). One of these challenges is the public's perception of COs. Their job requires them to be secluded from the public and be "confined" in correctional facilities with inmates, in contrast to other first responders such as firefighters, paramedics, and police officers. On many occasions, they are compared to the inmates they are tasked with managing (Ricciardelli et al., 2020). Based on previous studies focusing on job stressors among COs (e.g., Bezerra et al., 2016; Lambert et al., 2017; Law & Guo, 2016; Regehr et al., 2019; Vickovic & Morrow, 2020), this review focuses on distinguishing risk factors that cause stress reactions among COs. Every risk factor is discussed individually regarding the role of a CO in describing psychological risk constructs. This section addresses the different stressors associated with COs on duty, and each stressor is discussed to summarize how it impacts the lives of COs.

High Workload

Regehr et al. (2019) found that the increased stress rates among COs are associated with increased workload and mandatory overtime. These authors wanted to conduct a systematic review to examine previous studies on COs and identify the prevalence of anxiety disorders, major depression, ASD, and PTSD. Their study suggested that high job workload hampers individuals' social status, preventing COs from interacting in social circles outside the work environment. This is common among COs who work mandatory overtime and work long hours instead of engaging in social

activities outside work facilities, such as family and friend interactions. The authors discovered that COs adopt coping mechanisms such as role conflict, negative attitudes towards recipients (e.g., inmates, colleagues, and superiors), burnout, and occupational stress (Regehr et al., 2019).

The daily stressors of the profession are also accompanied by the fear and victimization brought about by interactions with the inmate population. This fear may arise from exposure to violence, direct or indirect inmate threat(s), or workplace injury. The prevalence of these occurrences is higher than those associated with other professions. Another instance is the prevalence of mental health issues brought about by exposure to stressors such as high workload. The consequences for mental health have only been illustrated in the law enforcement community in a general sense, not corrections specifically, instead of including corrections within the context of law enforcement. The findings also suggest that the higher prevalence of PTSD and major depression exists among COs instead of other occupations. PTSD was related to violence and injuries encountered while on duty, whereas significant depression was related to low organizational support, job dissatisfaction, and reduced social status. High workload also leads COs to feel strained (Kinman et al., 2017). Higher reports of victimization and fear resulting from inmate violence have led to high turnover rates, meaning that many COs are quitting their jobs for fear of falling victim to inmates (Stern, 2019). The facilities undergo financial cutbacks and reduce staff to save on costs.

Correctional Officer Health Outcomes

The role of COs is characterized by many dangers due to physical injury and psychological damage stemming from mental stress. Data in 2015 from Chenpanas and Bir (2017) indicated that the rate of fatalities imposed by inmates using sharp weapons accounted for over 400 deaths among COs. Chenpanas and Bir further discovered that among the analyzed autopsies, four involved COs, with 70.2% of the analyzed wounds being stab wounds while 29.8% were slash wounds (Chenpanas & Bir, 2017). Similar reports from Goulette et al. (2020) and Holloway-Beth et al. (2016) indicated that most physical injuries that COs experienced were brought about by encounters with inmates with mental health issues. This implies that the nature of CO work is risky where CO–inmate interaction is involved.

Occupational Dangers

Occupational dangers are connected to the safety and well-being of COs. Under this category are dangers posed by prison gangs (Lessing, 2017), disruptive inmates, and contraband (Raphael et al., 2017); handling inmates with underlying mental disorders (Bales et al., 2017); and prison riots (Butler, 2019). Each element is associated with COs and inmates' interaction, as they must monitor the inmates, unaware of the underlying threat associated with said interaction. They contribute to an elevated risk of physical and mental harm to officers.

Prison Gangs

Prison gangs are informal entities sometimes established to exercise authority, control, and power within jails. In a typical jail setting, COs are mandated to interact with

violent and noncompliant inmates from notorious prison gangs (i.e., Bloods, Crips, Latin Kings, Piru, Trinitarios, MS-13, Aryan Nation). Such individuals, such as gang leaders, perceive themselves as superior individuals and occasionally flout prison rules. The duty of COs, which leads to the interactions, ensures that these individuals comply with institutional rules. However, when the gangs are present, COs feel threatened because the number of inmates is overwhelming. According to Butler et al. (2018), prison gangs are among the most feared groups in prison by COs. According to Rock (2017), in a report for the FBI National Gang Intelligence Center (2017), prisons are continually experiencing a surge in prison gangs. In the same report, it was stated that prison gangs are associated with gang affiliates increasing and contributing to criminal sophistication and violence against COs.

According to Gundur (2020), a prison gang is any violent organization operating within the premises of a correctional facility as a self-proclaimed criminal organization comprising a selected group of inmates perceived as leaders because of their physical look and the reason behind their imprisonment. From this description, the gangs comprise dangerous criminals, and because they are based inside the facility, COs must interact with them. Most prison gangs are similar in how they operate. Therefore, they share many features with outside gangs because they are often managed or led by one person perceived as the most feared inmate. The leader oversees the membership of the gang and members' criminal deeds. Sometimes, the leader can point members to commit a crime against a CO. These events are often unpredictable; therefore, COs must remain vigilant, especially if they are involved in the punishment of a gang member, or worse, if they

punish the leader. According to Lessing (2017), gangs are violent establishments. They are secretive and abide by rules (constitution, motto, and creed), which dictate how the members will behave and operate to become the dominant gang in the facility. In a single facility, several gangs may have different operational frameworks but share the goal of establishing dominance and creating an element of power to protect inmates from other gangs and COs. In the same article, Lessing stated that each prison gang can adopt unique symbols that indicate membership status. Like membership in outside gangs, prison gang membership cannot be changed (i.e., an inmate cannot abandon one gang for another one). The penalty is usually severe (sometimes, a deserter is killed). Such actions attract the attention of COs, who maintain order within the prison. If an inmate's death occurs, a CO investigates and reports the case to their superiors.

The act of investigation can lead the CO to discover dangerous facts, some of which may put their life in danger if they report them to a superior. Previous studies have reported that COs who found dangerous secrets about prison gangs and reported to superiors were severely attacked by unknown assailants in prison (particularly members of the prison gangs sent by the leader; Geldenhuys, 2020). COs who discovered the secrets kept quiet about their findings to protect themselves from serious outcomes (Lane et al., 2019). Several gangs were defined as influential or problematic in the facility, such as the Aryan Brotherhood, the Black Liberation Army, and La Eme (a Mexican Mafia). Most of these gangs are situated outside the prison, but their prominence is replicated in prisons by forming copycat gangs, which operate as affiliates of the main gangs (Skarbek, 2020). Such gangs are motivated by the anticipation of earning money and

exploiting overcrowded and understaffed prisons, thus putting the lives of COs at risk, especially when the main gangs are involved in these exploits (Mitchell et al., 2017).

The Behavior of Disruptive Inmates

A disruptive inmate can be identified as an individual engaging in violent conduct against inmates and COs while in corrections custody. According to Woo et al. (2020), disruptive inmate behavior contributes to physical and mental health issues among COs dealing with unpredictable inmates. Unpredictable inmates commit brutal acts in prison, such as attempted sexual offense, murder, suicide, rape, and physical assault. The prevalence of these acts has been proven to increase the rate of COs quitting their jobs (Suliman & Einat, 2018). It has also been proven to increase the rate of injuries and deaths sustained by COs (Woo et al., 2020). Other consequences of disruptive inmate behavior are increased destructive CO behavior(s). For example, COs resort to drug and alcohol abuse to cope with the effect of disruptive inmate behavior (Tatman, 2020).

Chui (2018) argued that many correctional facilities in the United States do not have better strategies to reduce inmate suicide. Since suicide is among the leading cause of death among inmates, COs find the issue to be of significant cause for concern that should be addressed promptly. The author discovered that inmates commit suicide due to different factors, some of which can simply be addressed. For example, the provision of self-help activities and sports to inmates with difficulty adapting to the life of incarceration.

There have been reduced cases of inmate-to-inmate deaths over the years (Johnson et al., 2020). However, the low cases remain a significant concern for COs.

There have also been increased rates of inmates assaulting COs, creating caution for COs against inmates. Some of these assaults are so serious that the COs develop psychological and physiological issues when they fail to establish better coping mechanisms (Johnson et al., 2020).

Another rising issue involving inmates is instances of sexual assault. This issue has been an essential topic of discussion and importance for the stakeholders involved in managing correctional facilities. In a previous study by Sutton and Sutton (2016), there have been increased sexual assault cases perpetrated by inmates on other inmates in male correctional facilities in the United States. This matter affects different inmates, including transgender and incarcerated youths. In his study focusing on sexual assault among inmates, Ahlin (2018) discovered that youth inmates frequently experience sexual assault. This is especially evident among young inmates and inmates serving long terms of incarceration. The nature of the correctional facilities necessitates sexual assault in a previous study. For instance, there are varying cases of inmate behavior among inmates in a correctional facility. These conditions influence the duty of COs. In a previous study by Lambert et al. (2018), COs working in maximum-security correctional facilities and institutions heavily populated by younger offenders encounter increased cases of disruptive inmate behavior. The same study continued to expound that maximum-security correctional facilities can statistically report high rates of inmate-to-inmate sexual assault cases than low-level correctional facilities. The duty of COs involves monitoring and controlling each case of disruptive behavior while ensuring that everyone in the facility is protected. While carrying out this duty, COs become more vulnerable to violence in

prison, increasing their risk of mental and physical harm. COs must intervene in every incident involving aggression, sexual assault, physical assault, noncompliance, and disruptive inmate behavior. These behaviors can likely compromise the well-being and safety of COs, increasing the chances of being victimized.

Presence of Inmates With Underlying Mental Health Issues

Throughout the years, there has been an increase in the incarceration of inmates with mental health issues. Ellis and Alexander (2017) termed the incarceration of these individuals as the criminalization of the mentally ill to illustrate the increase of the mentally ill incarcerated rather than hospitalized. Many mentally ill inmates can be attributed to the increasing release of patients from psychiatric facilities whose needs were not adequately addressed. When these individuals are released, they are likely to be involved in criminal acts, which eventually leave them in the control of criminal justice systems. Mentally ill inmates, especially those with schizophrenia and bipolar disorder, cannot control themselves due to their condition and lack of insight and impulse control. For example, they cannot restrain their behavior (Bales et al., 2017). An assumption is that mentally ill individuals have a higher likelihood of unknowingly perpetrating assaults perceived as legal transgressions that land them under the criminal justice system. Many mental facilities have been shut down or downsized, meaning there is insufficient space for mentally ill offenders. In such cases, many mentally ill individuals are sent to prisons. This factor leads to the significant growth of mentally ill inmates in prisons, contributing to psychological and physiological concerns among COs because they must monitor these unpredictable inmates constantly. The latter can unknowingly

perpetrate physical assault on the Cos because they do not receive enough training to prepare them for the complex nature of dealing with mentally ill inmates. This unique group of inmates needs constant specialized attention, such as medication, detoxification, and therapy. Previous studies have discovered that mentally ill inmates are vulnerable to sexual and physical assault from other inmates (DeAmicis, 2017). In the study, prisons do not have enough facilities to adequately care for mentally ill inmates with a higher likelihood of posing a physical threat to themselves and other inmates (DeAmicis, 2017). Mentally ill inmates also have a higher likelihood of recidivation than other inmates who do not experience mental illnesses (Bales et al., 2017). Correctional facilities have limited power in managing and dealing with mental health concerns due to financial limitations and lack of adequate and specialized resources such as psychiatrists (Hutchison, 2017). Therefore, the responsibility is left with COs who must assist mentally ill inmates. This duty is placed on COs without adequate training in dealing with scenarios involving caring for mentally ill inmates. This issue is considered a challenge to the mental and physical safety and wellness of COs since mentally ill inmates have multiple and complex needs.

Riots

Although they are rare, prison riots constitute one of the most serious threats to COs. Prison riots threaten the safety and wellness of COs affecting their physiological and physical health. Many prisons in the United States have been experiencing prison riots that affect the inmates and the surrounding personnel. The most severe riot in the United States history is the 2018 riot in a South Carolina prison, which led to seven

inmates' death, including one CO (Reuters, 2018). Besides the reported casualties, prison riots often lead to numerous physical injuries among inmates and COs. They can lead to a state of control breakdown, whereby inmates roam everywhere freely.

According to Useem (2018), a prison riot is associated with protesting and dissenting activities by an inmate or a group of inmates interrupting imprisonment when they assume control of a part or entire prison resources. Sometimes prison riots are carried out to communicate inmate grievances or demand a change in the system (Useem, 2018). The grievances vary, but some of the most common include poor construction, overcrowding, violent offenders, racial discrimination in prison, and inhumane conditions. Although they rarely occur, prison riots are consequential elements that lead to numerous mental and physical health concerns among COs since the consequences of a riot can affect them directly, and the outcomes are usually severe (death or maiming).

Institution-Related Dangers

Institution-related dangers refer to direct or indirect harm caused to an individual while on duty. Therefore, these dangers affect CO's mental health and physical health. Since these dangers are caused while on active-duty on a job, they are linked to increased burnout and stress. Stress can be described from the context of a relationship between the CO and the work environment conditions that the CO can sometimes describe as tiresome, thus endangering their well-being. However, burnout can imply a CO's gradual loss of care about their duty or the emotional exhaustion of the inmates, superiors, and colleagues. Common institutional dangers include interpersonal conflicts,

understaffing, incompetent leadership, long shifts, demanding workloads, poor selection, recruitment, and training of COs.

Experiences of Corrections Officers Who Encountered Violence by Inmates

There have been numerous studies focusing on the working environment of COs and how the professionals cope with the condition as they go about their duty. Extensive studies exist; however, little is known about predictions of officers' perception of victimizations due to danger and fear in the workplace. For instance, previous studies have linked the fear of COs and dangerousness based on job dissatisfaction and increased stress because of the heavy workload (Boudoukha et al., 2016). To stress this perception, studies focusing on occupational stress among COs indicate the role of environmental elements like safety, role conflict, commitment, and satisfaction as predictors of fear among COs. However, demographic factors such as gender and age are also significant elements to consider when examining COs who work under constant fear of being attacked by inmates.

Fear of violent victimization is a significant factor contributing to the stress of COs. Fear and victimization are consequences of workplace violence by inmates. Therefore, they contribute to the subsequent outcomes linked to burnout, negative attitudes, mental disorders, and withdrawal behaviors. Fear is a significant element to consider when developing occupational stress and inmate violence. COs frequently attacked by inmates develop fear and victimization, influencing their behavior. Studies suggest that male and female COs are prone to fear and victimization due to violence by inmates. However, there is a higher likelihood of females undergoing bouts of depression

due to violence. Violent experiences force COs to work under constant fear, not knowing if they will be attacked. This uncertain threat of violence is most common in situations involving a higher inmate-to-CO ratio.

Feelings of fear and risk among COs are a critical element since the feelings contribute to changes in attitude and detachment due to the stress acquired during the process. This statement paves the way for other factors, such as the antecedents of officer perceptions of their working environment and their role as COs. Most studies have centered on the institution, such as security levels and gender of inmates. Some have focused on CO demographics such as educational level, race, sex, and age to predict the perceptions of risk and fear due to inmate violence. Previous studies reported that female COs are more likely to indicate vulnerability, victimization, and safety feelings (Steiner & Wooldredge, 2017). Dowd (2020) assessed female COs working in male prisons to emphasize this perception. The study shows the perception of female COs working in male-dominated institutes and coping. It indicates the element that focuses on fear and victimization in a male-dominated environment. Previous studies have indicated that female COs have a higher tendency to fear inmate victimization instead of staff victimization (Hsieh & Boateng, 2020). Some studies have also indicated that male COs fear inmate victimization (Gordon & Baker, 2017).

