

9-6-2024

## **Mental Health Care and Psychological Help-Seeking in Correctional Officers**

Natasha Charles McQueen  
*Walden University*

Follow this and additional works at: <https://scholarworks.waldenu.edu/dissertations>

---

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact [ScholarWorks@waldenu.edu](mailto:ScholarWorks@waldenu.edu).

# Walden University

College of Psychology and Community Services

This is to certify that the doctoral dissertation by

Natasha Charles McQueen

has been found to be complete and satisfactory in all respects,  
and that any and all revisions required by  
the review committee have been made.

Review Committee

Dr. Benita Stiles-Smith, Committee Chairperson, Psychology Faculty

Dr. Olga Carranza, Committee Member, Psychology Faculty

Chief Academic Officer and Provost  
Sue Subocz, Ph.D.

Walden University  
2024

Abstract

Mental Health Care and Psychological Help-Seeking in Correctional Officers

by

Natasha Charles McQueen

MS, Walden University, 2014

B.A., City University of New York, 2007

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Psychology

Walden University

November 2024

## Abstract

Correctional officers face significant mental health challenges due to the high-stress and often traumatic nature of their work environments. This qualitative study used the conservation of resources (COR) theory to underpin exploration of correctional officers' perceptions of mental health care and psychological help-seeking within personal, organizational, and societal contexts. In-depth interviews were conducted with six correctional officers, three males and three females, to gather detailed insights regarding their perceptions of mental health care and their help-seeking behaviors. Data were analyzed using manual thematic coding, NVivo, and natural language processing tools, to ensure a comprehensive and objective analysis. Key findings were that stigma, confidentiality concerns, trauma, shift work, poor supervision, and organizational inefficiencies were significant barriers to seeking psychological support. Participants emphasized the need for mandatory quarterly mental health check-ins, enhanced early intervention training, and mental health care that was tailored to the unique challenges of correctional officers. This study highlighted the need for organizational support and accessible mental health resources. In addressing barriers and leveraging the COR framework, this research can contribute to positive social change through improved mental health and well-being among correctional officers, leading to healthier and more effective workforces by offering practical recommendations for creating mental health programs that are designed explicitly for correctional officers.

Mental Health Care and Psychological Help-Seeking in Correctional Officers

by

Natasha Charles McQueen

MS, Walden University, 2014

B.A., City University of New York, 2007

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Psychology

Walden University

November 2024

## Dedication

To my academic advisor, Greg Murphy, thank you for your unwavering support.

To my chair member, Dr. Benita Stiles-Smith, this dissertation is a testament to your exceptional guidance and mentorship. Your critical insights and steadfast dedication to excellence were pivotal in my academic journey. Your ability to balance high expectations with empathy and understanding has profoundly shaped my scholarly development. For this, I am deeply grateful.

## Acknowledgments

I thank my family, whose love and encouragement have been my anchor and refuge. Your unconditional support has strengthened and motivated me. Your camaraderie has been invaluable throughout this challenging journey, providing laughter, distraction, and support.

I am deeply grateful to my friends and colleagues for your unwavering presence. Thank you for being part of this journey. Your roles in this process have been indispensable, and I am profoundly thankful for each of you.

## Table of Contents

|                                                           |    |
|-----------------------------------------------------------|----|
| Chapter 1: Introduction to the Study.....                 | 1  |
| Purpose of the Study .....                                | 4  |
| Research Questions.....                                   | 5  |
| Theoretical Framework for the Study.....                  | 5  |
| Nature of the Study .....                                 | 7  |
| Assumptions.....                                          | 7  |
| Scope and Delimitations .....                             | 8  |
| Limitations .....                                         | 8  |
| Significance.....                                         | 8  |
| Summary .....                                             | 9  |
| Chapter 2: Literature Review .....                        | 10 |
| Literature Search Strategy.....                           | 11 |
| Theoretical Framework.....                                | 13 |
| Resource Loss and Gain.....                               | 16 |
| Application to Correctional Officers .....                | 17 |
| Stigma and Help-Seeking Behavior.....                     | 20 |
| Resource-Building Interventions .....                     | 20 |
| Organizational Change and Support .....                   | 20 |
| Continuous Assessment and Research.....                   | 21 |
| Long-Term Strategic Planning and Policy Development ..... | 21 |
| Literature Review.....                                    | 22 |



|                                                                      |    |
|----------------------------------------------------------------------|----|
| Mental Health Challenges in Correctional Officers.....               | 22 |
| High-Stress Environment.....                                         | 23 |
| Corrections and Effects on Officers’ Mental Health .....             | 34 |
| Factors Influencing Help-Seeking Behaviors .....                     | 39 |
| Effectiveness of Existing Programs .....                             | 41 |
| Summary and Conclusions .....                                        | 43 |
| Chapter 3: Research Method.....                                      | 46 |
| Research Design and Rationale .....                                  | 46 |
| Role of the Researcher .....                                         | 47 |
| Methodology .....                                                    | 51 |
| Sample Strategy .....                                                | 51 |
| Instrumentation .....                                                | 56 |
| Procedures for Recruitment, Participation, and Data Collection ..... | 57 |
| Issues of Trustworthiness.....                                       | 63 |
| Ethical Procedures .....                                             | 64 |
| Chapter 4: Results .....                                             | 69 |
| Setting .....                                                        | 70 |
| Demographics .....                                                   | 72 |
| Data Collection .....                                                | 75 |
| Data Analysis .....                                                  | 76 |
| Evidence of Trustworthiness.....                                     | 77 |
| Results.....                                                         | 80 |

|                                                              |     |
|--------------------------------------------------------------|-----|
| Theme 1: Perceptions of Mental Health .....                  | 82  |
| Theme 2: Seeking Help Concerns.....                          | 84  |
| Theme 3: Willingness to Seek Help.....                       | 86  |
| Theme 4: Coping with Stigma .....                            | 87  |
| Theme 5: The Decision to Seek Help .....                     | 88  |
| Theme 6: Challenges in Correctional Settings.....            | 89  |
| Results.....                                                 | 91  |
| Varied Perceptions .....                                     | 99  |
| Lack of Resources Challenges in Correctional Settings .....  | 102 |
| Impact of Stress and Need for Systemic Change.....           | 103 |
| Recommendations for Improvement.....                         | 104 |
| NVivo and COR Theory Results .....                           | 113 |
| Integration of NLP Themes .....                              | 115 |
| Theme 1: Perceptions of Mental Health .....                  | 117 |
| Theme 2: Varying Views on Mental Health.....                 | 117 |
| Conclusion .....                                             | 120 |
| Recognition of Mental Health Importance .....                | 120 |
| Summary .....                                                | 125 |
| Chapter 5: Discussion, Conclusions, and Recommendations..... | 128 |
| Interpretations of Findings.....                             | 130 |
| Perceptions of Mental Health Stigma .....                    | 131 |
| Research Questions.....                                      | 142 |

|                                             |     |
|---------------------------------------------|-----|
| Training and Supervisory Practices .....    | 149 |
| Coping Mechanisms and Support Systems.....  | 155 |
| Application of the COR Theory .....         | 156 |
| Impact of Technological Interventions ..... | 166 |
| Limitations of the Study.....               | 168 |
| Recommendations and Implications .....      | 170 |
| Social Change Implications .....            | 173 |
| Conclusion .....                            | 175 |
| References.....                             | 179 |
| Appendix A: Recruitment Flyer.....          | 218 |

## Chapter 1: Introduction to the Study

Correctional officers operate in highly-demanding environments that expose them to chronic stress and hazardous situations which significantly impact their mental health. They are at an increased risk for conditions such as PTSD, anxiety, and depression (Bower, 2013; Blum, 2000; Johnson, 2018; Burhanullah et al., 2022; Fusco et al., 2021). Compared to other first-responder groups, correctional officers often experience higher job-related stress and exhaustion rates (Haas, 2015). Research indicates a causal link between correctional work environments and adverse mental health outcomes. New correctional officers exhibit a lower prevalence of mental health disorders compared to those with more service experience (Easterbrook et al., 2022).

Occupational health research has largely overlooked critical and concerning issue of the mental health of correctional officers. This lack of attention is particularly troubling given the demanding nature of their work and well-documented evidence of mental health challenges they face. This study involved examining the decline in correctional officers' mental wellbeing and significant barriers they encounter when seeking help. Correctional officers are routinely exposed to high-risk environments, placing them at an increased risk of developing mental health conditions. There is a prevalence of conditions such as posttraumatic stress disorder (PTSD), anxiety, and depression among correctional officers (Carleton et al. 2020; Fusco et al., 2021). These conditions can be attributed to the constant threat of violence they face. Correctional officers may witness or intervene during physical confrontations between inmates or inmates and staff. The possibility of hostage situations adds another layer of stress in

terms of requiring critical decisions under duress and the potential for witnessing severe injury or death. Furthermore, officers are tasked with managing individuals with mental health struggles, which can be challenging and unpredictable, leading to feelings of frustration, helplessness, and fear for their safety and safety of others.