The antecedents of COs' cognitive and emotional fears of inmate violence by applying concepts of fear and crime in the work environment were assessed by research Gordon (2017). The author focuses on fear inhibitors and facilitators, which determine CO attitude and behavioral change regarding their interactions with inmates. Perceptions

of fear are then compared among male and female COs. The fear perception among female COs working in male facilities is also assessed in the study (Gordon, 2017). The results suggest that frustration is a greater fear of the facilitator for cognitive and emotional fear. The antecedents of fear suggest how a CO perceives the working environment. Fear facilitators are the resulting elements of individual behavioral change, especially when interacting with inmates. Those affected negatively by traumatic situations did not necessarily have direct exposure; the vivid accounts by colleagues who had witnessed violent or horrific events increased the risk of psychological harm (Bride & Kintzle, 2011; Cieslak et al., 2014; Figley, 1995).

COs are in constant fear of inmate violence and are always on the lookout for any attack from inmates. COs who have experienced or witnessed inmate violence have changed perceptions of their role and will illustrate signals of detachments from their colleagues, recipients, and supervisors. Then they develop occupational stress, which degrades their efficiency towards their role. Empirical analysis on persons working in human service-related topics related to stress has shown that direct or indirect exposure to trauma can adversely affect physical and mental health and contribute to cardiovascular disease (Bride & Kintzle, 2011). Therefore, these experiences are attributed to the two categories of fear antecedents: fear facilitators and fear inhibitors. These elements of fear are focused on the individual and social factors of a profession (Gordon, 2017). Gordon additionally examined the two elements of fear in a previous study by reviewing previous studies that focused on the same topic.

Stress Reactions Present Among Corrections Officers

Four kinds of stress are evident among COs. These include burnout, withdrawal behaviors, negative attitudes, and psychosomatic diseases. Elements such as absenteeism are related to behavioral stress reactions and are indicators of stressful environments where COs work. This suggests that the COs are dissatisfied with their work and employed coping mechanisms such as absenteeism. High absenteeism rates suggest that the conditions are unhealthy, or the COs fear inmate victimization. For instance, in 2015, the turnover rate in Nebraska rose to 30.8% from 18.5% in 2010. This increase is because of inmate violence events among COs, resulting in over 1,000 COs abandoning their posts (Fifield, 2016). The high rates lead to subsequent challenges for the administration since there will be few COs to tend to the high percentage of inmates.

The outcomes caused by inmate-involved actions impact recruitment and retention by corrections administrators. Prospective candidates looking to work as COs are likely to rethink their choices and go for another institution with increased security protocols. This translates to understaffed facilities, meaning that the COs are overloaded with work because of an increased inmate-to-CO ratio. New COs, preferably those with little experience, are the prominent individuals involved in role abandonment. A previous article by The Independent correspondent May Bulman (2018) suggested that a larger percentage of newly hired COs quit their job after serving for less than a year. The report suggests that 33% of those quitting had been in the job for less than a year (Bulman, 2018). The reasons behind the sudden abandonment are due to inmate violence and harassment. New COs have expectations about their duty, including the benefits;

however, they soon realize that their expectations are not in line with what they experience in the line of work. This leads the public, including CO prospects, to question the selection criteria for COs and blame it for the high turnover rates.

A recent study identified absenteeism as another consequence of inmate fear and victimization among COs. The study was based on behavioral change due to occupational stress caused by victimization as a prevalent factor among COs. Neuroticism was the main result of these victimizations (Suliman & Einat, 2018). The scholars set out to examine how the role of a CO affects their personality change. The findings suggested there is an increase in neuroticism factors among COs. Another factor was the duration of service among COs. Neuroticism levels were higher among long-serving COs than newly employed ones. The study concluded that working as a CO influenced the personalities and neuroticism levels among COs. The location of a correctional facility also influences absenteeism levels. This is because there is an assumption that better working conditions and benefits are present in developed nations than in developing nations. This perception determines the turnout of COs for duty. For example, prisons in the United States are well constructed and equipped with advanced features.

Working conditions are better than those in developing nations. This perception indicates that COs working in such institutions will have a higher turnout for their role than those working in institutions in developing nations. However, this is not the case because the developed institutions are riddled with other characteristics such as hosting international criminals such as terrorists and drug lords. COs tasked with managing these inmates must work on constant fear of an attack because such inmates have a massive

following and may resort to forming gangs that may make the lives of the COs unbearable (Ferdick & Smith, 2017). Psychosomatic disorders are more common among COs than in other professions in both developed and developing nations, such as teaching and medicine (Bezerra et al., 2016). This implies that many COs often visit medical facilities within or outside the facilities indicating that psychosomatic disorders are prevalent among COs.

Health and Safety Issues

There are cases where interactions between COs and inmates may produce serious conflicts and dire consequences to either inmates or COs. Violence is a significant stressor among COs. Usually, acts of violence are sparked by a group of inmates targeted at COs for retaliation. Sometimes, a COs is stabbed and left for dead since the tools used in these acts are common tools such as sharpened spoons and syringes. The prevalence is common among male and female facilities. In a study by Pereira (2019), female inmates spark riots that escalate to them stabbing COs who come to intervene. Although no recent research has emphasized the same issue in male facilities, there is a higher prevalence of violence against COs, suggesting that the matter involves male and female inmates. Danger has also been regarded as a stressor among COs (Ferdik, 2016).

In another comprehensive review about the safety and wellness of COs, Ferdik and Smith (2017) mentioned that COs are inclined to maintain peace and order as a primary requirement of their job. Prior studies show that overcrowding in prisons contributes to workplace challenges for COs, making peace and order in the prisons among inmates unpredictable, thus raising safety concerns. The ratio of correction staff to

inmates is disproportionate, which creates a higher workload for uniformed staff. Another factor is when an officer(s) is injured because of using force, resulting in short staff.

When correctional facilities are already understaffed and suffer short staff due to officers being out of work, this results in mandatory overtime. Other safety concerns identified include working extensive shifts where direct inmate contact is prolonged, dealing with inmates perceived as disruptive, and the lack of professional support from supervisors and upper-level management (Armstrong et al., 2015; Martin et al., 2012).

Coping With Trauma Among Corrections Officers Who Have Experienced Violence Coping Mechanisms Post Violent Experience

Inmate violence shapes the performance of COs as they carry out their duty. Very few studies have focused on the coping mechanism of COs who have been victims of inmate violence. A recent study by Ricciardelli et al. (2018) was conducted, including interviews among COs in Canada to assess how COs coped with inmate violence in eastern Canada. The authors concluded that the working conditions of COs influenced their work and how they performed. For instance, they worked under strained conditions such as being understaffed and managing every type of inmate, including the violent ones. Therefore, they developed emotional stress to cope with their work. Violence was inevitable, and a CO would not know when and how to fall victim to an attack. These responses suggest that based on the exposure to the pressure in the workplace, an officer who falls victim to inmate violence would have difficulty being productive for the role. While on duty, COs display a macho persona to inmates (Tracy, 2004). Any form of vulnerability shown in the correctional setting can be viewed as a sign of weakness

(Gayle, P. A., 2020). The brave, outward appearance is critical to a CO and their role within the jails; hence, facial expressions are presented with restricted emotions while dealing with the inmates (Denhof & Spinaris, 2016; Thomas, 2012). The correlation between restrictive emotionality and alexithymia was investigated by researchers Levant et al. (2015), and it was determined that control over one's emotions formed a positive relationship between the two concepts.

Ricciardelli and Power (2020) assessed how inmate incarceration affected the role of COs in Canada. The authors conducted the study based on previous occupational literature, examining how their role influenced the mental health of a CO. The authors wanted to examine the effect of a CO in institutions composed of vast populations of violent prisoners. Monitoring the prisoners is part of the work description of COs. It is categorized as operational stressors, while the context of their job (correctional institutes) is regarded as the organizational stressors (Ricciardelli & Power, 2020). The authors conducted semistructured interviews among the COs in correctional facilities in Atlantic Canada. Results suggested that COs discovered several operational stressors that affected their mental health. The identified factors include direct violence and harassment from inmates. Organizational stressors such as work culture discouraged visible emotional responses to organizational stressors. These included inadequate support from the administration and inadequate mitigations to hamper inmate violence and harassment. The subsequent result of these stressors is that the COs showed adverse mental health outcomes (Ricciardelli & Power, 2020).

Work–Family Conflict

There are dangers associated with CO interchange of surroundings between their workplaces and back to their community, such as home and the external environment. Examples of such dangers include work-family conflict, public misperceptions, and political scrutiny from people with little to no knowledge about what COs must contend with during their job. COs face a difficult time showing a dual role. i.e., maintaining their characteristics as parents in the family and maintaining professionalism in the workplace. Professionally, COs supervise violent inmates and others with special needs. In several instances, strict COs have carried the *on duty persona* home to their families. For example, they can treat their children harshly, thus affecting their relationship with their children. Administrators require that COs be more unemotional, direct, and assertive while performing their supervisory role with inmates. This form of communication can rarely be seen at home, but it can affect the CO and their family's relationship when it occurs. When the level of dissonance between the two environments is greater, the COs will experience reduced wellness levels likely to be exposed to trauma, stress response, chronic fatigue, sarcasm, and pessimism. When family members feel like the CO is behaving uncommonly, they will redirect their frustration towards the CO. these frustrations can accumulate and lead to increased levels of psychological concern among COs due to family pressures. Many COs face difficulty balancing family demands with stressful elements while working in prison. To meet these two environments' demands, COs must adapt to family life and prison life.

Schott et al. (2016) identified that professionals have different ways of dealing with occupational stress. A recent study by Parsons (2015) discovered that COs illustrated worse coping mechanisms while experiencing occupational stress. After surveying 288 COs, the author concluded that many COs do not cope well with stress elements. The findings suggested that when encountered with prolonged occupational stress, COs opted to employ drastic actions such as settling for divorce as a way of detaching themselves from their partners, committing suicide, and experiencing a shorter lifespan due to prolonged occupational stress (Parsons, 2015). This suggests that many COs are hurt by occupational stress and find trouble establishing better-coping strategies, so they employ drastic actions. In a similar study by Ricciardelli and Power (2020), it was discovered that many COs had established coping mechanisms when they encountered stressful events. In a study by Sowunmi et al. (2018), it was discovered that COs preferred to hide their thoughts and feelings from their families. However, experienced COs have a higher level of coping than recently hired COs (Chipango, 2016). Several coping strategies do not help in alleviating occupational stress among COs. These include detachment, ignoring the situation, and refusing to exchange information with other people (friends, family, and colleagues).

Posttraumatic Stress Disorder and Physiological Impact

PTSD and physiological impacts are two elements that contribute to stress and behavioral change among COs. In this respect, occupational stress is associated with burnout due to workload. Therefore, occupational stress is the resulting physiological impact individuals experience due to work-related actions (Quick & Henderson, 2016).

Occupational stress is related to the stress elements that an individual will react to in the work environment, thus influencing their behavior. A physiological impact is a form of a stress reaction prevalent among COs. Examples of physiological impacts include high blood pressure and heart palpitations, sleep-related disorders (e.g., insomnia, sleep apnea), and gastrointestinal ailments. Other forms include psychological impacts such as anxiety, job dissatisfaction, burnout, and behavioral impacts such as alcohol and drug abuse, turnover, and absenteeism. Essentially, occupational stress is subject to a professional's experience that contributes to the interplay of the work environment and an employees' ability to cope with the conditions of the role. The CO should establish an adaptive technique of handling the job and dealing with the challenges associated with the duty.

A long-term effect of these work-related challenges is burnout. This condition is prevalent among professionals working with their colleagues equally, such as social workers, COs, nurses, and teachers (Harizanova & Stoyanova, 2020). Burnout is “a prolonged response to chronic emotional and interpersonal stressors on the job” (Maslach & Leiter, 2016). Burnout is defined by professional inefficacy, cynicism, and exhaustion and is an element of job stress syndrome. Inefficacy is defined as the inability to perform regarding a profession. Cynicism is defined as developing an attitude of a profession based on distrust of colleagues and superiors. Cynicism can lead to depersonalization, whereby an individual is detached from others. Exhaustion is defined as the feeling of becoming emotionally depleted at an individual's emotional benefit.

Burnout places a professional's stress experience in a work environment. Burnout impacts an individual's social, cognitive, and personal functioning, leading to a decline in the quality of their work. The effect is costly for individuals and those around them, such as family and colleagues. Gathering empirical evidence implies that burnout is a progressive step developed across different times. Burnout starts from the occupational stress obtained by a CO while interacting with colleagues, prisoners, and supervisors. These interactions are often stressful, resulting in the depletion of emotional resources. Afterward, a CO acquires negative behaviors and attitudes towards the role. Attitudes influence how they treat the prisoners. This may be with force or become detached and illustrate a negative behavior to gratify their needs. The negative attitudes are also elements of depersonalization and are often regarded as a defensive coping mechanism. i.e., the CO feels satisfaction while expressing a negative attitude towards their colleagues and may use force while dealing with inmates. A CO may create a psychological distance to protect themselves from the pressures of the work environment. However, this attempt only increases the stress as it reduces the relationship between the CO and the other recipients (colleagues, inmates, supervisors), aggravating their interpersonal problems. The CO, thus, becomes less effective in performing their duty and accomplishing their personal goals.

Physiological and PTSD impacts are elements of burnout. Emotional burnout, which occurs before occupational burnout, can lead to employees feeling inadequate while carrying out tasks related to their duties" (Yildiz Durak & Saritepeci, 2019, p. 69). A conventional model of burnout is divided into four stages: (a) enthusiasm, (b)

stagnation, (c) frustration, and (d) apathy (Díaz, 2018). These stages are related to the typical role of a CO, as mentioned by Raphadi (2017) “The hopes on their faces, the positive anxiety of their motivated gait—at first, it is all there. Then slowly and almost methodically, the smiles wane, the expectations atrophy and the desires to perform in a positive fashion succumb to escapist fantasy and verbally acknowledged skepticism” (Raphadi, 2017). The idealistic expectations and goals are elements of future frustration, leading to burnout cases.

Burnout

A physiological impact to consider is burnout. Burnout is a continuous variable, such as length. In previous studies, burnout has been associated with the emotional exhaustion experienced by COs in the line of duty. The perception of burnout is different among different studies that follow other criteria to define the concept. Some studies have referred to burnout as an arbitrary element. Some studies refer to the concept based on the dimensions of burnout prone to COs after being exposed to stressors. Typically, most COs' responses to burnout include depersonalization. In a recent study conducted by Castiglione et al. (2017), the relationship between self-representation discrepancies, burnout, and job satisfaction was examined. The authors identified that burnout among COs led to increased job dissatisfaction rates. The other element, self-representation discrepancies, also increased burnout levels while decreasing job satisfaction (Castiglione et al., 2017). The variable of self-representation discrepancies was examined as a relationship between the COs self and their future self. The responses suggested that COs know they are not satisfied with their job, and the same will be seen when they continue

working for the same position over the next years. The element of burnout is a significant factor to note as it translates to the performance of a CO.

COs develop coping mechanisms to inhibit the effect of burnout on their job. For example, some may develop depersonalized attitudes to treat inmates impersonally. There are limited studies that have focused on burnout in association with the job description of a CO. For example, not all COs monitor inmates in holding areas. Some work in institutional offices, while others work in other departments besides having direct contact with inmates. In a previous study conducted by Choi et al. (2020), CO burnout was associated with the role. i.e., the characteristics of COs following the refurbishment of the role from the old-fashioned CO. The study was a controlled experimental exercise focused on 269 COs in four facilities in South Korea. The study mainly focused on the COs with direct contact with inmates and attempted to study the effect of experienced COs in custody-on-officer aggression and job characteristics (Choi et al., 2020). The authors looked at custody-on-aggression in three elements: minor physical violence, serious physical violence, and verbal violence as a response mechanism that a CO is experiencing burnout. These responses are directly addressed to the inmates and influence the relationship of COs to inmates. Results suggested that COs experiencing burnout preferred to respond with verbal victimization than physical victimization (Choi et al., 2020). COs responded that verbal victimization, such as using insults and strong words, would affect the inmates greater than physical victimization. Other study findings suggest that the job description greatly affected the dimensions of a CO than experienced victimization (Choi et al., 2020).

The above studies illustrate that COs burnout is associated with feelings of reduced personal accomplishment and depersonalization depending on the context in which the burnout is encountered. The studies further suggest that the concept of burnout depends on the criterion employed by a researcher. Irrespective, they subjectively agree that the effect of burnout is evident in the productivity of a CO, which is later illustrated through different coping mechanisms on the recipient (inmates, colleagues, or supervisors). Another assumption of the literature for occupational burnout among COs is the increased levels of psychological distress. Studies that illustrated this concept were conducted before 2016 and have illustrated low occupational stress among COs in different work environments (i.e., developed and developing nations, poor and better operational benefits, harsh and conducive working environment). Projective findings of such assumptions would point to the COs exhibiting higher psychological distress levels depending on the work environment. For example, if a CO works in a harsh environment, there is a higher likelihood they develop the selection effects of psychological stress. i.e., COs with weaker constitutions will leave their duty or not apply for the job. Although this is only an assumption, consider the levels of burnout among COs.

The assumption is made since a few recent studies have focused on the matter. However, Badru et al. (2018) conducted a study to examine the psychological well-being of COs in Nigerian facilities. The authors focused on the socio-legal implications of a CO's psychological well-being to establish how their work is affected by stress. The number of participants for the study was 302, randomly selected for a generalized study involving their levels of anxiety disorders and major depression, work-related, and socio-

demographic correlations. The authors discovered a 2.3% prevalence rate of anxiety disorders after a 6-month study compared to a 4% prevalence rate for major depression after a 12-month study (Badru et al., 2018). These figures were more significant than those found in the general public (i.e., other professions such as medicine and teaching). Despite the context selected by a researcher, the identified stress reveals that COs are frequently under stress. High levels of stress indicated absenteeism and high turnover rates compared to other professions. COs suffer more than others in other occupations, such as hypertension and other hypertension levels. The reviewed literature also suggests that disorders related to cardiovascular conditions are common among COs. COs develop negative attitudes and feelings to cope with the complications, such as burnout, cynicism, and job dissatisfaction.

Depersonalization

While on duty, COs may display this tough guy or impersonal persona as a way of coping with aggressive inmates to reduce intimidation or other threats directed towards them (Morgan et al., 2002). This person can be better described as Alexithymia-- the physical appearance void of emotional expression (Peasley-Miklus et al., 2016).

Depersonalization is identified as emotional restrictiveness or an impersonal macho attitude that is the primary trait of alexithymia. (Bagby et al., 1994; Taylor et al., 2016; Tracy, 2004).

Summary of Corrections Officers, Workplace Violence, Posttraumatic Stress Disorder, and Physiological Impact

COs are tasked with monitoring and regulating all activities involving inmates

and are expected to perform their assigned duties within a stipulated time until they resign or retire. These professionals are often perceived as "dirty workers" by different individuals during their time, including the inmates themselves (Steiner & Wooldredge, 2018). They encounter different obstacles in their line of work, starting from their interactions with inmates, colleagues, and superiors; and poor social and personal image depending on their work (Evers et al., 2020). Their job requires COs to be secluded from the public and be 'confined' in correctional facilities and inmates compared to other first responders such as firefighters, paramedics, and police officers. They are often compared to the inmates they are tasked with managing (Ricciardelli et al., 2020).

Since COs rarely receive respect from the inmates, they are sometimes forced to comply with inmates, and many emotional issues can manifest themselves. McNeeley and Donley (2020) explained such issues when a CO expressed fear and anxiety before engaging the inmate to excitement and pride for successful execution and a culmination of guilt, disgust, and confusion afterward. This was especially evident in mentally ill inmates (McNeeley & Donley, 2020). Usually, their work involves constant use of force, which leads them to develop paranoia when they return to the public; they intrude into other people's lives outside the facilities. A traumatic event is direct or indirect exposure to life-threatening occurrences, fatal injury, or sexual violence (Carleton et al., 2018). Findings suggested that sudden violent death was the worst event for COs. However, physical assault from inmates was identified as the most common event among COs than other professionals (Carleton et al., 2018). Like other public service personnel, COs are also exposed to physical and emotional events in their work. Interactions of COs with

mentally ill inmates are an escalating factor for physical and emotional stress. Therefore, they are more likely to show PTSD, ASD, major depression, and alcohol abuse (Carleton et al., 2018). The combination of traumatic episodes with low social support and subsequent psychological distress with pre-existing symptoms of traumatic stress, identified personnel, is more likely to illustrate high psychological stress levels when exposed to occupational events such as inmate violence (Gordon & Baker, 2017).

PTSD is usually associated with other psychological disorders such as personality disorder traits, mood disorders, and anxiety disorders. However, introducing the Complex-PTSD (C-PTSD) reverse the terms. describes the characteristics and symptoms based on trauma exposure (Ben-Ezra et al., 2018). It has also been called the disorder of extreme stress not otherwise specified (DESNOS; Brewin et al., 2017). The disorder defines the issues associated with continued exposure to stress elements that contribute to interpersonal traumatic stress. Subsequent responses of an individual experiencing C-PTSD include damaged relationships, identity disruption, nodulated self-anger, and impulsive behavior. Other C-PTSD symptoms include mistrust, major depression, and chronic pain (Ben-Ezra et al., 2018).

Previous studies have found that prolonged CO exposure to inmates convicted of serious offenses will toll CO's trauma experiences. The subsequent occupational stress harms COs: they cannot develop effective coping measures, leading to negative personality changes such as developing negative attitudes towards the recipients (inmates, colleagues, and superiors) despite showing they are doing okay (Suliman & Einat 2018). These traumas are more prevalent among COs than other first-responder

professions such as paramedics, firefighting, and police officers. In a recent study by Rhineberger-Dunn et al. (2016), COs with better health had a higher likelihood of reporting trauma than the ones with poor health, while probation/parole officers (PPOs) reported symptoms of secondary trauma than COs (Rhineberger-Dunn et al., 2016).

In a similar study by Regehr et al. (2019), low social support and previous trauma were linked to prolonged exposure to psychological stress elements. The study confirmed previous studies and raised concerns about the negative impact of prolonged exposure to first-line responders (Regehr et al., 2019). Professionals recording low social support levels, pre-existing traumatic stress signals, and previous exposure to traumatic events had a higher likelihood of illustrating vulnerability to psychological stress when exposed to similar dangerous occupational duties.

Adverse posttraumatic reactions have been associated with the specific traumas experienced by professionals (Chopko et al., 2018). In Schubert, Schmidt, and Rosner's (2016) study, PTSD, and post-traumatic growth (PTG) are both trauma elements. PTG results from cognitive processes among individuals and is more likely to influence their functional and dysfunctional processes (Schubert et al., 2016). Serious life-threatening events are prevalent among first-line respondents, such as firefighters (Arbona et al., 2017) and police officers (Bierie et al., 2016). However, their prevalence of prolonged exposure to traumatic events is not higher than COs. For example, firefighters rarely encounter serious fire emergencies, while police officers often apprehend offenders who attack them. They can avoid the scenarios from escalating into severe cases. However, COs face institutional policies regarding their interactions with inmates in correctional

facilities. The policies suggest that the inmates are 'special' individuals treated well by the COs. Therefore, when inmates attack COs, little action is taken against them. Still, when a CO responds with equal force, they are subjected to severe punishment that may often lead to dismissal. Inmates often perceive CO's lack of power as a source of weakness and will not think twice about attacking them whenever they get a chance (Gordon & Baker, 2017). However, other officers have discovered avenues of coping with these events to help them survive their profession (Ellison, 2017).

The coping strategies are often employed as interventions for dealing with occupational stress. They may range from less severe strategies such as suppressing thoughts to severe strategies such as force (Raphadi, 2017). In a study by Sowunmi et al. (2018), it was discovered that COs preferred to hide their thoughts and feelings from their families. Such coping strategies lead the CO to be underproductive when returning to their workplace. Cos have a higher tendency to reduce their communications with their spouses, leading to increased family dispute levels. This translates to increased traumatic symptoms instead of reducing occupational stress (Sowunmi et al., 2018). This implies that personal relationships and occupational stress are related to PTSD episodes caused by prolonged exposure to traumatic events among COs. In a recent study, Chopko et al. (2018) discovered that when professionals put in a low effort in strengthening their relationships, they are likely to experience higher PTSD symptoms and develop depersonalization strategies whereby they exclude themselves from the family. In a similar study by Craun et al. (2015), it was discovered there is a positive connection between traumatic stress and discomforts in illustrating intimacy with family members

between officers (Craun et al., 2015). The findings suggested that law enforcement officers illustrated higher levels and varieties of traumatic symptoms based on trauma types, such as direct and indirect traumatic exposure. This implies front-line personnel such as firefighters, COs, and police officers.

Studies have also identified that officers use emotional detachment strategies to cope with occupational stress. This was stressed in a recent study by Kinman et al. (2017) to examine the connection between work-life (behavior-based, strain-based, and time-based) and working conditions. The authors identified higher work-life conflicts related to emotional exhaustion and working conditions (Kinman et al., 2017).

It was established that lower detachments and higher remuneration were aggravated the positive relationship between aggression and job requirements and emotional strain (Kinman et al., 2017). COs also have a higher likelihood of exercising control over problem-solving situations about their responsibilities. They indicate emotional detachment as a coping strategy to manage occupational stress. This impacts their cognitive functioning eventually spreads to the personal lives of COs leading to dysfunction and stress in personal relations (Klinoff et al., 2018).

COs often find themselves unable to break away from their work duty when at home. There is a higher likelihood of them finding it difficult to break away from their role. A study by Araújo et al. (2020) discovered that female COs have difficulty breaking away from their role after assessing the quality of life of COs. The findings suggested that female COs and COs with high violence rates had worse quality of life scores than those with low violence rates (Araújo et al., 2020). This implies that the COs have

difficulty engaging in normal social duties, such as interacting with their families. This translates to the deterioration of the relationships of the COs and their families. For example, their relationship with their children is hampered since they will not behave well. A higher prevalence of COs are parents of teenagers to treat their children as juveniles when returning home (Lin, 2017).

Another element of burnout and occupational stress is increasing fatigue among COs. It has been discovered that the quality of sleep among COs is poor since officers are assigned to longer working shifts compared to other professionals. In a study and fatigue among COs. This was emphasized by Barnes-Farrell et al. (2018), whereby it was discovered that long shifts interfere with the COs' work since they illustrate signs of fatigue and poor quality of sleep while on duty. The authors argued that the situation is grave and requires quick mitigation since nightwork and overtimes affect the health and wellness of COs (Barnes-Farrell et al., 2018). This implies that the nature of their work exposes COs to more occupational stress cases since COs cannot receive enough rest time. This contributes to higher levels of dysfunction and fatigue. This means they are likely to commit errors and receive complaints from their colleagues and superiors (Barnes-Farrell et al., 2018). This indication suggests there is a relationship between mental wellness and occupational stress.

Previous studies have illustrated that the high job demands of a CO are attributed to burnout and occupational stress (Akbari et al., 2017; Bezerra et al., 2016; Cho et al., 2020). Emotional exhaustion has been associated with the workload and work shifts (Baeriswyl et al., 2016; Dhaini et al., 2018). These studies suggested that among the

prevalent job stressors among professionals, job pressure acted as a higher cause of anxiety and burnout. The findings translate to the role of COs, where job pressure produces higher levels of burnout (Bezerra et al., 2016).

In a recent study by Naik, Mall, and Palace (2019), the role of inmate and facility well-being was associated with COs. Findings suggested that facility aggregations are related to physical and psychological strain among COs (Naik et al., 2019). Two types of symptomatology contribute to explaining psychological stress and burnout among COs. These are somatic symptomatology and psychological symptomatology. Somatic symptomatology is used to explain somatic complaints. Studies identified that physical originate from different sources involving physical and psychological events. Physical events involve personnel injured while on duty, while psychological events are associated with injuries brought up by psychosomatic and stress-related events. The prevalence of these events occurs among COs in correctional facilities. Studies that focused on the physical health of COs were focused on nine variables. The authors wanted to identify the prevalence of physical health elements by asking the participants questions such as experiencing ailments such as headaches, diminished quality of sleep, anxiety, gastrointestinal afflictions, or tension (Kinman et al., 2017). Psychological symptomatology was also associated with psychological issues. The authors identified ten questions to identify the prevalence of psychological issues concerning psychological issues. The authors wanted to know the prevalence of psychological complications of the participants, and the results suggested that COs present different characteristics of physical and psychological health issues.

Another study looked at the prevalence of coping strategies employed by COs to manage occupational stress and burnout. There is a higher likelihood of COs illustrating different behaviors than usual. For example, some COs resort to drug and alcohol use within a short time after employment (Stoyanova & Harizanova, 2016). Other COs worry about their economic life outside the facilities. Those who report higher likelihoods of worry indicated higher psychological issues such as major depression and concentration issues were discovered in COs who complained about economic issues such as finances (Stojkovic, 2016). The same COs also indicated physical health symptoms such as back pain, stomachache, and headache. Their coping strategies involved strategies such as asking for sick leaves.

In another study, Carleton et al. (2018) attempted to assess the prevalence of mental illnesses and chronic pain among public service personnel (PSP) such as “call Center operators/dispatchers, correctional workers, firefighters, municipal/provincial police, paramedics, Royal Canadian Mounted police” (Carlton et al., 2018). Findings suggested that the participants who indicated chronic pain had a higher likelihood of experiencing PTSD, major depression, anxiety disorder, and social anxiety disorder (Carlton et al., 2018). The study suggests that when PSPs experience prolonged exposure to physical and mental occasions in their duty, they will experience mental illness depending on their work. For example, it has been established that COs encounter life-threatening events such as inmate stabbing, making them work with the caution of being attacked. Inmates have no respect for COs, and they know it. Therefore, they can resort to attacking a CO at any time and leave them in severe conditions. The increased reporting

of these crimes has prompted COs to develop mental health issues since inmates frequently victimize them.

Carlton et al. (2018) employed a cross-tabulation data analysis technique and a logistic regression model. Findings suggested that 23.1 percent of PSPs indicated concerns about the likelihood of experiencing mental disorders. A more significant percentage of these respondents worked as COs (Carleton et al., 2018). The findings indicate that COs have a higher likelihood of experiencing psychiatric disorders like PTSD, major depression, social anxiety disorder, and alcohol use. However, the study did not illustrate the method used in gathering the sample. This suggests that the responses could have been biased, interfering with data analysis and representation. The study successfully informs studies related to traumatic events encountered by COs working with the NYPD.

In another study, Rhineberger-Dunn et al. (2016) attempted to identify how COs experience secondary trauma. The study focused on residential officers (ROs) and PPOs. Many qualitative studies have reflected on this topic; therefore, there are broader avenues to relate the two variables. The authors focused on six correctional facility departments in Iowa and randomly selected participants using email to ensure that diversity was met. The authors identified secondary trauma as the dependent variable. Several independent variables were identified. These included the role of a CO (e.g., as PPOs or ROs) and demographic characteristics such as age, gender, education level, job location, veteran status, and tenure (Rhineberger-Dunn et al., 2016). Other identified independent variables included role preparedness and perception, shift hours, and job training. Findings

suggested that the PPOs were older and better health and had higher educational levels than ROs. They also had higher work experience and said they were sufficiently trained to work with ROs (Rhineberger-Dunn et al., 2016). PPOs indicated a higher likelihood of secondary trauma, although the same can apply to either position (PPO or RO). The findings also suggested that COs in better health had a higher likelihood of reporting trauma than their counterparts with worse medical conditions. COs who had received prior training for their role also indicated a lower likelihood of experiencing secondary trauma than those who had not received prior training. The limitation of the study is that it did not stress the geographical location and the sample size. It was also biased because it only focused on race. Irrespective has established a background for further studies by implying that prolonged exposure to offenders convicted of severe crimes positively affects COs experiencing secondary trauma (Rhineberger-Dunn et al., 2016).