Beyond these specific critical incidents, the general work environment of correctional facilities can significantly impact correctional officers' mental wellbeing. Several factors contribute to this burden. U.S. prisons are frequently overcrowded, leading to heightened tensions among inmates and staff. This can limit resources and make it difficult for officers to maintain order and ensure safety (Martin et al., 2012; Phelps, 2011, 2012). Long hours and irregular shifts disrupt sleep patterns and contribute to feelings of fatigue and burnout.

Correctional facilities often face challenges such as understaffing and lack of essential resources, which can impede the ability of correctional officers to perform their duties effectively. Such conditions may lead to feelings of being overwhelmed and undervalued. Additionally, chronic exposure to high-stress environments and traumatic events can significantly impact mental and physical health of these officers. These factors contribute to an increased risk of mental health disorders, including PTSD, anxiety, and depression, underscoring the urgent need for enhanced support systems within these institutions.

Due to the high-stress nature of their roles, some officers might resort to substances like alcohol or drugs as coping mechanisms for managing stress and trauma on the job. Additionally, burnout, characterized by emotional exhaustion, cynicism, and

feelings of reduced personal accomplishment, may cause some officers to feel increasingly detached from their work and colleagues. These responses highlight the critical need for practical support and intervention strategies to address mental health challenges within this profession.

Correctional officers face a significantly heightened risk of suicide and mental health disorders compared to both police officers and the general population. Carleton et al. (2022) noted suicide rates among correctional officers were twice as high as police officers and the general population combined. Burhanullah et al. (2022) reported suicide rates for correctional officers are 40–100% higher than police officers outside of prison settings and three times the rate of the general U.S. population. Additionally, Carleton et al. (2020) claimed high prevalence rates of PTSD, major depressive disorder, and generalized anxiety disorder among these officers.

These findings unequivocally underline the urgent need for robust mental health support that is explicitly tailored to the unique needs of correctional officers. Obstacles that prevent these officers from seeking help, including stigma, confidentiality concerns, negative experiences with mental health professionals, and pervasive cultures of silence regarding mental health struggles, must be systematically addressed.

The stigma associated with mental health struggles, particularly within the traditionally masculine culture of law enforcement, poses a significant barrier. Correctional officers may fear that seeking help will lead them to be perceived as weak or unfit for duty (Violanti, 2020). Additionally, concerns about confidentiality within the correctional system can deter officers from seeking help in their facilities.

Moreover, previous negative experiences with mental health professionals or a fundamental lack of understanding about mental healthcare can contribute to a distrust of the system, making officers hesitant to seek help (Violanti, 2020). Emphasis on emotional control and self-reliance within correctional settings further perpetuates cultures where mental health struggles are minimized or ignored, prompting officers to downplay their struggles and avoid seeking necessary help (Topkaya, 2014).

Stigma associated with perceived weakness, internal conflicts, and fear of professional repercussions contributes to underreporting and undertreatment of these conditions (Fusco et al., 2021; Garner & Thorne, 2020; Obidoa et al., 2011; Spinaris et al., 2012). This study involved exploring perceptions of mental health care and psychological help-seeking behaviors among correctional officers to identify barriers and facilitating factors that influence their decisions to seek or avoid support.

I reviewed existing research on correctional officers' mental health challenges. I highlighted demanding work environments and various stressors, such as exposure to violence, high-risk situations, and overcrowded facilities, which contribute to mental health struggles like PTSD, anxiety, and depression. I discussed gaps in current research and the need for a focused investigation regarding correctional officers' mental health perceptions and help-seeking behaviors.

### **Purpose of the Study**

I aimed to explore correctional officers' perceptions of psychological help-seeking for mental health concerns. I sought to understand declines in their mental wellness and engagement with psychological support services given unique stressors of

correctional work, such as exposure to violence and high-pressure environments. These stressors contribute to a higher prevalence of mental health struggles among correctional officers, which are often underreported and undertreated due to stigma and perceived weakness (Carleton et al., 2020, 2022; Fusco et al., 2021; Garner & Thorne, 2020). Additionally, correctional officers face internal conflicts and deterrents that impede their access to necessary support (Obidoa et al., 2011; Spinaris et al., 2012). By documenting underlying reasons for lack of use of psychological support services compared to other first responders, I aimed to identify actionable strategies that can enhance accessibility and effectiveness of mental health support for officers.

### **Research Questions**

Three primary questions guided this research:

RQ1: How do factors such as stigma, coping strategies, and personal history influence correctional officers' decisions to seek psychological assistance?

RQ2: What is the impact of organizational factors, including leadership support, accessibility of mental health resources, supervisory practices, and training on correctional officers' willingness to engage with psychological support services?

RQ3: How do societal factors, including portrayal in the media, public opinion, and intervention approaches influence stigma associated with mental health struggles among correctional officers?

### **Theoretical Framework for the Study**

The conservation of resources (COR) theory suggests individuals strive to gather, maintain, and safeguard resources they deem valuable (Hobfoll, 1989). Stress occurs



when individuals perceive a threat of losing resources, have already lost them, or have not gained sufficient resources. This theory was used to examine unique pressures faced by correctional officers, suggesting they strive to acquire, maintain, and protect resources that are essential for their well-being. For instance, correctional officers might feel stressed if they worry about losing their jobs, have already experienced the loss of respect from colleagues, or have not received enough support from their supervisors. The COR theory divides resources into personal, social, and material types. For correctional officers, personal resources include resilience (the ability to recover from difficulties) and self-efficacy (belief in abilities). Social resources include support from colleagues and family, while material resources include safety gear and training opportunities.

The high-stress environment of correctional facilities often exposes officers to conditions that can precipitate resource loss. Stressful incidents such as inmate confrontations or critical emergencies can rapidly deplete officers' psychological and physical resources, contributing to heightened stress levels (Halbesleben & Buckley, 2004).

Consistent with the COR theory, loss of resources without adequate recovery is posited to lead to worse mental health outcomes, such as burnout, anxiety, and depression. I consider strategies for resource conservation that can mitigate the adverse effects of resource loss. I examine institutional practices that can help maintain or augment officers' resources, thus potentially buffering them against adverse effects of job stress.

I aimed to provide practical ideas for better distributing resources and creating programs that can strengthen correctional officers' resilience and mental health using the COR theory. These suggestions help change workplace policies and practices to conserve essential resources better. Using the COR theory, I studied specific stressors in correctional work and their effects on officers' mental health. This approach was used to thoroughly understand how resource changes at work affect officers' wellbeing, leading to the creation of specific support programs.

### **Nature of the Study**

The reluctance of correctional officers to seek mental health support is well-documented. This significantly impacts their mental wellbeing. I employed a qualitative methodology to explore subjective experiences of correctional officers related to mental health and help-seeking behaviors. This approach was used for an in-depth understanding of complex experiences within the context of their profession. I used a pragmatic design focusing on practical solutions and flexible research strategies. Thematic analysis was employed to ensure comprehensive qualitative data analysis. The process involved familiarizing myself with data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and finally producing a report. This structured approach aided in extracting meaningful insights from interviews, directly supporting study objectives.

### **Assumptions**

This research is based on the assumption that correctional officers operate in highly-demanding and uniquely-challenging work environments. I also assumed natural

language processing (NLP) enhanced objectivity of qualitative data analysis by mitigating potential biases due to my past experience as a correctional officer.

### **Scope and Delimitations**

I focused exclusively on correctional officers in Maryland. This implies findings may not be generalizable to correctional officers in other regions or contexts. I addressed perceptions and subjective experiences of these officers regarding mental health struggles and their help-seeking behaviors. I did not assess effectiveness of specific mental health interventions but instead aimed to explore prevailing perceptions and obstacles faced by correctional officers in terms of accessing mental health support.

### **Limitations**

This study has several limitations. I relied primarily on self-reported data from correctional officers, which can be subject to various biases. Additionally, findings may not extend to correctional officers in different states or countries where varying conditions could lead to different psychological impacts and coping mechanisms. Diversity within the sample in terms of age, gender, tenure, and personal background may not sufficiently be representative of the full spectrum of experiences, potentially overlooking unique or outlier scenarios. Future research could employ broader sampling strategies or use quantitative data to address these limitations.

### **Significance**

. By examining how correctional officers perceive and engage with mental health resources, I aimed to address pivotal insights that can lead to the development of tailored and effective mental health support programs. Such programs are essential for improving

correctional officers' well-being and enhancing the safety and efficiency of correctional facilities. This research is significant to fill a crucial gap in understanding and addressing the mental health needs of those within the corrections system.

### **Summary**

Chapter 1 included an introduction to this study regarding declining mental health among Correctional officers, detailing the intricacies of their wellness and help-seeking behaviors. Building on this foundation, Chapter 2 includes information regarding the theoretical framework. I review existing literature on correctional officers' mental health perceptions and behaviors regarding seeking psychological help. I explore how previous findings align or contrast with the current study, enhancing understanding of where this research fits within the field. This includes historical data as well as present insights and effective interventions.

## Chapter 2: Literature Review

Correctional officers are crucial in maintaining order and safety within correctional facilities. Their work environment is demanding and complex, characterized by constant exposure to violence, trauma, and high levels of stress (Carleton et al., 2020). Correctional officers experience a disproportionately high prevalence of mental health challenges compared to the general population. These challenges include conditions such as PTSD, anxiety, depression, and substance abuse (Carleton et al., 2020).

The mental well-being of correctional officers is crucial for their ability to perform their duties effectively. Mental health challenges can significantly negatively impact their work, including their safety, decision-making, interactions with inmates, overall job performance, productivity, and retention rates (Fusco et al., 2021). Furthermore, mental health struggles among correctional officers can create financial burdens for correctional facilities.

This literature review involved comprehensively exploring current knowledge regarding mental healthcare and psychological help-seeking behavior among correctional officers. Specifically, focus on identifying key stressors and risk factors inherent to correctional settings that contribute to development of mental health struggles among this population. I also explore significant barriers that prevent correctional officers from seeking professional help for their mental health concerns.

The review is structured to provide a comprehensive understanding of the topic. Following this introduction, I examine correctional officers' mental health challenges,

exploring significant stressors and risk factors in correctional environments. Next, I analyze barriers and facilitators interms help-seeking behaviors among this population.

I then evaluate existing mental healthcare programs within correctional settings. I discuss strategies for improving mental healthcare and help-seeking behavior among correctional officers. Finally, I highlight areas for future research and conclude by summarizing key findings and discussing their implications for correctional officers' mental health. By exploring these key areas, I aim to contribute to a deeper understanding of mental health challenges faced by correctional officers and provide valuable insights for improving their mental healthcare services.

### **Literature Search Strategy**

A comprehensive search of online databases was conducted to identify relevant research on mental healthcare and psychological help-seeking behavior among correctional officers. I used the following search engines: Google Scholar, Academic Search Complete, SAGE Journals, PubMed, JSTOR, and PsycINFO.

I used keywords and terms to capture pertinent articles. I used the following key terms: *mental health*, *psychological help-seeking*, *correctional officers*, *jail officers*, *PTSD*, and, *stress*, *burnout*.

Given the limited research specifically focused on correctional officers seeking psychological help, this review intentionally broadened its scope to include more studies. I aimed to address research on general help-seeking behaviors and mental health perceptions within the correctional officer populations, ensuring a comprehensive

understanding of the factors influencing their mental health and the effectiveness of existing support mechanisms.

I discussed high incidence of stress, PTSD, and burnout among correctional officers, which are exacerbated by unique demands of their roles within highly stressful and dangerous environments. I further examined the effectiveness of counseling and the general attitudes toward seeking psychological help, highlighting the outcomes of various counseling approaches and the cultural perspectives of law enforcement on mental health care.

Systemic and administrative barriers that hinder effective delivery of mental health services for correctional officers were identified, including resource limitations, policy constraints, and a lack of organizational support. I also addressed stigma associated with mental health struggles within law enforcement communities, which often impedes officers from seeking necessary help. This stigma, along with other barriers such as confidentiality concerns and perceived career impacts, contributes to underuse of available mental health resources.

Additionally, the literature I explore various personal, social, and organizational factors influencing officers' decisions to seek or avoid help. These factors include the impact of workplace culture, peer influence, and personal acknowledgment of mental health needs. I also critically assess the accessibility and availability of mental health services to determine how effectively these resources meet needs of correctional officers and the extent to which they are aware of and can use these services.

Personal beliefs about mental health and their impact on help-seeking behavior are explored, including how broader social and cultural narratives shape these beliefs. Finally, I apply the COR theory to better understand how loss or threat of loss of resources can lead to occupational stress among correctional officers. This theory was instrumental in terms of addressing specific resources that, if protected or enhanced, could mitigate occupational hazards that are associated with correctional work.

### **Theoretical Framework**

The COR theory posits that individuals strive to gather, maintain, and safeguard resources they perceive as valuable (Hobfoll, 1989). These resources can be categorized into four types: object resources (physical items), condition resources (personal attributes or conditions), personal resources (individual characteristics), and energy resources (time, money, knowledge). According to the COR theory, stress arises when individuals perceive a threat of losing these resources, have already lost them, or have not gained sufficient resources despite their efforts.

These resources can be categorized into four primary types: object resources (physical items), condition resources (personal attributes or states), personal resources (individual characteristics), and energy resources (time, money, knowledge). Each of these resource types plays a significant role in influencing mental health care and the likelihood of seeking psychological help, especially in high-stress professions such as correctional officers.

Object resources are tangible assets essential for survival and well-being, such as tools, equipment, and physical surroundings. In the context of correctional officers, these



resources might include protective gear, secure facilities, and adequate operational equipment. The presence of adequate object resources can help mitigate the physical risks associated with the job, thereby reducing stress levels and making officers more open to recognizing and addressing their mental health needs. Conversely, the absence or inadequacy of these resources can elevate both perceived and actual threats to personal safety, leading to heightened stress and anxiety. This heightened state of stress may result in officers neglecting or postponing psychological help-seeking, as their focus remains on immediate physical safety concerns (Hobfoll et al., 1990). For instance, an officer working in an under-resourced facility with insufficient protective equipment might prioritize physical survival over mental health, delaying the pursuit of counseling or other mental health services.

Condition resources refer to valued states or situations, such as employment, social support, and relationships. For correctional officers, condition resources include job security, a supportive work environment, and positive relationships with colleagues and supervisors. These resources are critical for maintaining psychological well-being and directly impact an officer's willingness and ability to seek psychological help. A supportive work environment, for example, can encourage help-seeking behaviors by normalizing mental health care and reducing stigma. In contrast, the threat of losing these condition resources, such as experiencing job insecurity or working under unsupportive management can significantly increase stress levels and make officers hesitant to seek help, fearing that it might negatively impact their career or social standing within the workplace (Hobfoll & Wells, 1998; Lambert et al., 2010). For example, an officer who

fears that seeking mental health services might be perceived as a sign of weakness or instability could avoid accessing these services, even when facing severe stress or psychological distress.

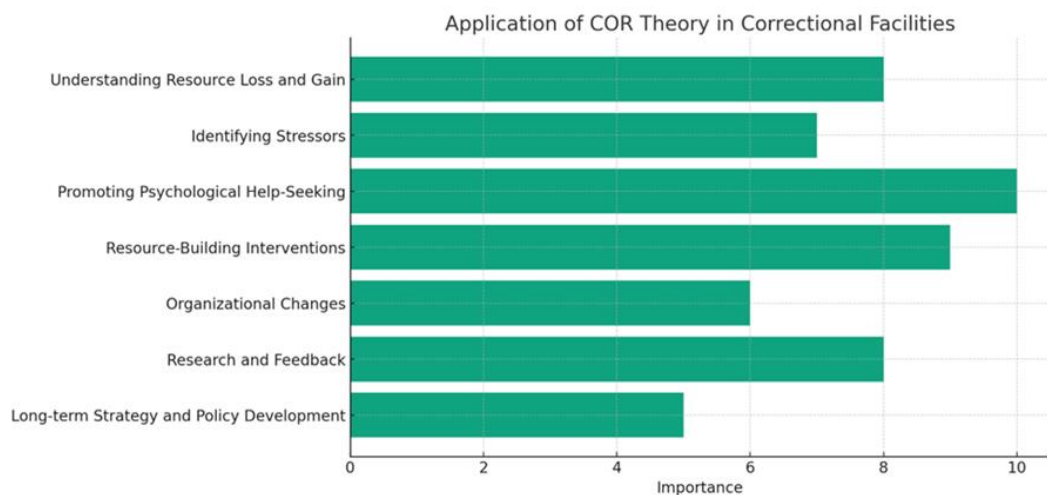
Personal resources encompass individual traits, skills, and attributes that contribute to an individual's ability to cope with stress, such as self-esteem, resilience, and emotional stability. These resources are particularly important for correctional officers, who regularly confront stressful and potentially traumatic situations. High levels of personal resources can significantly enhance an officer's ability to recognize the need for psychological help and to seek it out proactively. Officers with strong resilience and emotional regulation are more likely to engage in self-care practices, including seeking counseling or therapy when needed. Conversely, officers with lower levels of these resources may struggle with recognizing when help is necessary or may doubt their ability to benefit from psychological interventions, increasing their vulnerability to mental health challenges such as anxiety, depression, and burnout (Hobfoll, 2001; Wright et al., 2020). For instance, an officer with high self-esteem might view seeking mental health care as a proactive and positive step, whereas an officer with low self-esteem might avoid seeking help due to feelings of inadequacy or fear of judgment.