The nature of the work of a CO leads them to experience prolonged episodes of burnout and occupational stress since they are encountered with varying obstacles such as poor relationships, inmates, colleagues, and superiors, lack of influence, poor personal and social image (Marszalek, 2020). Situations that feature PSPs have different perceptions of individuals working in the sector. For example, firefighters, police officers, and ambulance paramedics are perceived as heroes (McNamara, 2016; Nóia, 2018; Terpstra & Salet, 2020), while COs are perceived as anti-heroes (Feldman, 2020). The media praises firefighters, police officers, and paramedics as unsung heroes depending on the sensitive nature of their work, while COs are often under-represented and under-praised. This implies that the effect of this bias will deem the position as an

unfit occupation in the PSP sector, making many prospective candidates brush it off from their considerations of future employment (Hogan et al., 2017).

The job is also associated with many emotional issues encountered due to prolonged exposure to stressors. In a recent study by Spencer and Ricciardelli (2017), it was discovered that COs have a higher likelihood of illustrating disgust and fear among different inmates, such as sexual offenders. Findings suggested that COs develop negative attitudes and fear when interacting with sexual offenders than other inmates who have committed petty crimes. This implies that the nature and type of an inmate are primary elements to consider when looking at the relationship between COs and inmates. The emotions vary depending on fear and anxiety gained after interacting with inmates. Other cases involve direct interactions with inmates, such as taking down inmates to quell a war between inmates also translates to the emotional capacity of a CO. For example, if a riot erupts, COs are likely to avoid going to stop inmates who have committed serious offenses such as murder and aggravated assault. However, they can opt to do so if backed by other COs (Fovet et al., 2017). Understanding the role of COs is also essential as it relates to the consequences of imprisonment, such as illiteracy, mental illnesses, drug addiction, unemployment, and homelessness among inmates (McCarthy et al., 2016). Even when they are out of their working positions and back in public social circles, COs are often characterized by high paranoia levels when they take back their private lives.

Summary and Conclusions

Several studies have addressed the topic following the review of different studies performed in this section. However, many studies have recommended further studies by

hinting at the minimal studies focused on COs instead of the general prison personnel. Other scholars have identified that the nature of facilities and the duty involve threat and fear elements that can lead to attacks targeted at COs. These studies suggest these occurrences influence the behavior of COs when they interact with people inside and outside the prison setting. For example, the impact of their personality, family relationships, and relationships with inmates, colleagues, and supervisors. The current study contributed to the existing but limited literature focusing on COs working in a violent and stressful setting where heightened exposure to hostile and dangerous incidents is a daily occurrence and fosters an adverse effect on the mental and physical well-being from the perspective of these officers. This current study contributes to criminal justice, public policy and administration, and social and behavioral sciences. The theory of construction emotion provided a framework that aims to understand decision-making in stressful occupational settings, like law enforcement (Barrett 2017; Fridman et al., 2019) and explained the outcome of the research questions for this study. Chapter 3 discusses the research design, methodology, and data collection techniques used in later parts of the study.

Chapter 3: Research Method

Introduction

In this chapter, I discuss the methodological approach to the research, participant recruitment, selection, instrumentation, data collection process, procedure, analysis, and ethical considerations and credibility. The rationale for selecting phenomenology to conduct this study is discussed. The role of the researcher is addressed, along with ethical considerations.

COs work in an environment where violence and trauma can occur. COs should have an opportunity to discuss how they view and experience violence in the workplace. Although quantitative studies have invested in working conditions for staff in jails, research that focuses primarily on COs is minimal (Tracy, 2005). Phenomenological studies help researchers gather information and obtain accounts of the participants' experiences and the trauma surrounding these experiences. The research design allowed me to explore COs' perspectives on how the everyday violence associated with jails influences their physiological well-being.

Researchers using phenomenology seek to describe events, activities, or phenomena and understand the lived experiences of individuals. (Burkholder et al., 2016; Patton, 2015). Focusing on the experience, allowing for researcher participation, and treating the other participants as coresearchers allows for complete subjectivity (Grand Canyon University, n.d.). This study contributes to an existing yet limited body of literature about trauma that arises from working in a correctional setting where heightened exposure to hostile and dangerous incidents is a daily occurrence and fosters

an adverse effect on the mental and physical well-being from the perspective of these officers.

Research Question, Design, and Rationale

The research questions in this phenomenological study were used to address the research problem in this study. The research questions included the following: What are the lived experiences of corrections officers who experience or witness workplace violence by inmates? How do corrections officers who have witnessed or experienced workplace violence by inmates cope with the trauma?

The approach to this qualitative study included conducting qualitative interviews. Qualitative interviewing is diverse in application and can have many forms to achieve a specific outcome. The purpose of qualitative interviewing was to capture how the interviewees viewed their world, to learn their terminology and judgments, and to capture the complexities of their perceptions and experiences (Patton, 2015). In this study, I used interviews to help promote a relationship built on trust and develop a semistructured, in-depth responsive interviewing model. This model involves an assumption that people interpret events and construct their understanding of what happened (Rubin & Rubin, 2012). Responsive interviewing involves treating the researcher (interviewer) and participant (interviewee) as persons with feelings and opinions rather than taking a detached approach to obtaining data. The researcher builds rapport and develops a conversational partnership; additionally, semistructured interviewing allows flexibility in design (Rubin & Rubin, 2012).

The purpose of this qualitative phenomenological study was to explore the perspectives of COs on how the common occurrences of violence associated with working in jails influence their physiological well-being. The study included 45 to 60-minute interviews with the participants, who shared their story(ies) about their experience(s) with workplace violence and trauma and use-of-force incidents with inmates, in which they either had direct involvement or were witnesses. Patton (2015) noted that phenomenological interviews uses descriptions of lived experiences and remembered stories, describing a phenomenon in concrete and lived-through terms.

This research contributes to an existing yet limited body of literature focusing on COs working in a violent and stressful setting where heightened exposure to hostile and dangerous incidents is a daily occurrence and fosters influences on mental and physical well-being from the perspective of these officers. The tool that was used for data collection was audio-recorded interviews. The findings informed recommendations for correctional administrators on the development, improvement, or implementation of mental health services for officers.

Role of the Researcher

In qualitative research, the researcher has safety measures to protect participants and their data. Although the researcher accesses perceptions and accounts from study participants, any data collected and used in a study should maintain anonymity. Any information that could reveal the participants' identities should be omitted. A researcher must identify and address any personal or professional relationships with participants and state how these biases were managed. Bias is an area of concern. Alase (2017) suggested

that researchers should set aside any prejudgments, biases, and preconceived ideas about the things that they are trying to understand to authentically capture lived experiences of a phenomenon (p. 13).

I have no professional relationship with COs; I am employed with a local court in a northeastern metropolitan region. This court does not handle criminal matters, and there is no intergovernmental relationship with the corrections department. To avoid any bias for this study, COs with whom I affiliated were eliminated as eligible participants; instead, they were used as a means to connect with other participants who met the selection criterion (snowballing). Another tool for managing bias in the study was stated clearly in the informed consent document, which identified my role as the researcher and that of the participant. All personal thoughts and opinions that I had as the researcher were not disclosed during the interview to avoid any influence during data collection. After the participant responded to the questions, I clarified the responses to ensure that the participant's answers were captured accurately.

Methodology—Qualitative Research

The purpose of qualitative research is to examine various issues from the perspective of study participants and generate new theories and concepts (Viswambharan & Priya, 2016). Researchers adopting phenomenology seek to describe events, activities, or phenomena and understand the lived experiences of individuals (Burkholder et al., 2016; Patton, 2015, 2016). Phenomenological qualitative methodology was ideal for this study's research problem, purpose, and questions. The purpose of this qualitative phenomenological study was to explore the perspectives of COs on how the frequent

occurrences of violence associated with working in jails influence their physiological well-being. The specific contribution that this study makes to the literature is the description of workplace violence experiences and their influence on the physiological well-being of COs.

Participant Selection

A research article by Mason (2010) indicates that five to 25 participants is for qualitative studies; however, once a pattern repeats, saturation has been attained (p. 3). For this study, the minimum number of participants was 10. Although some COs may be active-duty, for various reasons (e.g., failure to qualify at the gun range, medically modified, or received command disciplinary citations) they do not have direct inmate contact. The sample population included male and female COs who had direct contact with the inmate population daily. In this study I also sought to include officers with at least 5 years of continuous service. This population was selected because many employees in the department work directly with inmates daily; however, the target was COs who encounter force incidents on the job.

Participants were approached via social media platforms such as Facebook and Instagram, where groups were formulated specifically for COs. Another method of participant selection was snowballing participants. This approach allowed me to gather a broad spectrum of perspectives about the phenomenon of interest in the units of analysis. Purposive sampling identifies candidates who can provide the needed data for a study. The snowballing method requires that participants send a referral to the next participant, which helps create a chain of interviewees who would be good sources given the focus of

inquiry. Reputational sampling identifies knowledgeable people who can provide information on inquiry issues. (Burkholder et al., 2016; Patton, 2015; Ravitch & Carl, 2015). This technique is often called stratified purposeful sampling strategies.

Once accepted into Facebook groups geared toward COs and law enforcement officers in the northeastern metropolitan region, I contacted interested persons by WhatsApp, Facebook, and Facebook Messenger. Participant interest survey links were posted on Facebook and sent via Facebook Messenger or WhatsApp. Once the survey was completed, a copy of the survey responses along with the informed consent was automatically emailed to every person who expressed interest and consented to participate in the study. A follow-up email was sent with the interview invitations, and once the interview date, time, and location were arranged, the Zoom meeting link was emailed to the participant. The informed consent included a sample question from the interview guide revised based on my instructor's feedback and a peer debrief. Once the participant replied with "I consent," they were secured. At the face-to-face interviews, physical copies were presented to the participants. Using the application Adobe, which is available through the Play Store for Google devices, I scanned the informed consent, converted it to a .pdf file, forwarded it to the participants' email, and maintained a record of informed consent for all participants in case an Institutional Review Board (IRB) audit was initiated. I restated who I was, which school I attended, and the purpose of the study, and I asked the participant once again if they consented to participate, after which I commenced the interview.

Instrumentation

The interview was organized so that questions came from phenomenological inquiry. In-depth interviews are suitable when a researcher gathers data from persons with knowledge of or experience with the problem under study (Rubin & Rubin, 2012). With this form of interviewing, the researcher seeks to obtain interviewees' experiences and perspectives on the research problem. This form of interviewing aligns with a phenomenological study. I categorized the following questions, including nonidentifying pedigree information, professional history, job responsibilities, and personal experience(s) with workplace violence, use of force, and trauma. The questions allowed the participants to share their experiences and give details on concepts lacking in the body of literature. I took notes and commented on body language during the interview, depending on the question(s) and how the participant responded. I also made modifications so that the questions were open ended, and based on the answers, I asked probing follow-up questions to keep the conversation going.

Content validity and credibility need to be ensured throughout the interview process, and a researcher has the responsibility to ensure that this takes place. There are many features, problems, and pitfalls in interviewing. Some questions may make the interviewee uncomfortable, and they may become apprehensive about opting to leave the study. Problems with interviewing study participants can include language barriers and the inability to comprehend the jargon or answers that may not relate to the study. There are 10 principles and interviewing essential skills to communicate effectively (Berman & Chutka, 2016). Among these skills, Berman & Chutka recommend being clear and

concise, listening and making sure that the interviewee knows the researcher is listening, and asking probing questions. The probing questions should be asked within ethical boundaries and when needed, showing interest in a nonjudgmental manner, as well as being aware of body language. Lastly, being prepared for unexpected responses, and knowing how to react professionally are needed interviewing skills. Berman & Chutka (2016).

Procedure for Recruitment, Participation, and Data Collection

Some data were collected from interviews conducted face-to-face at a safe and secure location that the participant and I agreed upon. I used this method to collect the data because securing approval from the corrections department to observe COs in areas where inmates were held would not have been easy for safety and liability reasons. However, due to the COVID-19 (novel coronavirus) pandemic and emerging variants, some interviews with study participants occurred using the teleconference software Zoom. This information and the option to agree to this alternative method to participate in interviews were listed on the informed consent form for all participants to sign (Lo Iacono et al., 2016). The face-to-face interviews followed protocols based on Centers for Disease Control and Prevention (CDC) guidelines on indoor social gathering and social distancing, which relaxed with the rollout of vaccines. The CDC recommended maintaining social distance of 6 feet outdoors; although masks were not typically required, they were highly recommended (CDC, 2021).

The Zoom interviews were audio-recorded via the application, and the face-to-face interviews were recorded on an audio recorder and transcribed using the

transcription software Otter.ai and Rev. All transcriptions were reviewed using the original audio file for accuracy. Notes were taken during the interview in my notebook, and the period for data collection was about the same time as the interview, about 45–60 minutes. After the interview, the participants were debriefed.

The participants were informed about where and how their information would be used and stored. Documents were kept confidential, including the informed consent, which informed participants of the purpose of the study, their rights, procedures, and potential risks and benefits of participation and consent. The data collected through interviews remained in the application Otter.ai and Zoom, and the application was locked so that only I could unlock and access any information used and stored there. Once the audio was transcribed, it was converted into a .pdf file, uploaded on my computer, and stored in a secure vault on Microsoft OneDrive. The interview transcription was emailed and encoded with a password that only the participant and myself could unlock to view as an additional layer of protection. Only an administrator with a code may access documents stored in this cloud vault. For questions, contact information for the director of research was provided.

Data Analysis Plan

Centrally, this qualitative study described COs' experience with workplace violence in jails from inmates. I sought to answer the following questions: What are the lived experiences of corrections officers who experience or witness workplace violence by inmates? How do corrections officers who have witnessed or experienced workplace violence by inmates cope with the trauma? How has experienced or witnessed workplace

violence impacted them in their daily lives? Through this study, I aimed to explore the perspectives of COs on how the frequent occurrences of violence associated with working in jails influence their physiological well-being.

Phenomenological research can amass significant data, including but not limited to interviews, surveys, notes, transcripts, and recordings; however, this research does not give interpretation or explanation. The challenge is making sense of a massive amount of data (Patton, 2015). To facilitate cohesive data, coding is an analytical process that is an interpretive act where researcher-based constructs allow the researcher to give meaning to words, phrases, or passages (Rubin & Rubin, 2012; Saldaña, 2016). From this process, coding can help to promote a deeper understanding of the phenomenon. Vogt et al. (2014) explained that qualitative data analysis involves translating data and is the critical link between data collection and the explanation of meaning (Patton, 2015; Saldaña, 2016).

Coding matrices can be created using Word or Excel spreadsheets, but the process can be unwieldy and problematic when large volumes of data are involved (Smith & Firth, 2011). Qualitative data analysis software is a great asset for many reasons for a novice researcher. This program allows for bibliographic materials archived through reference management programs such as Zotero to be imported. The program can import other data sources, such as audio from interviews and literature. Using computer-assisted data analysis software allows a researcher to maintain structure and organization in the analysis phase of research. Qualitative data analysis software makes it possible for researchers to spend more time investigating the meaning of their data (Patton, 2015).

Issues of Trustworthiness

Credibility

In qualitative research, credibility is equivalent to internal validity in quantitative. Readers and researchers alike will want to know if the results of a study are credible. The researcher engaged in reflexivity and maintained transparency regarding any characteristics that could influence the data collection or analysis to establish credibility. This was chronicled in the researcher's notes. One way of attaining credibility is by ensuring the interviewees are made aware of the research questions (Rubin & Rubin, 2012). This allows researchers to recognize, interpret, and understand the participants' experiences. The researcher should present thorough, concise, and consistent findings and provide descriptions of the process where meanings from the data are derived and identification of themes (Sundler et al., 2019). During the data collection phase, I did not disclose my position on the phenomenon of interest to minimize data collection bias. In this study, I engaged in horizontalization, bracketing, and member checking to establish credibility.

Member Checking

The purpose of member checking is to confirm that the analysis of the data gathered from the interview is authentic. The researcher accurately captured the participant's experiences and perspective (Buchbinder, 2011). Member checking enriches the participants and supports the qualitative methodology by reviewing the transcript for quality and clarifying inaccuracies or discrepancies. Member checking is recognized as a method of rigor to ensure that the participants' meanings and perspectives are represented

and not curtailed by the researchers' agenda and knowledge" (Birt et al., n.d.). This allows the researcher to reconcile data where ambiguity may arise and reduce researcher bias.

Horizontalization

Horizontalization is part of the phenomenological reduction process whereby the researcher gives equal value to all participants' statements removing repetitive statements and those that do not relate to the research questions within the interviews, leaving information specific to the phenomenon (Eddles-Hirsch, 2015).

Bracketing

Bracketing, also known as *epoche*, is a form of reduction construed as the principal method in phenomenology. The purpose of bracketing is to set aside barriers, assumptions, preconceived notions that prevent us or make us unable to access phenomena as they appear to us and the way they appear and to deter arriving at a premature, unilateral, or false understanding of the phenomenon (Errasti-Ibarrondo et al., n.d.).

Transferability

Transferability is another way of ensuring external validity and refers to the utility and relevance of the findings and the ability to apply the findings of a study to the overall population being researched and is a measure if the study adds new knowledge to what is already known (Errasti-Ibarrondo et al., n.d.; Ravitch & Carl, 2016). Comparable to the external validity in quantitative research, snowball sampling was used for participant recruitment and selection to ensure transferability. Snowballing asks current participants to refer to the next participant creating a chain of interviewees who would be good

sources given the focus of inquiry and reputational sampling, which identifies knowledgeable people who can provide information on the inquiry issues. (Burkholder, et al., 2016; Patton, 2015; Ravitch & Carl, 2015).

Dependability

In qualitative research, dependability is related to quantitative reliability, and a study is dependable when other researchers can follow data collection device measures drawn up by the original researcher. To address the dependability issue more directly, the processes within the study should be reported, enabling a future researcher to repeat the work, if not necessarily to gain the same results. (Shento, 2004). Testing the dependability of data collection tools can be performed by recruiting nonparticipants to read through the interview and survey questions to ensure the questions were clear and concise before commencing the study.

Confirmability

Confirmability refers to how the results could be confirmed or corroborated by others. Lincoln and Guba (1985) on audit trails as one of the principal techniques for establishing the 'confirmability' of qualitative findings.

Ethical Procedures

Dongre and Sankaran (2016) explain that qualitative research is often defined as interpretive research, which can be subjective, and the findings may be debatable if provisions are not made. In qualitative research, humans are an essential part of the research process when instruments are used (Dongre & Sankaran, 2016). When conducting a qualitative study, the researcher is the research instrument; therefore, the

inquiry plan must be developed and calibrated as the study progresses. To conduct this study using the population of COs for the sample, all prospective participants were apprised of the study and its purpose. The purpose of this qualitative phenomenological study is to explore the perspectives of COs on how the common occurrences of violence associated with working in jails influence their physiological well-being.

In qualitative research, the researcher has safety measures to protect participants and their data, including clarifying their role in qualitative research. While conducting qualitative research, some critical ethical concerns include anonymity, confidentiality, and informed consent. Although the researcher is accessing perceptions and accounts from the study participant, any data collected and used in a study should maintain anonymity. Any information that could reveal that the participants' identities were omitted. All participants can opt-in or out of the study before answering any questions or at any point in this study. Contact information with the option to request further information before, during, or after data collection was provided. Each participant received a letter explaining the purpose of the study and detailing the confidentiality and anonymity of the questionnaire. All data obtained is secured on a personal computer and password protected. An additional security layer was applied using Microsoft OneDrive's security vault that is password protected.

Summary

The problem addressed in this study was the workplace violence experiences of COs and the influence on their physiological well-being. The purpose of this qualitative phenomenological study was to explore the perspectives of COs on how the common

occurrences of violence associated with working in jails influence their physiological well-being. This study aimed to identify how frequently workplace violence is associated with jails and their physiological well-being to recommend workplace conditions related to job responsibilities from participants' lived experiences. Although quantitative studies have shown how working in jails impacts staff, researchers rarely focus on COs when researchers venture behind bars to conduct qualitative research (Tracy, 2005).

A qualitative method design includes in-depth, semistructured interviews, surveys (for demographic purposes only), a review of documents, and existing literature on the subject matter. This study offers correctional administrators' recommendations on the development, improvement, and implementation of mental health services for officers from the findings. This study answered the questions: What are the lived experiences of corrections officers who experience or witness workplace violence by inmates? How do corrections officers who have witnessed or experienced workplace violence by inmates cope with the trauma?

The data collected for this study came from face-to-face interviews, teleconferenced interviews, and surveys (for demographic purposes). Due to the COVID-19 (novel coronavirus) pandemic, most of the interviews occurred using teleconference software (i.e., Zoom, Skype, etc.) to conduct interviews with some study participants. This information and the option to agree to this alternative method to participate in interviews was listed on the informed consent form for all participants to sign (Lo Iacono et al., 2016). Participants who meet the criterion for selection responded to semistructured questions from an interview guide, which I constructed. The interviews

lasted approximately 45 to 60 minutes. The duration of the interviews was combined with the other data collected to achieve data saturation.

Chapter 3 discussed the rationale for selecting the research method. A qualitative, phenomenological design is suitable for data collection from face-to-face interviews allowing participants to respond to capture their views experiences and how working in a correctional setting where heightened exposure to hostile and dangerous incidents are a daily occurrence influences the physiological well-being of COs. This study included male and female COs who direct contact with the inmate population daily. This study included officers with at least 5 years of continuous service. This study described the COs' workplace violence experiences, described the influence on their physiological well-being, and made recommendations on workplace conditions related to job responsibilities. Chapter 4 reports, describes, and analyzes the data collected. The study results were documented and reported. Chapter 5 includes a summary and recommendations of the research findings.

Chapter 4: Results

Introduction

The purpose of this qualitative phenomenological study was to explore the perspectives of COs on how the everyday occurrences of violence associated with working in jails influenced their physiological well-being. Additionally, I intended to identify any adverse effect on these officers' mental and physical well-being from the perspective of these officers attributable to heightened exposure to hostile and dangerous incidents occurring daily. My goal was to explore participants' lived experiences to recommend workplace conditions related to job responsibilities. Although previous studies have addressed working conditions for staff in jails, the focus was not primarily directed toward COs. My approach was to give these officers a platform where, through confidentiality, they could share their experiences and the impact on their lives both on and off duty in their own words and express what is often unseen and unheard.

Focusing on the research questions presented in Chapter 1, I conducted a qualitative phenomenological study using an 11-question participant interest/demographic survey generated via Google Forms and distributed through Facebook. The questions asked in the survey were designed to identify candidates who fit the criteria selected for participation, deidentify them, and obtain informed consent. The survey items were as follows:

1. If you feel you understand the study and wish to volunteer, please indicate your consent by clicking "I Agree."

2. Provide the initials of your first and last name and any two numbers (to establish confidentiality).
3. Are you presently employed as an active-duty corrections officer?
4. Were you an active-duty corrections officer as of January 1, 2016?
5. What year did you become a corrections officer?
6. Do you have direct inmate contact daily while on duty? (i.e., housing area, intake area, mess hall, clinic, transportation)
7. Have you experienced or witnessed violence in jails directly?
8. What is your current partnership status?
9. What is your gender identity?
10. What is your highest level of schooling completed?
11. What is your race/ethnicity? (If you identify with more than one, please mark all applicable.)

Following the participant interest survey, interviews were scheduled via email and conducted face-to-face using the Zoom platform. This chapter presents the setting, demographics, and data collection procedures. It addresses my use of computer-assisted qualitative data analysis software and the Google Forms survey to identify patterns/themes in the collected responses. In addition, I discuss the issues of trustworthiness that I introduced in Chapter 3. Finally, I present the research study results with an in-depth look at the collected data related to the research questions that I posed in the study. I conclude the chapter with a summation of the findings.

Evidence of Trustworthiness

Credibility

One way of attaining credibility is by ensuring that interviewees know the research questions (Rubin & Rubin, 2012). During the data collection phase, I did not disclose my position on the phenomenon of interest to minimize data collection bias. Before the participants completed the survey and interview, informed consent was obtained at the beginning of the survey. The informed consent form was the first item on the survey, which contained a detailed explanation about the purpose of the survey and questions to be asked during the interview. The informed consent also contained contact information if a potential participant had questions or concerns about the study and how their data would be used. Once the survey was completed, a follow-up email was sent to confirm interest and set a date and time to meet at the participant's convenience. Once the meeting was mutually agreed upon, a Zoom link was emailed to the participant.

In this study, I engaged in horizontalization to establish credibility where all nonpertinent statements concerning the research questions were not used to analyze the data and generate themes. I also used member checking to confirm that the analysis of the data gathered from the interview was authentic. I was able to accurately capture the participants' experiences and perspective (Buchbinder, 2011). Then I emailed a password-protected .pdf file containing the interview transcript for the participant to review for overall accuracy and clarify inaccuracies or discrepancies.

Transferability

Comparable to external validity in quantitative research, purposeful sampling, specifically snowballing, can ensure transferability in research. Snowballing, a form of purposive sampling, requires that participants send a referral to the next participant, which helps create a chain of interviewees who will be reliable sources given the focus of inquiry. I snowballed participants by asking participants to provide referrals, to repost my invitation to participate to their Facebook accounts, or to forward the invitation to potential participants through Facebook Messenger, WhatsApp, or a messaging service of their choice. Transferability in research is identified as measuring a study's findings' utility to other researchers in a similar environment (Connelly, 2016). Providing a detailed description of the procedures, population, and sample for this study affords future researchers a chance to determine whether the findings will help their study obtain external validity or transferability (Amankwaa, 2016).

Dependability

In qualitative research, dependability is related to quantitative reliability, and a study is dependable when other researchers can follow the data collection device measures drawn up by the original researcher. The processes of this study gave a detailed description of the procedures, population, and sample, enabling future researchers to repeat the work, if not necessarily to gain the same results or to chance to determine whether the findings will help their study obtain external validity or transferability (Amankwaa, 2016; Shento, 2004). An additional method used to ensure dependability was the triangulation of data. I used multiple sources of data to achieve dependability.

The three data sources were court records maintained by a court system in the metropolitan northeastern area, press release statements from a district attorney's office, and interviews. According to the U.S. Courts (2021), court records are case files containing docket sheets and all documents filed in a case and are maintained by the courts. The court record also accounts for what happens from case creation until a case has a final disposition. A district attorney (DA) is an officer of the courts whose duty is to represent the people in criminal proceedings. When a press release statement is made, it is an official statement to keep the public informed.

Confirmability

Confirmability refers to how a study's objectivity could confirm or corroborate the results. I incorporated bracketing, where I, the researcher, engaged fully in the conversation and gave undivided attention to the participant, removing any perceptions of what the participant would say for each interview. Reflexivity is key to establishing confirmability in research, and it serves to reduce researcher bias (Morse, 2015). An interview guide consisted of 18 semistructured and open-ended questions and an 11-question survey. As the study evolved, six additional follow-up questions were asked during the interview process, resulting in 24 interview questions. This was used for all participants. The interview guide was developed by me and checked for clarity and possible bias by two experts in qualitative research at the university. To further ensure confirmability and mitigate researcher bias, I used NVivo 12, data analysis software, to code and analyze the data. Qualitative Data Analysis Software (QDAS), a computer

program, does not have emotions, thoughts, or preconceived notions as a human would. This helped to overcome researcher bias.

Obtaining Participants

The Walden University IRB approved my application to commence data collection on April 21, 2021 (IRB approval # 04-21-21-0690068). After being granted data collection approval, I sought membership approval in groups targeting COs within the northeastern metropolitan region. Once my membership was approved, I posted my invitation to participate and the link to my participant interest demographic survey for anyone to participate. I also posted my invitation to participate with a link on my Facebook page weekly. When asked for clarification, I sent individuals messages through Facebook Messenger explaining the study details.

This study used purposive sampling to identify candidates who could provide the needed data. Snowballing, a form of purposive sampling, requires that participants send a referral to the next participant, which helps create a chain of interviewees who will be reliable sources given the focus of inquiry. Once I contacted Facebook members, I sent information specifically related to my study and asked them to forward the invitation and the survey link to people who might qualify to participate. The criteria for potential participants whom they knew were as follows: (a) they worked as COs located in the northeastern metropolitan area, had a minimum of 5 years of continuous service, and were active-duty; (b) they could be of any gender, race, or ethnicity, or marital status, and they could have any amount of time on the job; and (c) they had direct inmate contact at

their assigned post and facility. Potential participants were only contacted via email or social media.

As aforementioned in Chapter 3, I intended to gather responses from 10–25 participants. At the end of the data collection timeframe, I had received a total of 27 responses from participants meeting the criteria. Due to the nature of the sampling method and the fact that the survey responses were completely anonymous, I only know that the respondents met my initial criteria to receive the invitation survey. The data collected were obtained from 27 COs working in various jails throughout the northeastern metropolitan area via survey. Of the 27 participants who showed interest, 15 failed to respond to the request to set up an interview, and one was not an active-duty officer, eliminating them from participant eligibility.

Demographics

At the close of the data collection phase, I had received a total of 27 responses to the online survey. However, 11 individuals completed the interview. All the participants were anonymous and were asked to create an alias to give them some autonomy and deidentify themselves. All participants were COs identified as either male or female and were working at correctional institutions within the northeastern metropolitan area. Five were female, and seven were male (see Table 1). Four of the participants were single or never married, five were married, none were divorced or separated, none were widowed, and three were either cohabitating or in some form of a domestic partnership (see Table 1). Academically, one had a high school diploma or GED, seven had some college experience (less than 2 years), two possessed an associate's degree, two had a bachelor's

degree, and no participants held a master's degree. None of the participants identified as an American Indian/Alaskan Native, eight identified as Black American/African American, two identified as Hispanic/Latino(a) of African descent, none identified as Hispanic/Latino(a) American not of African descent, none identified as West Indian of African descent, and one participant identified as White (see Table 1). One participant identified with more than one race/ethnic group. This participant identified as Black American/African American; two identified as Hispanic/Latino(a) of African descent. No participants identified as Asian or Native Hawaiian/other Pacific Islander. I assumed that all participants were over the age of 18 had been vetted through a background and psychological screening process and had training and job duties that were consistent with the corrections department's academy standards when taking their oath.

Table 1

Participant Demographics

Participant alias	Gender	Race/Ethnicity	Marital status	Years of service	Education level
AK06	Female	African-American/ Black American, Hispanic/Latina of African descent	Single/Never married	10+	Some college <2 years
JC27	Male	African-American/ Black American	Married	10+	Some college <2 years
JN49	Male	Hispanic/Latino of African descent	Cohabiting/Domes tic partnership	10+	Some college <2 years
J012	Female	White	Cohabiting/Domes tic partnership	10+	Bachelor's degree (BA/BS)

LH82	Male	African-American/ Black American	Cohabiting/Domes tic partnership	10+	Some college <2 years
MD10	Female	Hispanic/Latina of African descent	Single/Never married	10+	Associates degree
MH04	Female	African-American/ Black American	Married	10+	Associates degree
QR15	Male	African-American/ Black American	Single/Never married	10+	Some college <2 years
RH77	Male	African-American/ Black American	Single/Never married	10+	Some college <2 years
SH78	Male	African-American/ Black American	Married	10+	Some college <2 years
TG11	Female	African-American/ Black American	Married	10+	Bachelor's degree (BA/BS)
TG43	Male	African-American/ Black American	Married	10+	12 th grade/HS diploma/GED

Data Collection

I began the data collection process by performing a web search for the DA's office, reviewing some press release statements to see if any DA formally prosecuted an inmate for any form of violence against a CO. I was able to find three press release statements from DA's offices relevant to the study. The DA has the authority to prosecute criminal offenses. I obtained the names of the alleged defendants and then contacted a court in the northeastern metropolitan area where the cases were heard to obtain the case records. Despite being a court employee, I inquired about the protocols for obtaining court records, as the policy differs from court to court, and I was instructed to submit in writing the request for court-certified documents and pay the required fees.