Energy resources involve the physical and psychological capacities that individuals invest in the pursuit and protection of other resources. These include time, money, and effort, all of which are finite and can be rapidly depleted in high-demand situations. Correctional officers often face significant demands on their energy resources due to long shifts, overtime, and the need to maintain constant vigilance. The depletion of

these resources can lead to fatigue, burnout, and a diminished capacity to cope with stress, which can, in turn, reduce the likelihood of seeking psychological help (Hobfoll & Schumm, 2009; Maslach & Leiter, 2016). When energy resources are low, the effort required to seek psychological help may seem overwhelming, causing officers to delay or avoid accessing mental health services even when they are aware of their needs. For example, an officer who is exhausted from excessive overtime may feel too physically and mentally drained to attend therapy sessions, despite recognizing the importance of such care for their overall well-being (Lee & Kim, 2019).

### Figure 1

#### *Application of the COR Theory in Correctional Facilities*



### Resource Loss and Gain

COR emphasizes the dynamic balance between the loss and gain of resources, which is crucial for understanding the mental health challenges faced by correctional officers. Essential resources for these officers include emotional stability, support from

friends and family, and respect in the workplace. Identifying resources that are at risk or missing is critical for creating targeted mental health programs that address the specific needs of officers. For instance, if an officer feels isolated at work (lacking social support) or undervalued (missing professional respect), targeted interventions could include peer support groups to foster connections or recognition programs to boost morale. Understanding which resources are threatened or lacking is vital for developing psychological interventions tailored to the officers' unique challenges (Hobfoll & Freedy, 2017).

COR theory also highlights how specific occupational stressors contribute to the rapid depletion of resources. For correctional officers, these stressors include safety concerns, exposure to violence, long working hours, shift work, lack of control, and moral dilemmas. These stressors can accelerate resource loss, leading to mental health struggles such as burnout, PTSD, and depression (Hobfoll & Freedy, 2017). Addressing these stressors is essential for developing effective mental health interventions, as they directly impact the officers' ability to maintain and replenish their psychological resources.

### **Application to Correctional Officers**

Correctional officers operate within environments characterized by persistent stress and the potential for resource loss, as described by COR theory (Hobfoll, 1989). Emotional stability, a key personal resource, is frequently challenged due to regular exposure to violence and trauma. Physical safety, considered a condition resource, is often compromised, especially in situations involving inmate aggression. Additionally,

social resources, such as support from colleagues and supervisors, may be lacking in understaffed facilities, exacerbating feelings of isolation and stress among officers.

The emotional resilience of correctional officers is often tested through repeated exposure to stressful situations, such as managing inmate violence or dealing with aggressive behavior. Over time, these experiences can lead to the erosion of emotional stability, contributing to burnout, PTSD, and anxiety (Violanti & Aron, 2020; Blevins et al., 2014). In particularly traumatic incidents, such as an inmate suicide, officers may rely on the emotional support of their peers to maintain psychological balance and prevent further deterioration of mental health.

The constant need for vigilance due to potential physical altercations with inmates can result in chronic stress and hypervigilance, further depleting energy resources. This ongoing threat to physical safety can elevate overall stress levels, leading to exhaustion and a diminished capacity to cope with occupational demands. For example, during high-intensity events like a prison riot, officers depend on instrumental support from their peers and supervisors to manage the crisis effectively and ensure safety. However, in situations where social support is lacking, such as in understaffed facilities, the absence of peer and supervisory support may lead to feelings of helplessness and further depletion of psychological resources (Ricciardelli et al., 2020).

The stigma associated with seeking psychological help presents another significant challenge. Within correctional facilities, a culture may exist that discourages help-seeking due to fears of being perceived as weak or unfit for duty. This stigma, along with other barriers such as concerns about confidentiality and the potential impact on

career advancement, may prevent officers from accessing necessary mental health resources (Karaffa & Koch, 2016; Williams et al., 2022).

Several strategies have been identified to address the resource depletion experienced by correctional officers. These include resilience training programs that focus on emotional regulation and coping strategies, stress management workshops, and peer support programs designed to foster a supportive environment (Fusco et al., 2021; Denhof & Spinaris, 2016). Organizational changes, such as adjusting work hours and providing career development opportunities, can also play a crucial role in enhancing resource availability and supporting the mental well-being of correctional officers (Carleton et al., 2020).

Continuous assessment and research into the barriers correctional officers face in seeking psychological help are essential for developing effective interventions. Understanding these challenges allows for the creation of support mechanisms tailored to the specific needs of officers, potentially improving their mental health outcomes and overall job performance (Bower, 2013).

Finally, the application of COR theory in the context of correctional officers underscores the importance of resource management in mitigating occupational stress. Protecting and enhancing key resources—such as emotional stability, physical safety, and social support—may reduce the occupational hazards associated with correctional work. This theoretical approach provides a comprehensive framework for understanding the complexities of correctional officers' mental health challenges and offers a foundation for developing effective support strategies (Hobfoll et al., 2018).

### **Stigma and Help-Seeking Behavior**

Stigma associated with seeking psychological help is a significant barrier to resource acquisition for correctional officers. The culture within correctional facilities often discourages help-seeking due to fears of being perceived as weak or unfit for duty (Hobfoll et al., 2018). This stigma can prevent officers from accessing the mental health resources they need. Education and normalization of mental health care within correctional environments are essential to mitigate this barrier and encourage officers to view help-seeking as a resource-building strategy.

### **Resource-Building Interventions**

Several strategies can be implemented to build and replenish lost resources among correctional officers. These strategies focus on enhancing resilience, improving coping skills, managing stress effectively, and providing access to mental health professionals. Resilience training programs can teach officers coping skills and emotional regulation techniques, while stress management workshops can provide tools and strategies for managing stress. Additionally, individual and group therapy counseling services, offered through confidential access to mental health professionals, can address specific psychological needs. Peer support programs can also create a supportive environment where officers can share experiences and exchange coping mechanisms (Chen et al., 2015).

### **Organizational Change and Support**

Organizational policies play a critical role in influencing the availability and accessibility of resources for correctional officers. Implementing changes that address

work hours, and career advancement opportunities, acknowledging the challenges faced by officers can significantly enhance their mental health and well-being. Adjusting work hours can help reduce fatigue and burnout while providing career advancement and professional development opportunities can offer a sense of accomplishment and growth. Recognizing the unique challenges of correctional work and prioritizing mental health within the organization demonstrates support and understanding, which can empower officers to seek the help they need (Agrawal & Mahajan, 2021).

### **Continuous Assessment and Research**

Continual assessment and research into the perceptions and barriers faced by correctional officers regarding psychological help-seeking are essential for developing effective support programs and interventions (Hobfoll et al., 2016). By understanding the specific challenges Officers face, interventions can be tailored to address their unique needs.

### **Long-Term Strategic Planning and Policy Development**

Utilizing insights from COR theory, long-term strategic planning, and policy development are crucial for sustainable resource management in correctional facilities. Strategies should address current mental health struggles and proactively prevent future resource loss among correctional officers (Halbesleben et al., 2014). This approach encompasses immediate intervention strategies and broader policy and systemic changes to support correctional officers' mental health and well-being.

The application of COR theory in correctional officers' mental health context offers a comprehensive framework to understand and address the unique challenges these



professionals face. Halbesleben et al. (2014) explain that by focusing on resource loss and gain, identifying specific stressors, combating stigma, developing resource-building interventions, and implementing organizational changes, this framework provides a holistic approach to enhancing mental health wellness. Continuous research and adaptive policy development based on COR theory are integral to this process, ensuring that interventions remain practical and relevant to the evolving needs of correctional officers.

### **Literature Review**

Correctional officers face an array of stressors that have profound effects on their mental health. The nature of their work, involving the maintenance of order and safety within correctional facilities, exposes them to chronic stress, violence, trauma, and organizational challenges, which contribute to significant mental health issues. This chapter reviews the literature on the mental health challenges faced by correctional officers, examining factors such as high-stress environments, exposure to violence and trauma, extended work hours and shift work, and the influence of organizational culture on their well-being.

### **Mental Health Challenges in Correctional Officers**

Correctional officers operate in inherently stressful environments. Their duties, which include managing inmates with complex psychological and behavioral issues, often under conditions of understaffing and limited resources, significantly contribute to higher rates of mental health disorders among this population, including PTSD, anxiety, depression, and substance use disorders (Carleton et al., 2018; Dowden & Tellier, 2004; Ricciardelli et al., 2020).