I also contacted individuals through Facebook who worked in jails in the northeastern metropolitan area. The initial potential participants were members in groups created for COs and people on my friends list who responded to my Facebook post. The Facebook post included an introduction that explained the study and gave the link to the 11-question survey published through Google Forms. The survey contained direct questions relating to the study participation criteria and other demographics for statistical purposes. Participants were asked to participate in the survey, repost the invitation to participate with the introduction to the study, and send the survey link to any individuals they had access to who met the study criteria. I am not aware of which, if any, of the initially contacted participants chose to complete the survey or how many of them opted to share my post on their Facebook wall.

Setting

This qualitative phenomenological research study used an 11-question survey to obtain demographic info from interested persons and identify participant eligibility and interview questions created by the researcher. Participants were given a link to the study via Facebook using a snowball sampling technique. Once participant eligibility was confirmed, I emailed the interested persons to obtain dates and times of availability to set up a meeting. All the interviews were scheduled based upon participant availability and conducted in the home or using Zoom. Semistructured interviews were conducted face-to-face and then completed using teleconference software, Zoom from 11 sworn-in, active-duty COs working in a complex jail system in a Northeast Metropolitan area. As indicated in my approved IRB application, due to the COVID-19 pandemic and

restrictions on social gatherings, this was a necessary measure and precaution to ensure overall safety for the researcher and participants.

Interview

The face-to-face interviews were mutually agreed upon and conducted in the participant's residence. Before commencing each interview, I had folders labeled their alias and interview questions on hand. I signed in 10 minutes before ensuring everything was operational and prepared for Zoom meetings. I arrived at the mutually agreed location 15 minutes in advance and notified the participant of my arrival for face-to-face interviews.

I greeted and identified the participant with their pre-formatted name, explained the interview process, confirmed consent (written consent has already been obtained), and recorded the interview. I used Otter.ai, a transcription application, and audio recorded on my cellular device for face-to-face interviews. All face-to-face interviews observed the CDC recommendation on indoor gatherings for vaccinated persons. I initiated the interview questions and allowed responses for subsequent questions that may emerge from interview questions; when uncertain, clarify what the participant stated to show that I, the researcher, am attentive and fully engaged in what the participating is sharing and identify emerging themes. After the interview, I thanked the participant and shared courses of action to verify the accuracy of the interview.

The interview included semistructured, responsive interviews because responsive interviewing involves treating the myself (the researcher and interviewer) and participant (interviewee) as persons with feelings and opinions rather than taking a detached

approach to obtaining data. This style of interviewing allows flexibility in the questioning if necessary. Some of the pertinent questions are as follows:

1. Can you explain the type of facility or facilities you have worked in during your years of service as a CO?
2. Can you share a typical workday in the facility you report?
3. Tell me about your experience with workplace violence from inmates as a corrections officer?
4. Can you describe your encounter(s) circumstances surrounding the use(s) of force?
5. When there is a use of force incident that you are involved in or witness, can you explain what emotion or emotions you are aware of feeling?
6. Please share the details of follow-up care surrounding the use of force incident(s). Please detail and explain your feelings.
7. Tell me how this (these) experience(s) made you feel? What did you do?
8. What do you do to cope with the results of your use of force incident(s)?
Please explain.
9. Do you discuss the emotions you feel during the day with family or friends?
Please explain.
10. When faced with a tense situation at home, can you explain how you handle the situation? What emotions do you experience?
11. Tell me how your experience with workplace violence from inmates has impacted your relationship(s) with your coworkers, partner, friends, family?

12. Do you or anyone around you find that you have noticeably changed since becoming an officer? Can you describe in what ways?
13. Having shared with me your experiences, do you feel that you were prepared to cope with workplace violence or trauma? Why or why not?

Questions to continue the conversation were

14. Can you describe your encounter(s) circumstances surrounding the use(s) of force? Tell me more about that experience(s) – conversation continuer
15. How does your experience before that time compare to your experience now?
-conversation continuer

Additional follow up questions (as relevant to the participant) were:

16. Have you noticed a difference in your parenting approach regarding your career? Has it been brought to your attention? In what ways? Can you give examples?
17. Do you find that you are more introverted or outgoing after your experiences with UOF incidents?
18. Have you noticed a change in your health as time progressed in your career after these UOF incidents?
19. How has the COVID-19 pandemic influenced your overall physiological well-being regarding the occurrence of violence in jails?
20. Did the COVID-19 pandemic exacerbate this violence?
21. Has the ongoing COVID-19 pandemic increased the stress factor on you as an officer? Can you share in what ways?

Ethical Procedures and Considerations

Informed Consent

I recruited participants by posting my invitation to participate (Appendix B & D) and the link to my participant interest demographic survey using Google forms (Appendix C) for anyone to participate in groups targeting COs within the northeast metropolitan area. I also posted my invitation to participate with the link on my Facebook page weekly. The survey was to both obtain informed consent as well as to establish eligibility. Each participant also received a copy of the informed consent for their records where they indicated voluntary agreement to participate in their email. Before completing the participant interest study, the informed consent form was embedded as the first item. This was done because of the ongoing Covid-19 pandemic as a safety measure to minimize face-to-face contact and direct contact with potentially contaminated papers and other surfaces. For the potential participant to complete the survey and participate in the study, an electronic signature selecting "I consent" was collected. This ensured that the interested persons took the time to review the informed consent carefully and were genuinely interested in sharing their lived experiences of workplace violence, trauma, and how the daily occurrences of violence in the jails influence their physiological well-being. The informed consent form included a brief description of the purpose of the study, the data collection procedure, and sample questions. The informed consent form also disclosed any risk involved, how the researcher minimized the risk, and where to seek help if needed. All interested parties were informed that their participation was voluntary, and any time during this study, they could withdraw from the study or decline

to answer any question(s). Lastly, contact information for the study if the participant had concerns or wanted to report a complaint or concern for the university's IRB.

Confidentiality

Each participant's interest/demographic survey provided their initials and any two digits to create four alphanumeric code names used on all data, including the Zoom meetings and audio recordings. All Zoom recorded meetings are stored by the participant's code name and saved in Microsoft OneDrive's encrypted vault in the researcher's password-protected computer. All audio recordings were made using a mobile device with the application Otter.ai. The audio recording saves the application's cloud memory, not the device, and is password protected using multi authentication security features. The electronic consent embedded in the surveys are saved in google forms and are password protected.

Transcriptions

After conducting the interviews, the audio files were transcribed using Otter.ai and Rev transcription. Otter.ai was used as a primary source of reviewing the interview to identify keywords, and Rev transcription was selected to transcribe interviews to ensure the efficacy and accuracy of the interviews. After the transcription was completed, they were saved as a password-protected .pdf file and emailed to each participant for member checking. I informed the participants of their right to request changes and to reach out to me at any time if any issues or concerns were raised. I kept the option to request changes until I reached saturation of data. At that point, I sent one last email informing the participants of their right to request to email changes to the researcher within 7 days. No

participant objected to the content or quality of the transcript. However, one participant inquired if the transcript, and I informed the participant that only relevant portions would be included in the study. Additionally, I reiterated that nothing identifiable would be included, and I would send a copy of their data analysis portion.

Data Destruction

After completing this study, data will be maintained for 5 years per Walden University's data storage and removal policy. After 5 years, all digital data will be permanently deleted from the cloud-based memory. Once deleted, this command cannot be undone.

Results

This section contains the presentation of the results of this phenomenological study. The results were derived from the semistructured interview data collected from 11 active-duty COs with at least 5 years of continuous service in various jails throughout the Northeast metropolitan area. All the participants had direct inmate contact at their assigned post and facility and had frequent encounters of violence associated with working in jails.

Research Question 1

RQ1. What are the lived experiences of correction officers who experience or witness workplace violence by inmates?

After reviewing court files and press release statements from a Supreme Court and District Attorney's office, there was an incident where a defendant serving time for another criminal offense, namely, gun trafficking, assaulted a CO without provocation

causing physical injury. In January 2020, while the officer was making rounds during their tour to count the inmates after lock-in, an inmate was able to manipulate his cell in so that it could allow an easy exit, approach the officer, and slash the officer with a sharp object cutting the officers neck, ear, and two fingers. This case is ongoing, and there is no disposition; however, the inmate was rearrested and indicted with multiple assault and weapons possession charges.

In another unprovoked workplace violence incident around April 2017, a CO was punched in the face, hospitalized, and required extensive surgery, resulting in a tooth being removed and a permanent metal plate implanted to fix a broken jaw. The jaw had to be wired shut. Despite receiving physical therapy, the officer has speech difficulties stemming from the injuries sustained, and this incident has caused long-term physical damage and pain. In this case, the inmate was rearrested and indicted on multiple second-degree assault charges, assault on a peace officer, and obstruction of governmental administration in the second degree. This case has been disposed of, and the defendant entered a guilty plea and was sentenced to three and a half years.

In the last case, I reviewed multiple inmates engaged in a violent attack on a CO in a jailed they were housed. In this violent workplace incident occurring in early August 2018, one inmate who was the main antagonist viciously pummeled and slashed a CO after arguing with the officer. While this was happening, the other inmates took advantage of the situation and joined in by additional throwing punches. In this incident, the officer sustained a laceration behind the ear, which required sutures and a fractured hand. The inmates were rearrested, the grand jury handed down a formal accusation of

more than ten counts, and the defendants subsequently pled guilty and were sentenced. The main assaultive inmate was sentenced to serve one to three and a half years of imprisonment. Although there are numerous accounts of assaults on officers in the jails, three cases were sufficient to support the data collected from the interviews that attest to the credibility these officers shared regarding their encounters that violence in the jails at the hands of inmates is a common occurrence. Additionally, the court-certified records are compared to the original document filed with a court and are attested that the copy is the same as the original. This enhances the evidence of the trustworthiness of the data collected from the qualitative interviews.

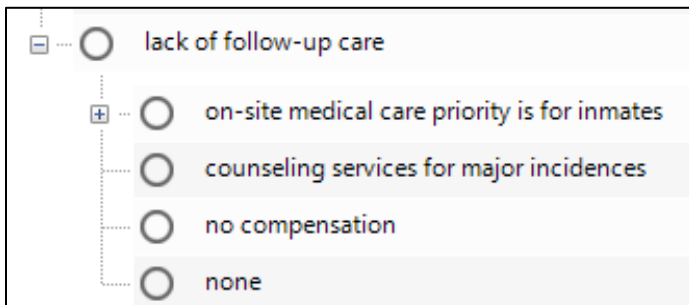
During the individual interviews, I elicited the participants' narratives of their experiences of workplace violence. This section describes the research findings based on a phenomenological analytical process that involved bracketing, horizontalization, and essence description of the participants' lived experiences of workplace violence and trauma. I used NVivo 12, a qualitative data analysis software developed by QSR International, to generate codes and themes that answered the research questions. The data and the results are presented in the following sub-sections according to the two research questions.

The first research question that guided this study was: "What are the lived experiences of corrections officers who experience or witness workplace violence by inmates?" This was designed to get insight and learn through their experiences with the phenomena. I applied to bracket to begin the analysis for this research question.

Bracketing involved setting aside my preconceived ideas about the lived experiences of

the COs. I used a journal to record my thoughts and personal experiences of encountering and witnessing workplace violence. I also used the journal to document my thought processes when analyzing the data. I began the horizontalization process of identifying the participants' lived experiences who experienced or witnessed workplace violence by inmates. This process involved getting familiar with the data. I read all the transcripts once while taking notes of the general patterns across the data and not using nonpertinent statements concerning the research questions. The common patterns I identified were the general experiences of inmate violence and use of force, negative impacts of workplace violence on the COs, and poor policies and practices in the workplace.

I continued the horizontalization process by coding the data. The codes that emerged from the analysis are shown in Appendix B. Using NVivo. I was able to have a complete view of all the codes. I reviewed the codes and eliminated the ones that were not relevant to the lived experiences of COs who experienced or witnessed workplace violence by inmates. The general patterns I identified aided this process, as I considered the codes that did not belong to the general patterns as irrelevant. NVivo also allowed me to create hierarchies in which codes with similar meaning patterns were clustered. An example of a hierarchy I generated in NVivo is shown in Figure 1. The figure contains a hierarchy in which the codes were relevant to the participants' lived experiences of the poor practices regarding follow-up care following a workplace violence incident.

Figure 1*Sample Hierarchy*

I went back to each code to review the coded text and extract the essence of the participants' lived experiences of workplace violence by inmates. From this review, I determined two overarching themes. The themes were: Witnessing or experiencing use of force incidents has a negative impact on COs, and Workplace practices and policies on use of force put COs at a disadvantage. An overview of the themes is provided in Table 2. The table contains the number of participants who contributed to the themes and the number of the themes' occurrence in the data. The themes are further described in the following sub-sections.

Table 2*Overview of Research Question 1 Themes*

Theme	Number of contributing participants	Number of occurrences in the data
Witnessing or experiencing use of force incidents has a negative impact on correctional officers	10	130

Workplace practices and policies on the use of force put correctional officers at a disadvantage	11	90
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Witnessing or Experiencing Use of Force Incidents Has a Negative Impact on Correctional Officers

The COs generally experienced a negative impact upon witnessing or experiencing use of force incidents. The impacts were considered negative due to the adverse consequences of the experiences on the participants. All ten participants who contributed to this theme shared that experiencing or witnessing force incidents negatively impacted their mental and physical health. In comparison, eight participants stated that their encounter with workplace violence had a negative impact on their relationships outside of work.

Impacts on Mental Health. The negative impacts on mental health included feeling a range of negative emotions, including anger, disbelief, helplessness, and exhaustion. Four participants shared that while the use of force incident was happening, they generally felt “hyped up” due to the adrenaline rush associated with the potentially dangerous situation. One participant insisted that they only felt the need to perform their duty and protect the inmates, the staff, and themselves during a violent incident. Nonetheless, after the incident had been addressed, four participants shared that they felt angry. Their anger was directed towards how their leaders failed to develop and implement policies that could prevent the use of force incidents and address the care needed by the involved COs following a use of force incident. Three participants

expressed their disbelief that the inmates were capable of certain violent acts. One participant described witnessing a fight between two inmates during which one inmate threw boiling water on another inmate. Another participant expressed their disbelief that some inmates were capable of physically assaulting a CO and attempting to assault a female CO sexually. Two participants felt sorrowful when they realized that the COs were not receiving enough in-service training and relevant policies for their protection. Upon reflecting on the violent incidents that led to the use of force, the participants generally experienced their negative emotions cycling from anger, disbelief, sorrow, and back to anger.

As a result, nine participants shared that they felt the need to be always on guard and edge regardless of being on or off-duty, as they worry about a sudden occurrence of a violent incident. Outside of work, three participants shared that they were wary of being in a crowd. One participant explained that they were worried about meeting a former inmate while outside. Three participants articulated that their experiences of using force encounters had negative impacts on their mental health, as they used to be "happy-go-lucky" individuals. Another three participants shared that they constantly worried about coming to work. One participant stated that before coming in for their scheduled duty, they sat in their car wondering why they still came to work. One participant stated that their thoughts of not wanting to come to work were a sign of trauma. Four participants stated that their experiences of using force incidents were traumatic. Two participants share that their worry was exacerbated by the COVID-19 pandemic, as some inmates

throw their bodily fluids at each other and the COs. The participants were especially worried about catching the virus and bringing the disease home to their families.

Impacts on Physical Health. Overall, ten participants believed that their health deteriorated over time due to their line of work. Seven participants shared that they sustained physical injuries because of force experiences. One participant shared chronic pain, which required surgery because of one use of force experience. Three participants stated that they had minor injuries following a use of force incident.