The constant exposure to potential violence and the need to maintain vigilance create an environment where correctional officers are continuously on edge. This hypervigilance often leads to significant psychological strain, resulting in symptoms of anxiety and burnout. The pressure to control and manage volatile situations leaves little room for officers to process their emotions, further exacerbating the risk of mental health problems (Armstrong & Griffin, 2004; Fusco et al., 2021).

### **High-Stress Environment**

Correctional facilities are characterized by chronic stress due to the high demands placed on officers. The requirement to manage large numbers of inmates, often with insufficient staffing and resources, significantly contributes to the stress levels experienced by correctional officers. This stress is compounded by the constant threat of violence, both verbal and physical, from inmates. The unpredictable nature of the work, where officers must always be prepared to respond to emergencies, creates a state of ongoing psychological tension (Finney et al., 2013; Ricciardelli et al., 2020).

Research indicates that these conditions lead to the development of chronic stress-related disorders, including anxiety and depression. Correctional officers often report feeling overwhelmed by the demands of their job, leading to a decline in their mental health and overall job satisfaction. The lack of adequate support and resources within the correctional system exacerbates these issues, making it difficult for officers to cope with the stressors they face daily (Carleton et al., 2018).

### ***Exposure to Violence and Trauma***

Correctional officers are frequently exposed to violent and traumatic events, which are significant contributors to the development of PTSD and other trauma-related disorders. The nature of their work often involves witnessing or directly intervening in violent altercations between inmates, as well as dealing with incidents of self-harm or suicide attempts among the incarcerated population (Armstrong et al., 2015; Fusco et al., 2021).

The cumulative impact of such exposure leads to emotional exhaustion and burnout, where officers may become desensitized to violence as a coping mechanism. This desensitization, while serving as a short-term solution to managing trauma, leads to long-term psychological issues, including detachment and a reduced capacity to engage empathetically with both inmates and colleagues (Slate & Vogel, 1997; Violanti, 2017). Addressing these traumatic experiences through appropriate mental health interventions is critical to preventing the progression of PTSD and related disorders (Kitaeff, 2019).

### ***Extended Work Hours and Shift Work***

Correctional officers often face demanding schedules that include extended work hours and irregular shifts, which exacerbate the stress inherent in their profession. Night shifts, in particular, disrupt normal sleep patterns, leading to chronic sleep deprivation. This disruption is strongly associated with impaired cognitive function, increased risk of chronic illnesses, and heightened vulnerability to mental health issues, including depression and anxiety (Violanti et al., 2017; Ricciardelli et al., 2020). The physical and psychological toll of long working hours, combined with inadequate rest, further

intensifies the effects of other stressors in correctional work. The resulting sleep deprivation and elevated stress levels can significantly impair an officer's ability to perform their duties, raising the likelihood of errors and accidents on the job. The literature underscores the importance of addressing scheduling practices within correctional facilities to mitigate these adverse health outcomes and enhance the overall well-being of correctional officers (Purba & Demou, 2019; Carleton et al., 2020).

### ***Organizational Culture and Stigma***

The organizational culture within correctional facilities plays a pivotal role in determining the mental health outcomes of correctional officers. A culture that stigmatizes mental health issues or discourages help-seeking behavior can prevent officers from accessing the support they need. This stigma is often entrenched in a culture of stoicism and self-reliance, where admitting to mental health struggles is perceived as a sign of weakness (Soomro & Yanos, 2019; Ricciardelli et al., 2020). Officers may fear that seeking help for mental health issues could jeopardize their job security or lead to negative perceptions from colleagues and superiors. This fear, coupled with a lack of awareness about available mental health resources, results in untreated mental health conditions that further impair job performance and well-being (Trounson & Pfeifer, 2017; Fusco et al., 2021). The literature highlights the need for organizational changes that foster a supportive culture, where mental health is openly discussed, valued, and where officers are encouraged to seek help without fear of stigma or repercussions (Brower, 2013).

### ***Burnout***

Burnout is a prevalent issue among correctional officers, manifesting as emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment. Emotional exhaustion stems from the constant emotional demands of the job, leaving officers feeling drained and unable to cope effectively with their responsibilities (Maslach & Leiter, 2016). Depersonalization, a key component of burnout, involves a cynical and detached attitude toward inmates and colleagues, often as a defense mechanism against the emotional toll of the job. This detachment diminishes empathy and reduces the quality of interactions with inmates, potentially compromising rehabilitation efforts within the facility (Maslach & Jackson, 1981). The third aspect of burnout, reduced personal accomplishment, reflects a decline in feelings of competence and achievement in one's work, further contributing to job dissatisfaction and turnover intentions (Penz et al., 2017; Carleton et al., 2020).

Burnout is recognized as a multidimensional concept encompassing physical fatigue, emotional exhaustion, and cognitive exhaustion. It is defined as a condition characterized by emotional fatigue, physical weariness, and mental exhaustion resulting from prolonged, unmanaged work-related stressors (Shirom & Melamed, 2006). The concept aligns with the view that burnout is a persistent and harmful state of mind related to work, marked by emotional exhaustion that causes distress, impairs effectiveness, reduces motivation, and leads to dysfunctional attitudes and behaviors in the workplace (Nemutandani et al., 2022).

Building on Christina Maslach's foundational work, burnout is identified by persistent fatigue, pervasive feelings of hopelessness, and despair, which are often observed in correctional staff and can lead to premature illness and death (Jessiman-Perreault et al., 2021; Kelly, 2018; Spinaris, Denhof, & Kellaway, 2012; Turecki et al., 2019; U.S. Department of Health and Human Services, 2020; Wolf, 2013). The formulation of the burnout construct, which identifies physical fatigue, emotional exhaustion, and cognitive weariness as its three facets, is rooted in the COR theory (Grossi et al., 2015). This theory emphasizes the complex interplay of physical, emotional, and cognitive factors contributing to burnout.

Studies have highlighted the impact of environmental factors on mental health, which can negatively affect self-perception and lead to aversion toward one's occupation, existence, and interpersonal relationships (Stoyanova & Harizanova, 2016). Burnout syndrome, a work-related ailment, underlines the relationship between health status factors and difficulties in managing life. Emotional exhaustion, cynicism, and reduced professional efficacy associated with burnout are recognized in the International Classification of Diseases (ICD) as conditions of severe exhaustion (Stoyanova & Harizanova, 2016). Hoppen et al. (2017) emphasized the detrimental impact of burnout on cognitive performance, suggesting that it could curtail professional capabilities.

Correctional officers, who frequently interact with traumatized inmates, often experience profound alterations in their perceptions of work, leading to psychological distress. Managing incarcerated individuals with complex trauma-related symptoms can result in emotional and physical exhaustion, mirroring the symptoms experienced by the

inmates under their care (Boulanger, 2018). Addressing burnout is critical, not only for preserving the mental and physical well-being of employees but also for maintaining a steady and productive workforce. By understanding and addressing burnout, organizations can potentially reduce employee turnover, improve job satisfaction, and sustain productivity and efficiency within their teams.

### *Correctional Fatigue*

Correctional fatigue significantly affects the coping strategies and overall well-being of correctional professionals, leading to negative personality alterations and fostering a stigma that overlooks their comprehensive well-being (Kelly, 2018). Research indicates that correctional officers experience heightened stress levels compared to many other professions, suggesting an inherently more stressful nature of their work (Denhof & Spinaris, 2016; Haas, 2015; Konda, Reichard, & Triesman, 2012; Violanti, 2017). Haas (2015) provided evidence that job-related stress and exhaustion among correctional officers exceed those experienced by other first responder groups, such as police officers.

This overwhelming stress is often linked with mental and emotional disorders among correctional officers (Brower, 2013). A significant body of research explores psychosocial risk factors, occupational stress within correctional settings, and the influence of stigma on the likelihood of seeking treatment for mental health struggles among law enforcement and military personnel. These stressors lead to detrimental effects, such as decreased psychological well-being and increased issues related to depression and anxiety (Gillespie, 2016). Research by Denhof and Spinaris (2016), Haas

(2015), and Brower (2013) indicates a high prevalence of mental health conditions such as depression, suicide, anxiety, and PTSD among correctional officers.

### ***Turnover***

Turnover intention in corrections is defined as a cognitive process involving thoughts of departure, planning to stay or leave, exploring alternative employment, and a desire to exit the current position (Mobley et al., 1979). Factors such as reduced job satisfaction, heightened stress, burnout, and increased perceptions of job danger are linked to turnover intentions among correctional officers (Ferdik, 2016; Ferdik & Smith, 2015; Ferdik, Smith, & Applegate, 2014; Lambert, 2006).