Four participants shared that their blood pressure was affected by their experiences of workplace violence; however, three of the four participants experienced higher blood pressure compared to beginning their service in the correction facility, while one participant had lower blood pressure. Six participants perceived that their deteriorated health might also be associated with poor diet. They often did not have time to prepare and eat proper meals or preferred to eat comfort food and junk food to relieve their stress. As a result, three participants shared that they experienced a significant weight gain over the years, while three participants shared that they developed diabetes. Only one participant stated that their physical health was not affected by their experiences at work.

Impact on Relationships. The participants generally experienced negative impacts of their encounters with the use of force incidents to their relationships with their families and friends outside of work. Four participants shared that their relationship with their children was negatively affected. They tend to be "too strict" to their children and could not help getting angry when they misbehaved. Four participants stated that their

relationships with their friends and significant others who did not work in jails were negatively impacted by their experiences of the use of force. Generally, the four participants shared that they felt frustrated with their loved ones. They did not understand how COs felt about their work and how their work experiences might influence their behavior outside of work. Conversely, three participants stated that because of their shared experiences, they tended to form a closer bond with their coworkers.

Workplace Practices and Policies on Use of Force Put Corrections Officers at a Disadvantage

All the participants shared their lived experiences of the practices and policies in their workplace that did not help COs when encountering a use of force incident. Moreover, some policies and practices were unhelpful and harmful to the COs. The workplace policies and practices that placed COs at a disadvantage were relevant to the lack of structure in the organization, being short-staffed, and the lack of care following a workplace violence experience.

Lack of Structure in the Organization. Eight participants shared their perceptions and experiences of the lack of organizational structure in their workplaces. The eight participants described a harmful workplace practice and policy related to inmates' noncompliance, which was the frequent cause of the need to use force at the workplace. The participants described a policy reform in which COs can be suspended for harming inmates. Eight participants perceived that this policy and its implementation meant that inmates' acts of violence did not have consequences. Two participants shared that because of this policy, some inmates did not respect the authority of the COs.

Two other participants shared a policy about COs not leaving their posts. The participants shared that some COs did not respond when another officer called for assistance during a use of force incident for fear of being charged with abandoning their post, and receiving a command discipline or suspension. Three participants perceived those COs had different interpretations of the workplace policies due to the lack of leadership in the facility.

Short Staffed. Nine participants shared that their workplaces lacked COs. The inadequate staffing was attributed to the lack of organizational structure, as the participants perceived that the organizational leaders did not have any solutions to address this problem. Some participants added that apart from the lack of staffing, most recent hires were women and minority races such as Indians. Two participants expressed their difficulty working with women due to their experiences that women were not as physically strong as men and that women tend to be the target of inmates' sexual assault. One participant shared their difficulty working with officers from minority races due to conflicting cultural beliefs that hindered them from using force to protect themselves.

One participant shared that being understaffed was a direct result of the COVID-19 pandemic. However, three participants stated that the corrections facility has always lacked staffing. The three participants noted that inmates outnumbered the COs, which was why the officers' authority tended to be undermined. Due to the lack of staffing, one participant shared their experience working a continuous 24-hour shift which left them tired. One participant expressed that they felt punished and unappreciated because of their workload.

Lack of Follow-Up Care. Seven participants experienced that the COs received inadequate care following a use of force incident in their workplace. While a medical team was present on-site, five participants stated that the nurses and doctors in the facilities were for the inmates. Therefore, when a use of force incident occurred, the medical team prioritized the physical examination and treatment of the inmate more than the COs, regardless of the severity of the injury. Three participants reported that prioritizing the inmates was an existing policy in their workplace. However, one participant stated that the medical team on-site would make sure that the individuals involved in the incident were not of critical condition and would not die from their injuries. One participant experienced having to send themselves to the hospital despite being injured after a use of force incident with a violent inmate. The participant also shared those COs did not receive any compensation after sustaining injuries while on duty. Only two participants shared those COs had access to counseling services to help them cope with their trauma. However, the services were only accessible following a *major* incident.

Research Question 2

RQ2. How do correction officers who have witnessed or experienced workplace violence by inmates cope with the trauma?

Similar to the analysis for RQ1, I began with the bracketing process of recording my perceptions on coping strategies used by COs, as well as my thought processes from identifying general patterns in the data to developing the themes from the data. The general patterns were the COs' coping strategies, recommendations to help corrections

officers cope with trauma, and COs' lack of preparedness to cope with workplace violence and trauma. The general patterns were used in identifying relevant codes that referred to the smallest units of meaning that represented the participants' experiences of coping with the trauma following witnessing or experiencing workplace violence by inmates. I reviewed the codes and the coded text to cluster codes with similar meanings using the hierarchy feature in NVivo. One overarching theme emerged from the analysis, as shown in Table 3. The findings under the general patterns of recommendations to help COs cope with trauma and COs' lack of preparedness to cope with workplace violence and trauma did not have sufficient evidence in the data to form themes.

Table 3

Overview of Research Question 2 Themes

Theme	Number of contributing participants	Number of occurrences in the data
Correctional officers' coping strategies	11	45

Correctional Officers' Coping Strategies

The participants' strategies to cope with the trauma from workplace violence by inmates involved developing their mentality and receiving support from their loved ones. Ten participants reported that being a CO entailed having a strong mentality. One participant described themselves to be "tough." Six participants shared that they "separate" their thoughts of being on duty and off duty. When they were off duty, they

tried their best to relax and think of themselves and the people around them as civilians. When they were at work, they remained vigilant of the possible dangers and acted quickly as needed. Five participants reported that they did their best to clear themselves of thoughts about work before coming home, as they did not want their work to influence the people at home, especially their children. One participant noted that they prepare their mindset back to alert before they step into work. Nonetheless, three participants shared that processing what was happening at work became easier the longer they served as active-duty COs.

Six participants experienced support from their loved ones to help them cope with the trauma. Four participants reported the most support from their loved ones who worked in a corrections facility. They know what COs go through in a regular workday. Two participants shared that their coping strategy involved spending time with their loved ones. The participants stated that traveling with their loved ones helped them cope with their trauma. One participant expressed that receiving care from their spouse helped them through their everyday work experiences.

Two participants reported that they coped with trauma at work through continuously learning new techniques that would help them avoid and address the use of force incidents. One participant shared that they attempted to learn new concepts and techniques from the COs who graduated from the academy despite insufficient in-service training. One participant shared that they used physical exercises to de-stress.

General Pattern: Recommendations to Help Corrections Officers Cope With Trauma From Workplace Violence

The pattern regarding the participants' recommendations to help COs cope with trauma from workplace violence by inmates emerged from the data; however, this pattern was only supported by five participants with nine occurrences. Regardless, this pattern may be relevant to the study. The participants' recommendations centered on workable solutions to the poor practices and policies in their workplaces that emerged as a theme that answered RQ1. The recommendations included on-site medical care and counseling services for COs, not just inmates. Another recommendation was to hire more COs. One participant perceived that COs needed specialized in-service training specifically for using force. One participant suggested rotating the posts of COs to prevent certain inmates from harassing them. In contrast, another participant recommended changing the inmate housing policy such that inmates with severe mental illness and substance abuse problems would not influence the other inmates.

General Pattern: Lack of Preparedness to Cope With Use-of-Force Incidents

Another general pattern that emerged from the data but had insufficient evidence was the COs' lack of preparedness to help them cope with the use of force incidents. Two participants reiterated that no amount of education and training could prepare new COs from the actual encounter of workplace violence by an inmate and the need to use force. Nonetheless, two participants believed that COs lacked the in-service training needed to help them avoid a use of force incident and to cope with a use of force incident if one occurs.

Essence Description

The active-duty COs employed for at least 5 years at various jails throughout the Northeast metropolitan area perceived that the everyday occurrences of violence associated with working in jails influenced their well-being. After personally experiencing or witnessing workplace violence by inmates, the participants' lived experiences included their reflections of the poor practices and policies surrounding the use of force that was useless and may also be harmful towards COs. The poor practices and policies were perceived to originate from the poor leadership in the workplace. Some policies were not implemented well; as a result, the inmates tended to disrespect the authority of the COs. Additionally, some policies were left to the officers for their interpretation, which resulted in misunderstandings and the inability of the officers to protect each other while on duty.

The jails also tended to be short-staffed. While some participants shared that they were paid well, most participants expressed the adverse effects of working longer hours and having a heavier workload because of the lack of staffing. Furthermore, the participants stated that the policies entailed the lack of follow-up care for the COs involved in a use of force incident. The on-site medical team was there to serve the inmates.

Witnessing or experiencing use of force incidents negatively impacted the COs' physical, mental, and social health. Physically, the participants generally experienced deteriorated health, including high blood pressure and diabetes. Mentally, the participants tended to feel a cycle of negative emotions from anger to disbelief, sorrow, and fear,

associated with anxiety and trauma. The participants' relationships with people outside of their work were negatively impacted. In contrast, they tended to form closer bonds with their coworkers due to the shared experiences of difficulties.

Nonetheless, some participants expressed that the care and emotional support they received from their loved ones who were not connected to the jail setting were sufficient to help them cope with their trauma from work. Moreover, the participants were aware of the differences between their personal lives and their everyday lives at work. The participants reported that they coped with their trauma from work by developing their "CO mindset," They needed to be tough and vigilant while on duty and act as a civilian when outside of work.

Summary

This chapter discussed the research questions, data analysis methods used, and the study results. This study used two research questions and a demographic survey; however, only the research questions were examined. An 18-item survey was designed to gather demographic data and determine participant eligibility. The 21-question interview was designed to gather data and explore the perspectives of COs on how the common occurrence of violent encounters in the jails at the hands of inmates influences their overall physiological well-being. According to the interviews, COs experience one emotion while on the job but express another feeling. These observations are evident in their professional and personal lives. Also, the results indicate that the participants' health deteriorated over time because of their occupation. Accordingly, the participants in this study revealed high levels of stress and anxiety before reporting to duty and even during

their shifts; it is possible, based on the interview results, that high levels of stress and anxiety negatively impact the participants' personal lives. Furthermore, the results indicated that COs disdain workplace policies and practices implemented by management, which they believe contributes to their traumatic experiences. Chapter 5 presents an interpretation of the study findings, provides recommendations, discusses implications, and lastly, identify and addresses the study's limitations.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

This study explored the perspectives of COs on how the everyday occurrences of violence associated with working in jails influence their physiological well-being. The study's design allowed COs to share their experiences of witnessing or being directly involved with force-related incidents with inmates. The study also addressed their feelings, follow-up care, and coping mechanisms, as well as how COs managed their private lives outside of jails regarding tense situations, emotional behaviors, and physical health. Previous studies focused on the working conditions for jail staff; in such studies, the focus on COs was minimal.

This study showed that COs experience an elevated level of anxiety and fear when reporting for their tour due to the potential for being involved in a use-of-force incident with inmates or other violent encounters. My findings also indicated that although COs may have family or partners to share their emotions or workday with, COs are not comfortable discussing the day's events with them. Instead, COs usually confide in one another because of the sense of understanding and camaraderie; doing this may provide an outlet. Further, my findings showed that COs expressed a sense of anger toward management for policies regarding the use of force and a sense of helplessness regarding treatment after a violent encounter occurred and aftercare treatment was provided. The study showed that COs experience various health-related issues and mental-health-related issues stemming from their careers as officers and the common occurrence of violent encounters in jails.

Last, COs expressed difficulties leaving the work persona at work and indicated that they usually bring it home. They often have poor coping skills, resorting to various chemical dependencies such as drugs and alcohol. Participants expressed that when faced with conflict in their personal lives, they are often avoidant and do not effectively address the matter. However, if the stressful event is serious, COs opt to employ broader coping strategies such as talking to colleagues, friends, and family about the issues, asking for a day off, and detaching themselves from the job. However, in some cases, COs choose to stick to themselves and not talk about the issue with anyone. This behavior is also an element of detachment, except that it implies that the CO in question is not susceptible to the stressful encounter's effects. However, it is not considered a better approach, as it does not allow a CO to let out the “rage” inside them, and in most cases, it can lead to COs drifting further from their family, friends, and colleagues. These strategies mean that a CO employs primary palliative approaches in coping with occupational stress instead of tackling the issues at work. Overall, the participants expressed that the emotions displayed are not genuinely felt out of fear of being victimized. The participants expressed experiencing a heightened sense of alert when off duty in a social setting, being quicker to react aggressively than necessary, and feeling emotions in intense situations off duty that are often inappropriate for the situation.

Interpretation of Findings

This study confirms and extends knowledge in the discipline in many ways. Inmates often perceive COs' lack of power as a source of weakness and do not think twice about attacking them whenever they get a chance (Gordon & Baker, 2017).

Because COs rarely receive respect from inmates, they are sometimes forced to comply with inmates, and many emotional issues can manifest themselves. McNeeley and Donley (2020) explained that a CO may express fear and anxiety before engaging an inmate; excitement and pride upon successful execution; and guilt, disgust, and confusion afterward. This is especially evident in mentally ill inmates (McNeeley & Donley, 2020). In most cases, COs' work involves constant use of force, which leads them to develop paranoia when they return to the public that they intrude into other people's lives outside the facilities. The increased reporting of these crimes has prompted COs to develop mental health issues because inmates constantly victimize them.

In a study by Sowunmi et al. (2018), it was discovered that COs preferred to hide their thoughts and feelings from their families. COs have a higher tendency to reduce their communications with their spouses, increasing family dispute levels. This breakdown in communication translates to increased traumatic symptoms instead of reducing occupational stress (Sowunmi et al., 2018). In a similar study by Craun et al. (2015), there was a positive connection between traumatic stress and discomfort with showing intimacy with family members between officers (p. 184).

COs often find themselves unable to break away from their work duties when at home, and there is a higher likelihood of them finding it difficult to break away from their role. Araújo et al. (2020), after assessing the quality of life of COs, discovered that female COs have difficulty breaking away from their role. The findings suggested that female COs and COs with high violence rates had worse quality of life scores than those with low violence rates (Araújo et al., 2020). The authors recommended that prison

administrators and relevant authorities implement measures that promote the quality of life of COs and support their development. The repeated exposure to violence in jails that COs encounter and the responses from the interviews imply that COs have difficulty engaging in regular social duties, such as interacting with their families. This translates to the deterioration of the relationships of the COs and their families. For example, their relationship with their children is hampered because they will not behave well. There is a higher prevalence of COs who are parents of teenagers to treat their children as juvenile detainees when returning home (Lin, 2017).

Theoretical Framework

The framework for this study was the theory of constructed emotion by Barrett and Hutchinson, who posited that the primary purpose of an organism's brain is to regulate physiological resources required to meet the organism's imminent needs for action and learning in the short term (Fridman et al., 2019). This theory supports the concept of allostasis, which suggests that managing energy needs and anticipating bodily needs such as cognition, emotion, perception, and action are predictive and aims to understand decision making in stressful occupational settings such as law enforcement (Fridman et al., 2019). This theory helps in understanding why violence is a common occurrence in jails, where COs may witness or be directly involved in incidents involving inmates, and how these experiences influence how officers respond to situations outside of the workplace. Admittedly, some of the participants' responses to situations are often inappropriate and arbitrary and, in some ways, impulsive as a response to being in a state

of high alert. Essentially, these emotional and behavioral responses are perceived as the bodily needs of these law enforcement officers, irrespective of being on or off duty.

Limitations of the Study

This study was a phenomenological study conducted in New York using participants working for jails in the metropolitan region; therefore, generalization to the CO population was limited. COs receive comparable training, and the facilities that they are employed in are operated similarly; however, there are differences to highlight regarding operational policy, procedure, and directives. Another difference is the municipality. Some corrections organizations are under the governor's authority, and others are under the authority of the mayor or county executive. Classification of inmates presents another limitation. Depending on the prison, inmates' propensity for violent encounters may range in intensity and occurrence. If this study were conducted in another region or corrections organization, the data could produce different outcomes. Another limitation to this study was the current climate and perception of law enforcement officers right now. With movements such as BLM, "defund the police," and the ongoing COVID-19 pandemic, the turnover rate for COs has risen. Many COs have been apprehensive about coming forward and sharing their experiences out of fear of retaliation, general mistrust, and contracting COVID-19. Another limitation involves gender and race. More males participated than females, and participants were predominantly Black/African-American, West Indian, or Hispanic/Latino(a). This could be due to the overall demographic makeup of the organization.