Studies on the outcomes of turnover intentions suggest that contemplating leaving a job may result from indifference toward the current job and significant disengagement from work responsibilities (Lachman & Diamont, 2007). Employees considering voluntary departure and exploring other job opportunities often become disengaged from their current roles, lacking the motivation to achieve their objectives.

Phelps (2011, 2012) noted that strong intentions to leave employment negatively impact job commitment, involvement, and satisfaction. Consequently, correctional officers contemplating leaving their jobs and potentially seeking alternative employment may become disengaged from the institution's mission.

Most correctional facilities uphold the rehabilitative ideals of inmate reform, requiring officers to maintain positive views of inmates, interact with them, act as counselors when necessary, and promote their active participation in treatment programs (Phelps, 2011, 2012). However, officers contemplating alternative employment may hold



different intentions. As they disengage from their current role, they might lose interest in inmate reform, personal interaction with inmates, providing assistance, or even pursuing the institution's goals.

Job withdrawal can arise from the desire to leave a job, which may compromise the quality of work performed by officers and their motivation to engage with inmates. Officers who interact negatively with inmates, resulting in unfavorable perceptions, might actively seek alternative employment. Consequently, they might advocate for stricter and more severe punishment for offenders. Ultimately, turnover intentions may lead to a misalignment between officers' immediate objectives and their inclination toward stricter treatment of detainees or even complete disengagement from the workforce.

### ***Life and Death on the Job***

In certain high-risk professions, such as law enforcement and military service, the inherent risk of encountering violent death constitutes a critical aspect of the job. Among correctional officers, specific factors appear to predispose some individuals to a heightened likelihood of injury or death during their duties compared to their colleagues. These factors can be broadly classified as "overconfidence" or "excessive leniency" (Blum, 2000).

Officers exhibiting overconfidence are often characterized by an abundance of self-assurance, particularly during routine inspections or responses to critical incidents. This overconfidence can lead to complacency and a tendency to underestimate potential dangers, assuming they can control inherently unpredictable and risky situations (Blum,

2000). The consequences of such behavior can range from minor oversights to severe injuries or even fatalities if threats are not accurately assessed and effectively managed.

Conversely, officers who demonstrate excessive leniency may exhibit extreme sympathy or leniency, which could undermine their ability to assert authority or respond decisively during challenging situations. Such officers might struggle to establish their authority when required, potentially leading to a lack of respect from those they oversee and increasing their risk of harm (Blum, 2000). This lack of control over potentially hazardous situations places these officers at a higher risk of injury.

Konda, et al. (2013) highlighted the occupational hazards faced by correctional officers, including significant risks of injuries from fatal and nonfatal assaults, transportation-related accidents, and overexertion. While preventive measures are implemented to reduce inmate assaults, strategies to prevent other types of work-related injuries remain relatively infrequent. Furthermore, the National Institute of Corrections suggests that adherence to optimal operational procedures, including ensuring access to necessary medical and mental health care services provided by qualified personnel, is essential for mitigating these risks.

Correctional staff also exhibit an alarmingly elevated risk for suicide, a trend that is particularly prominent among female personnel (Violanti, 2017). Violanti (2017) and Zimmerman, Fridel, and Frost (2023) noted that factors contributing to this increased risk include the intense stress associated with their jobs, such as regular exposure to violence and trauma, and potentially limited access to mental health resources. The persistent

threat and stress can lead to various mental health struggles, including depression and anxiety, which may ultimately contribute to a higher suicide risk.

Although these classifications provide some insight, it is crucial to recognize that each officer's risk profile is unique and can be influenced by additional factors. These factors may include the officer's training, experience, personal temperament, the specific circumstances they encounter, and the organizational cultures and practices within their institutions. Therefore, a more nuanced understanding of these risks and their mitigation strategies is vital for enhancing officer safety in these high-risk occupations.

### *Divided Loyalties*

The law enforcement culture often fosters strong bonds and a sense of unity among officers, creating an exclusive brotherhood that frequently separates members from non-members (Abraham & Heath, 2016; Corrigan, Kosyluk, & Rusch, 2013; Jennings, 2015; Lannin et al., 2016; Maier et al., 2013; Steinkopf, 2015). This inward-oriented dynamic can sometimes result in estrangement between officers and their spouses, potentially triggering resentment as officers may appear more dedicated to their colleagues than to their spouses, partners, or families.

This dynamic can initiate a harmful cycle where perceived bitterness from the spouse further distances the officer. As a result, the officer may devote more time to work and less to home life, thereby intensifying the potential for relational discord. This cycle could adversely affect the officer's relationships, mental health, and job performance.

For mental health providers, understanding this dynamic is essential for designing interventions and support structures to prevent such tensions from escalating (Abraham &

Heath, 2016; Corrigan, Kosyluk, & Rusch, 2013; Jennings, 2015; Lannin et al., 2016; Maier et al., 2013; Steinkopf, 2015).

### ***Extreme Stress Management and Emergencies***

Professions that involve high-stress environments, such as law enforcement, emergency services, disaster management, the military, correctional institutions, and healthcare, often serve as primary sources of stress (Kitaeff, 2019). In these sectors, stress frequently involves making life-or-death decisions, which can amplify the work-related stress experienced by professionals.

In contrast, sectors such as emergency services, sports, and entertainment, where maintaining optimal performance under extreme stress is essential, have implemented training focused on managing stress in high-pressure situations. Resilience, or the capacity to endure and adapt to stressful conditions, is fundamental in these high-performance sectors. It empowers professionals, including correctional officers, police officers, emergency responders, and soldiers, to operate at peak performance levels, even in the face of intense stress and competition (Kitaeff, 2019).

Most stress management programs primarily focus on mental and physical relaxation techniques, aiming to help individuals prepare for or cope with the aftermath of traumatic experiences. Despite the intrinsically stressful nature of their work, there has been relatively less emphasis on training correctional personnel, including correctional officers, to manage stress during critical incidents or life-threatening confrontations.

### **Corrections and Effects on Officers' Mental Health**

Correctional officers face numerous occupational risks due to the stressors inherent in their professional responsibilities, both within and beyond their work environments. These hazards range from injuries sustained during confrontations with aggressive inmates to the social stigma associated with seeking mental health support, which often limits the availability and adequacy of social services for officers (Denhof, Spinaris, & Morton, 2014; Brower, 2013).

Officers experiencing severe symptoms of PTSD are significantly more vulnerable to workplace violence, injuries, and fatalities. Additionally, these individuals often exhibit elevated levels of depression, anxiety, and burnout, which contribute to increased absenteeism and reduced job satisfaction (Alexandre, 2012; Benetti, 2018; Violanti, 2017). Benetti (2018) further posits that the greater the incongruence between an individual and their work, the higher the likelihood of experiencing exhaustion.

The presence of psychosocial risk factors is particularly pronounced among staff who have direct interactions with inmates. Correctional officers face occupational hazards such as heightened risks of illness, including blood-borne and airborne diseases transmitted by inmates (Brower, 2013; Konda, Reichard, & Tiesman, 2012). For instance, Violanti (2017) highlights the elevated risk of disease transmission, such as HIV, from inmates, which exacerbates chronic stress among officers. The literature also raises concerns regarding occupational stress (Elliot et al., 2015; Lambert, Barton-Bellessa, & Hogan, 2015; Wade et al., 2015). This issue is particularly troubling given that the AIDS rate among U.S. prison inmates exceeds the national average by over 25 times.

Correctional staff frequently witness or endure violent incidents, injuries, or deaths, especially those in close proximity to inmates (Violanti, 2017). These traumatic events can include physical assaults, the discovery of deceased or disfigured bodies, threats of death or bodily harm, riots, and other potentially fatal occurrences. Over time, recurrent exposure to critical incident stress (CIS), combined with standard work-related stress, can produce immediate or cumulative effects, sometimes emerging years after the incident (Alexandre, 2012).

Brower (2013) identifies a critical challenge faced by correctional officers: the difficulty in locating confidential service providers capable of addressing their daily stressors (Kitaeff, 2019; Konda, Tiesman, Reichard, & Hartley, 2013). The perceived scarcity of resources, particularly when contrasted with the extensive services available to inmates, can intensify feelings of neglect among officers. The constant exposure to trauma inherent in correctional settings distinguishes these environments as uniquely hazardous compared to most other professions (Denhof & Spinaris, 2016; Haas, 2015; Violanti, 2017).

Limited research has been conducted on the mental health perceptions and help-seeking behaviors of correctional officers. Prior studies have highlighted the distinct stressors and risk factors that these officers face, facilitating the development of specialized interventions and strategies to protect their health and well-being (Denhof & Spinaris, 2016; Elliot et al., 2015; Haas, 2015; Lambert, Barton-Bellessa, & Hogan, 2015; Tanigoshi, Kontos, & Remley, 2008; Wade et al., 2015). Correctional officers are particularly susceptible to interpersonal problems, suicide, post-traumatic stress

symptoms, impulsivity, divorce, domestic violence, and marital discord, as noted by Elliot et al. (2015).

Lifestyle-related illnesses, such as cardiovascular disease, cancer, diabetes, obesity, ulceration, cirrhosis, and chronic lower back pain, are also prevalent among correctional officers (Vasileiou et al., 2018). Stress-related issues negatively affect job performance, leading to increased absenteeism, attrition, and decreased life expectancy (Denhof & Spinaris, 2016; Haas, 2015; Elliot et al., 2015; Wade et al., 2015; Bower, 2013).

Correctional officers, who are frequently exposed to constant stress and high-risk situations, require robust mental health support and resources. Emotional labor is a significant component of their daily experiences, and if unmanaged, it can lead to stress, burnout, and related challenges (Karaffa & Koch, 2016). Several studies underscore the necessity for correctional institutions to recognize the emotional demands on officers and to provide supportive measures for their mental health (Tanigoshi, Kontos, & Remley, 2008; Haas, 2015; Elliot et al., 2015; Lambert, Barton-Bellessa, & Hogan, 2015; Wade et al., 2015; Denhof & Spinaris, 2016).

Current research indicates a dearth of information on the mental health wellness of correctional officers, their approaches to seeking psychological help, and how they manage their mental health. This research explores the major predisposing factors that affect correctional officers seeking mental health treatment. The findings align with the identified culture of stigma and fear that influences help-seeking behaviors. Each participant's perception of mental health care and the factors influencing their decision to

seek help are unified in their conceptualization of health and well-being, the barriers to utilizing mental health services, and the impact of the outcomes. Correctional culture may continue to strongly influence utilization patterns, but the unifying recommendations for changes to correctional mental health were clearly articulated.

### **Help-Seeking Behaviors among Officers**

Despite the significant mental health challenges faced by correctional officers, many are reluctant to seek help. This section explores the key barriers that prevent officers from accessing mental health services and support. A pervasive barrier to help-seeking behavior is the stigma associated with mental illness. Trounson and Pfeifer (2017) explain that the culture within correctional facilities can be unforgiving, often portraying mental health struggles as a sign of weakness or a character flaw. Officers may fear being ostracized by colleagues or superiors who might view them as unreliable or unfit for duty. This fear is exacerbated by a lack of open communication about mental health within the workplace.

Confidentiality concerns further complicate the issue (Trounson & Pfeifer, 2017). Officers may worry that their mental health history could be disclosed to others, potentially impacting their career or jeopardizing their ability to carry a firearm. Instances of confidentiality breaches, even unintentional ones, can erode trust and discourage help-seeking behavior. The correctional profession traditionally emphasizes strength, self-reliance, and emotional control. This representation can be particularly strong for officers who identify with the "tough guy" persona often associated with correctional work. Seeking help for mental health concerns can be seen as contradictory to this image,



leading to feelings of shame or a fear of being perceived as less capable (Wills et al., 2021).

The emphasis on toughness can create a culture where officers suppress their emotions and avoid discussing their struggles, leading to isolation and a sense that they must handle everything independently. Access to confidential mental health services within correctional facilities can also be limited. Officers may be discouraged from seeking help outside the facility due to concerns that external providers may not understand the unique challenges of correctional work, such as exposure to violence, trauma, and the constant pressure of maintaining order in a high-stress environment (Wills et al., 2021).

Correctional facilities may have limited resources to allocate towards mental health services, restricting the availability of on-site mental health professionals or limiting the types of services offered. Long wait times for appointments can further discourage officers from seeking help, especially if they are experiencing acute mental health symptoms.

Correctional officers may also hold negative perceptions of mental health services. They may lack trust in the ability of mental health professionals to understand the specific challenges they face or question the effectiveness of available treatments. This mistrust can stem from a lack of awareness about different treatment approaches or negative experiences with mental health services in the past (Ramesh, 2022). An officer who has had a negative experience with a therapist who did not understand their profession or seemed judgmental may be reluctant to seek help again. Officers may also

be unfamiliar with different treatment modalities and may not understand how therapy can benefit them. This lack of awareness can create skepticism about the value of mental health services.

### **Factors Influencing Help-Seeking Behaviors**

While significant barriers prevent correctional officers from seeking help for mental health concerns, several factors can encourage them to overcome these obstacles and access the support they need. According to Haecker (2017), organizational policies, peer support networks, educational programs, and personal coping strategies all play crucial roles in influencing officers' decisions.

Supportive organizational policies are fundamental in creating an environment that encourages help-seeking behavior. Transparent and robust policies that guarantee the confidentiality of mental health information can alleviate officers' concerns about potential repercussions for seeking help (Haecker, 2017). Providing on-site mental health professionals or facilitating access to qualified providers outside the facility demonstrates the organization's commitment to supporting the mental well-being of its officers.

Haecker (2017) also notes that offering paid time off for mental health treatment allows officers to prioritize their well-being without jeopardizing their financial security. Additionally, developing clear protocols and support systems to ease the transition back to work after mental health leave can reduce anxiety and encourage officers to seek help when needed.

A strong network of peers and informal support systems within the correctional facility can be another significant factor influencing help-seeking behavior. Officers who

feel comfortable discussing their struggles and experiences with colleagues are more likely to seek professional help (Burns & Buchanan, 2020). Formal peer support programs can provide a safe space for officers to share their experiences, offer emotional support, and encourage help-seeking behavior. Mentorship programs that match experienced officers with recruits can create a supportive environment where new officers can learn coping mechanisms and feel comfortable discussing mental health concerns (Burns & Buchanan, 2020). Encouraging open communication about mental health within the workplace can normalize seeking help and reduce feelings of isolation among officers.

Educational and awareness programs play a vital role in promoting mental health literacy among correctional officers. By providing accurate information about mental health conditions and available treatments, these programs can reduce stigma and encourage help-seeking behavior. Training sessions, workshops, and seminars can equip officers with the knowledge and skills to recognize mental health issues in themselves and their peers and understand the importance of seeking help.

Training programs can educate officers about the signs and symptoms of common mental health conditions, such as PTSD, anxiety, and depression (O'Flaherty, 2017). Stress management workshops can equip officers with coping skills and techniques to deal with the challenges of their work environment. Programs highlighting the benefits of seeking help, such as improved job performance, stronger relationships, and enhanced overall well-being, can further encourage officers to overcome the stigma associated with mental health concerns.

While not a substitute for professional help, healthy coping strategies can play a role in managing stress and promoting mental well-being among correctional officers. Regular exercise has been shown to be an effective way to reduce stress and improve mood (O'Flaherty, 2017). Prioritizing adequate sleep can enhance emotional regulation and cognitive function. Similarly, maintaining strong social connections outside of work can provide a sense of belonging and emotional support (O'Flaherty, 2017). Additionally, practices such as meditation and mindfulness can assist officers in managing stress and improving their emotional awareness.

### **Effectiveness of Existing Programs**

While challenges abound in providing mental health care within correctional settings, several existing programs demonstrate promise. This section explores the use of evidence-based interventions, success rates, outcomes, and areas for improvement. A growing body of research emphasizes the implementation of evidence-based interventions within correctional settings. These interventions are proven effective in reducing mental health symptoms and improving overall well-being. One such program is Cognitive Behavioral Therapy (CBT). CBT helps individuals identify and change negative thinking patterns that contribute to emotional distress and is effective in treating conditions such as anxiety, depression, and PTSD (Duwe, 2017).

For correctional officers struggling with job-related stress or witnessing traumatic events, CBT can provide tools to manage their thoughts and emotions more healthily. Similarly, Dialectical Behavior Therapy (DBT) is a specialized form of CBT that teaches skills for emotional regulation, distress tolerance, interpersonal effectiveness, and

mindfulness (Galietta, 2018). These skills can benefit officers who may struggle with managing intense emotions or interpersonal conflicts within the correctional environment.

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) is another valuable intervention specifically designed to help individuals who have experienced trauma. Exposure to violence is a common experience for both inmates and correctional officers (Morgan, Ross, & Reavley, 2018). TF-CBT can help them process these experiences, develop coping mechanisms, and reduce symptoms of PTSD.

Additionally, Mental Health First Aid (MHFA) is a training program that teaches individuals how to identify the signs and symptoms of mental health conditions and provide essential support to someone in distress (Morgan, Ross, & Reavley, 2018). Equipping correctional officers with MHFA skills enables them to better recognize and respond to the mental health needs of both inmates and colleagues. Studies on the effectiveness of mental health programs in correctional settings have yielded mixed results.

Some studies have shown positive outcomes, such as reductions in mental health symptoms, improved coping skills, and decreased recidivism rates among inmates who participate in treatment programs (Morgan, Ross, & Reavley, 2018). For correctional officers, participation in programs like stress management training or group therapy can lead to reduced stress levels, improved emotional well-being, and a greater ability to manage the challenges of the job. These positive outcomes translate to a safer and more positive work environment for all correctional staff.