Recommendations

The results illustrate that COs who participated in this study expressed difficulties transitioning between work and home. They often carried the persona of the job into their personal lives, commonly called “the CO mentality.” A quantitative study could also be conducted to generate a higher sample size. Gender and race are other limitations to discuss. There were more male participants than female participants and more participants identified their race/ethnicity as either Black/African-American, West Indian and/or /Hispanic. These ethnicities have differences; however, they share strong similarities about cultural implications. Despite their similarities, future studies should include more female participants and more participants of other races/ethnicities to explore how race/ethnicity influences the study’s outcomes. People of different races/ethnicities may have different viewpoints; this possibility should be explored in future research. Further research could include retired COs as well as active-duty COs. This will enable us to determine whether the outcome of this study is a shared experience.

Implications

Positive Social Change/Intervention Strategies

The current paper agrees with other studies that organizational restructuring of the workplace can improve the working conditions of COs and foster a healthy environment in eliminating occupational stress compared to altering an individual, in that it focuses on the origin of the issue. The study’s findings may encourage social change by informing readers of how the common occurrence of violent encounters in jails at the hands of

inmates negatively influences the physiological well-being of COs. Although COs are law enforcement officers, they too are mothers, fathers, caregivers, and significant others, and when their well-being suffers, the lives of these people and their families are negatively affected. This can perpetuate a cycle of dysfunction in the family, can lead to substance and alcohol abuse/dependency, and can diminish morale in the profession. This study can provide corrections administrators, lawmakers, and other stakeholders with information from the perspectives of their uniformed staff. The findings from this study may help in analyzing existing policies for weaknesses or ineffectiveness and help facilitate strategic planning and implementation of more effective policies. In turn, this could help officers to develop more healthy coping mechanisms and improve their overall physiological health.

Individual-Based Methods

Schott et al. (2016) identified that professionals have different ways of dealing with occupational stress. These include coping and training. Coping entails strategies employed by professionals to escape the challenges that they face. COs may employ coping strategies that are directly or indirectly related to the situation at hand. In typical cases, the employed strategies are selected for a stressful event that is less serious and not likely to cause much emotional damage to the CO. These strategies include listening to music, going for a walk, or reading.

As mentioned earlier, several coping strategies do not help alleviate occupational stress among COs. These include detachment, ignoring the situation, and refusing to exchange information with other people (friends, family, colleagues). In a study by

Maschi et al. (2015), disciplinary authorities introduced training excursions to help COs effectively cope with occupational stress. These programs teach COs different behavioral skills to employ when encountering stressful events. Still, much emphasis is on establishing multifaceted approaches that incorporate social support and training to improve behavioral skills. Common behavioral training approaches include stress inoculation training (Hourani et al., 2016), cognitive restructuring, and relaxation training. Physical exercise programs have also been discovered to produce positive results among COs experiencing stressful events (Useche et al., 2019). This finding implies that individual-based methods need to be accompanied by organizational-based strategies to be effective in the long run.

Organizational-Based Methods

The nature of an organization is another factor that can be considered when recommending intervention strategies that help COs effectively manage occupational stress, burnout, and PTSD. These approaches can be divided into two categories: (a) the improvement of human resource management (HRM) and (b) the improvement of the social work environment.

HRM Improvement

The information relayed to candidates about the position of CO may not be a true reflection of the nature of the job due to the negative perception that exists in public about the role of COs (Ricciardelli et al., 2020). Therefore, prospective candidates may “fall prey” to often-exaggerated posts, anticipating receiving similar benefits and incentives once hired. Therefore, COs may enter their role with incorrect expectations

and later know that they cannot leave, lest they get into legal tussles with the administration regarding contract breach if they want to quit early. It is not appropriate to present wrong information in job postings. Information about the job description should be clear because a disillusioned and frustrated CO can experience high occupational stress and burnout within a short time after employment.

Improvement of Social Work Environment

Introducing regular staff meetings to promote teamwork in facilities and the importance of improving communications between COs and their colleagues and superiors is another recommendation. Kinman et al. (2017) recommended that administrators engage in role clarification involving the responsibilities and duties of a CO when addressing social work improvement issues. This recommendation presents COs with an avenue of asking for and providing social support without being ashamed of their job and looking incompetent. In sum, it is essential to note that introducing teamwork needs organizational input, which promotes job satisfaction and reduces occupational stress and burnout (Walker et al., 2018).

Conclusion

The work environment of COs is unique. COs are incarcerated with some of the most dangerous criminals for the duration of the workday. COs maintain law and order primarily within the confines of jails, where those who regularly disturb it are held. Due to the nature of their work environment, they face dangers, pessimism, and cynicism and have limited opportunities to influence positive change. The purpose of this phenomenological study was to explore how daily occurrences of violence in jails by

inmates influence COs' overall physiological well-being from the perspective of the COs. This study helps to close a gap in the literature by providing an understanding of what it is like to work in a jail setting, as well as the physical, mental, and emotional experiences that individuals may encounter when witnessing or directly experiencing a violent use of force.

This study indicates that COs experience significant levels of anxiety, stress, and fear when they think about going to work, which may continue right up to arriving at work. They are fearful of getting injured at work from the use of force. In addition, the results indicate a disconnect between what officers feel and display emotionally while on duty and what they express off duty, as well as a feeling of distrust and paranoia both on and off duty. These findings suggest that COs experience negative physical and mental impacts associated with the traumatic events related to their employment and struggle to turn off their work persona when they are not on duty. The results have shown that officers experience a decline in their physical health; they experience negative changes in their personal lives regarding their relationships, their ability to communicate and engage in conflict resolution effectively, and their problem-solving skills. This study and those that preceded it have offered some reasons why the occupation of corrections has a higher than average mortality rate, suicide rate, intimate partner violence rate, divorce rate, and drug or alcohol abuse rate. There is no doubt that correctional departments would benefit from addressing this issue and implementing further training and educational measures to counteract the adverse effects of working in a jail.

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Appendix A: Interview Questions

1. Can you tell me how long you have been a corrections officer?
2. *Can you explain the type of facility or facilities you have worked in during your years of service as a CO?*
3. *Can you share what a typical workday is like in the facility you report to?*
4. Tell me about your experience with *workplace violence from inmates as a corrections officer?*
5. *Can you describe your encounter(s) circumstances surrounding the use(s) of force?*
 - a. *Tell me more about that experience(s) –conversation continuer*
6. When there is a use of force incident that you are involved in or witness, can you explain what emotion or emotions you are aware of feeling?
7. Please share the follow-up care details surrounding the use of force incident(s). Please detail and explain your feelings.
8. *Tell me how this (these) experience(s) made you feel? What did you do?*
9. When you leave work, how do you process the day's events? Please explain.
10. What do you do to cope with the results of your use of force incident(s)? Please explain.
11. Do you discuss the emotions you feel during the day with family or friends? Please explain.
12. When faced with a tense situation at home, can you explain how you handle the situation? What emotions do you experience?
 - a. *How does your experience before that time compare to your experience now? -conversation continuer*
13. *How has your experience with workplace violence from inmates impacted your relationship(s) with your coworkers, partner, friends, family?*
14. Do you feel the emotions you exhibit in your personal life are appropriate for the situation? Please explain and give examples.

15. *Do you or anyone around you find that you have noticeably changed since becoming an officer? Can you describe in what ways?*
16. *Having shared with me your experiences, do you feel that you were prepared to cope with workplace violence and trauma? Why or why not?*
17. *What factors or elements might influence or modulate your perceptions of coping after experiencing or witnessing workplace violence by inmates?*
18. *Is there anything else you would like to share or comment on? What you have said is essential. Can you say more?*
19. *How has the COVID-19 pandemic influenced your overall physiological well-being regarding the occurrence of violence in jails?*
20. *Did the COVID-19 pandemic exacerbate this violence?*
21. *Has the ongoing COVID-19 pandemic increased the stress factor on you as an officer? Can you share in what ways?*

Appendix B: Invitation to Participate

April 21, 2021

Hello,

I hope that this correspondence finds you well.

My name is Amanda A. Smith, and I am a Ph.D. student attending Walden University studying Criminal Justice. I am conducting a qualitative study to explore the perspectives of corrections officers on how the everyday occurrences of violence associated with working in jails influence their physiological well-being. I would like to interview a selection of corrections officers who have direct contact with the inmate population daily. Participation is voluntary, and you may decline to answer any question(s) or stop the interview at any time. Interviews will be conducted face-to-face; however, due to the Covid-19 (Novel Coronavirus) pandemic, interviewing can be conducted via Zoom as an alternative. In addition, interviews will be audio-recorded and transcribed. The interview will be approximately 45-60 minutes in duration. A password-protected copy of the transcribed interview will be provided to you to review for accuracy afterward.

As aforementioned, your participation in this study is completely voluntary, and your identity will remain anonymous and confidential. If you agree to participate, you will be asked to share your lived experiences with witnessing or experiencing violence in the jails in only one interview. A link to the demographic study will be provided to you to determine participation eligibility and will take less than five minutes. Any demographic information collected will only be provided as it is relevant to the study, and you are free to ask any question(s) before, during, or after.

This study explores participants' lived experiences, and data collected will help make recommendations or improve policies and procedures geared towards helping corrections officers. Would you like to take part in this study? If so, please click on the link to complete the survey <https://forms.gle/RToqrmsVZZgU2AbCA>

If you have any additional questions, please feel free to email me at _____.
Thank you for your time and consideration.

Sincerely,

Amanda A. Smith

Appendix C: Demographic Survey

6/4/2021

Workplace Violence and The Lived Experiences of Corrections Officers

Individual participation in the study is voluntarily and involvement in the study can be terminated at any time. The decision not to take part would not result in any loss of benefits to the participants. If participants are selected to take part, participants may withdraw at any time without consequence or penalty and all information is strictly confidential.

CONSENT FORM

You are invited to take part in a research study about workplace violence, trauma, and the lived experiences of corrections officers. The researcher is inviting 5-10 corrections officers with at least five years of experience with direct inmate contact to be in the study. This form is part of a process called "informed consent" to allow you to understand this study before deciding whether to take part.

This study is being conducted by a researcher named Amanda A. Smith, who is a Doctoral student at Walden University.

Background Information:

The purpose of this study is to explore the experiences of workplace violence at the hands of inmates from the perspective of corrections officers.

Procedures:

This study involves the following steps:

- take part in a confidential, audio-recorded teleconferencing interview (approximately 45 to 60 minutes)
- review a typed transcript of your interview to make corrections if needed (email option available) (10 minutes)
- speak with the researcher one more time after the interview to hear the researcher's interpretations and share your feedback (this is called member checking and it takes 20-30 minutes, phone option available)

Here are some sample questions:

1. Can you explain the type of facility or facilities have you worked in, during your years of service as a CO.
2. Tell me your experience with workplace violence from inmates as a corrections officer?
3. Can you describe your encounter(s) circumstances surrounding the use(s) of force?
4. Tell me how this (these) experience(s) made you feel? What did you do?
5. Having shared with me your experiences, do you feel that you were prepared to cope with workplace violence and/or trauma? Why or why not?

Voluntary Nature of the Study:

Research should only be done with those who freely volunteer. So everyone involved will respect your decision to join or not. You will be treated the same at Walden University whether or not you join the study. If you decide to join the study now, you can still change your mind later. You may stop at any time. The researcher seeks 10-25 volunteers for this study. Please note that not all volunteers will be contacted to take part. The researcher will follow up with all volunteers to let them know whether they were selected for the study

Risks and Benefits of Being in the Study:

Being in this study could involve some risk of the minor discomforts that can be encountered in daily life, such as stress or revealing things that are personal. With the protections in place, this study would pose minimal risk to your wellbeing. Being in this type of study involves some risk of the minor discomforts that can be encountered such as reliving an traumatic experience resulting from participating in this study. if you feel the need to consult with someone after this interview, please feel free to contact NYC Well, a confidential helpline for mental health and substance misuse services 24/7 1-888-NYC-Well (692-9355), TEXT: "Well" to 65173 or CHAT ONLINE at nyc.gov/nycwell.

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This study offers no direct benefits to individual volunteers. The aim of this study is to benefit society by exploring the perspectives of correctional officers on how the everyday occurrences of violence associated with working in jails influence their physiological well-being

Payment:

There will be no payment.

Privacy:

The researcher is required to protect your privacy. Your identity will be kept confidential within the limits of the law. The researcher will not ask for your name at any time or link your responses to your contact info. The researcher will not use your personal information for any purposes outside of this research project. Also, the researcher will not include your name or anything else that could identify you in the study reports. If the researcher were to share this dataset with another researcher in the future, the researcher is required to remove all names and identifying details before sharing; this would not involve another round of obtaining informed consent. Data will be kept secure by password protection, data encryption, use of codes in place of names, storing names (when necessary) separately from the data, as well as discarding names (when possible). Data will be kept for a period of at least 5 years, as required by the university.

Contacts and Questions:

You can ask questions of the researcher by email at [REDACTED]. If you want to talk privately about your rights as a participant or any negative parts of the study, you can call Walden University's Research Participant Advocate at [REDACTED]. Walden University's approval number for this study is # [04-21-21-0690068](#) and it expires on [April 20, 2022](#).

You might wish to retain this consent form for your records. You may ask the researcher or Walden University for a copy at any time using the contact info above.

Obtaining Your Consent

If you feel you understand the study and wish to volunteer, please indicate your consent by ____.

2. IF YOU FEEL YOU UNDERSTAND THE STUDY AND WISH TO VOLUNTEER, PLEASE INDICATE YOUR CONSENT BY CLICKING "I AGREE" BELOW *

Mark only one oval.

"I Agree" Skip to question 3

Skip to question 3

Participant Interest and Demographic Survey

3. Please provide the initials of your first and last name and any two numbers (to establish confidentiality) *

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4. Are you presently employed as an active duty corrections officers? *

Check all that apply.

- Yes
 No

5. Were you an active-duty corrections officer as of January 1, 2016? *

Check all that apply.

- Yes
 No

6. What year did you become a corrections officer? *

7. Do you have direct inmate contact daily while on duty? (i.e. housing area, intake area, mess hall, clinic, transportation) *

Check all that apply.

- Yes
 No

8. Have you experienced or witnessed violence in the jails directly? *

Check all that apply.

- Yes
 No

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9. What is your current partnership status? *

Check all that apply.

- Single/Never Married
- Married
- Divorced/Separated
- Widowed
- Cohabiting/Domestic Partnership

10. What is your Gender Identity? *

Check all that apply.

- Female
- Male
- Prefer not to say

11. What is your highest level of schooling completed?

Check all that apply.

- 12th grade/HS diploma/GED
- Some College (less than 2 years)
- Associate's Degree
- Bachelor's Degree (BA/BS)
- Master's Degree (MA, MS)
- PhD or other Professional degree (e.g. M.D)

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12. What is your race/ethnicity? (If you identify with more than one, please mark all that is applicable) *

Check all that apply.

- American Indian or Alaska Native
- Asian
- African American, Black American
- Hispanic or Latino(a)-African descent
- Hispanic or Latino(a)-NOT of African descent
- West Indian-African descent
- West Indian-NOT of African descent
- White
- Native Hawaiian or Other Pacific Islander

Other: _____

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Google Forms

**Amanda Smith**23 March at 23:03 · 

Hello everyone,

As you can see above, my name is Amanda Smith and I am a student at Walden University doing an interview study to explore the perspective of corrections officers on how the everyday occurrences of violence associated with working in jails influence their physiological wellbeing. I need at least 10-25 voluntary participants. The picture attached to this post is called "the invitation to participate" which provides more information in detail about my study. Should you decide to take part, it is voluntary and you may withdraw at any time and your information will remain confidential. Below there is a link for a participant interest survey for anyone who may be interested in participating. Thank you in advance.
<https://forms.gle/nCi8j18jEVC5jpSa8>