However, the success of these programs can be influenced by several factors. One crucial factor is the quantity and efficiency of treatment. The effectiveness of therapy often depends on the frequency and duration of sessions. Unfortunately, limited access to mental health professionals within correctional facilities can restrict the quantity and efficiency of treatment available (Shapiro et al., 2015). For example, an officer experiencing acute anxiety may benefit most from weekly individual therapy sessions, but limited resources may only allow for bi-monthly sessions.

Additionally, fidelity to the treatment model is essential. Programs are most effective when implemented with fidelity to the evidence-based model on which they are based. Inadequate training for staff delivering the interventions or a lack of supervision can compromise the program's effectiveness (Shapiro et al., 2015). Finally, the presence of co-occurring mental health and substance use disorders can complicate treatment and may require specialized interventions. For example, an inmate struggling with both depression and addiction may need a treatment program that addresses both conditions simultaneously.

### **Summary and Conclusions**

Chapter 2 included a critical examination of existing literature on the mental health challenges and psychological help-seeking behaviors of correctional officers. The chapter explored the prevalence of mental health conditions such as PTSD, anxiety, and depression, which are significantly higher among correctional officers than in the general population due to the unique and demanding nature of their work environments.

Significant gaps in mental health resources for correctional officers were also addressed. Adequate funding and staffing are crucial for developing effective mental health support within correctional facilities. These resources are essential not only for providing care but also for supporting the mental wellness of officers who often face considerable challenges in accessing mental health services due to systemic limitations. Additionally, the stigma associated with mental health within correctional environments was highlighted as a significant factor affecting officers' willingness to seek help. This stigma is compounded by cultural norms within law enforcement that often equate mental health struggles with weakness, potentially jeopardizing officers' careers if they seek help (Gendreau et al., 2017; Harari et al., 2020).

Attitudes toward mental health care and help-seeking behaviors of correctional officers were critically analyzed. The reluctance to seek help and perceptions of mental health interventions are influenced by a fear of judgment from peers and concerns about confidentiality (Gendreau et al., 2017; Harari et al., 2020). A general lack of awareness about the benefits of mental health services and the availability of such services within correctional systems further complicates this issue. Cooper et al. (2018) argued that such approaches can enhance the effectiveness of mental health services for correctional officers. Trauma-informed care involves acknowledging the frequent exposure of officers to traumatic situations and providing care that is sensitive to and informed by an understanding of trauma.

Chapter 2 provided a comprehensive synthesis of the literature regarding the mental health challenges faced by correctional officers, highlighting systemic issues

related to resource allocation, stigma, and cultural barriers that impact their help-seeking behaviors. The findings from this literature review demonstrated the need for additional research to explore the attitudes and perceptions of correctional officers regarding mental healthcare, which would be instrumental in designing interventions that address these identified barriers and improve overall mental health support within correctional environments.

Chapter 3 includes an overview of the research methodology and design, as well as the rationale. This chapter provides a detailed explanation of how the study was conducted, ensuring transparency and replicability of the research process.



### Chapter 3: Research Method

The goal of this qualitative study was to explore experiences of correctional officers in accessing mental health services in Maryland. This study aimed to understand their perceptions of mental health and their attitudes toward seeking psychological help. Karaffa and Toch (2015) noted that stigma and pluralistic ignorance significantly influence law enforcement officers' attitudes toward seeking mental health services, a factor this study investigates within the context of correctional officers.

Declining mental health wellness of officers and their approaches to seeking psychological help have been identified as critical issues. This chapter includes information about the research design, rationale, my role as the researcher, methodology, participants, recruitment criteria, data collection and analysis procedures, issues of trustworthiness, ethical considerations, and a summary.

#### **Research Design and Rationale**

This study employed the Generic Pragmatic Qualitative Research Approach (GPQRA) due to its practical applications and flexible methodology. Percy et al. (2015) highlighted GPQRA effectively generates valuable, actionable insights that inform real-world interventions. Additionally, GPQRA emphasizes the importance of generating insights that can be effectively transformed into concrete interventions, policies, or practices. This methodological focus ensures research findings are insightful and lead to positive social change.

The study identified key themes related to three primary research questions through manual coding and analysis using NVivo and NLP software. The research questions guiding this study were:

RQ1: How do factors such as stigma, coping strategies, and personal history influence correctional officers' decisions to seek psychological assistance?

RQ2: What is the impact of organizational factors, including leadership support, accessibility of mental health resources, supervisory practices, and training on correctional officers' willingness to engage with psychological support services?

RQ3: How do societal factors, including portrayal in the media, public opinion, and intervention approaches influence stigma associated with mental health struggles among correctional officers?

These questions were used to explore multifaceted influences on mental health help-seeking behaviors within correctional settings. These research questions were designed to explore the multifaceted influences on mental health help-seeking behaviors within correctional settings. The primary phenomena of interest were the perceptions of mental health service use and the psychological help-seeking behaviors of correctional officers.

### **Role of the Researcher**

In a qualitative research study, the researcher performs several critical roles, including data collection and analysis. This task is challenging as it solicits volunteers to discuss highly personal topics (Adu, 2019; Allan, 2020). The researcher's relationships with the participants were characterized by empathy.

Acknowledging the researcher's former role as a Correctional Officer, Lazzaretto-Green et al. (2011) noted that this background could influence both the researcher's and participants' perceptions, introducing reflective nuances that enhance the understanding of mental healthcare dynamics in correctional facilities. Additionally, using NLP software in data analysis helped to clarify the complexity of the participants' views and descriptions. This technological approach ensured a thorough and nuanced analysis of qualitative data, contributing to a comprehensive understanding of correctional officers' mental health and treatment experiences.

The primary responsibility of the researcher is to protect the participants and their data. As an observer-participant within the generic research framework, the researcher served as the main instrument for data gathering, analysis, and triangulation of raw data (Creswell, 2018). In conducting this study, the researcher fulfilled the roles of data collector and analyst, deriving valuable insights from the participating subjects.

During the interviews, the researcher made a concerted effort to demonstrate a strong commitment to active listening, respect, understanding, authenticity, and warmth (Adu, 2019; Creswell, 2013; Frankfort-Nachmias & Nachmias, 2015; Patton, 2002). This approach was further reinforced by the study's approval from Walden University's Institutional Review Board (IRB). The IRB approval included the proposed data collection method and the use of semi-structured interviews to guide the process. Following the IRB approval (Approval No. 05-11-22-0183206), the researcher conducted data collection in strict adherence to the guidelines established by Walden University (Walden University, 2022).

Data were collected from six correctional officers in Maryland, all with prior experience seeking treatment from a licensed behavioral health professional. Before initiating data collection, the researcher obtained informed consent from participants who voluntarily agreed to participate in the study. Utilizing informed consent forms, the researcher thoroughly explained the study's objectives, potential risks, and the benefits of their participation. The forms also informed the participants about their right to withdraw from the study at any time, whether during data collection or analysis. Additionally, the informed consent forms explicitly addressed how participants' confidentiality would be protected throughout the research and its aftermath. Each participant was provided sufficient time to consider all elements described in the informed consent forms. Data collection commenced after the participants had reviewed and signed these informed consent forms.

Individual, semi-structured interviews were conducted with each participant to gather data. The researcher's primary responsibility was to carefully select appropriate participants through purposeful sampling. This approach enabled the researcher to choose correctional officers in Maryland who had received psychological treatment from licensed mental health providers, ensuring that participants were well-aligned with the study's focus and could provide comprehensive and relevant information to address the research questions. The researcher then arranged and conducted the interview sessions, accommodating the participants' schedules for their convenience.

In generic research, one of the researcher's crucial roles is to deeply comprehend and accurately represent the participants' detailed accounts of their experiences related to

the phenomenon under study. The goal is to present findings through common themes and subthemes, as noted by Caelli et al. (2003). The researcher focused on understanding the participants' meanings and perspectives regarding their experiences with mental healthcare services. This understanding was facilitated by posing guiding questions and encouraging participants to reflect on and evaluate their experiences. In developing the data collection tool, specifically the semi-structured interview questions, the researcher followed the guidance of Adu (2019) and Percy et al. (2015) to be mindful of potential biases that could emerge during the research process and worked to mitigate them. This approach aimed to ensure a balanced and fair representation of participants' views, thereby contributing to the validity and reliability of the study's outcomes.

Interviews served as the primary instrument for data collection in this study, enabling the gathering of empirical evidence directly from participants. The data acquired through these interviews provided an unbiased representation of participants' experiences, distinctly separate from the investigator's perspective (Patton, 2002). This approach ensures that the findings accurately reflect the participants' lived experiences rather than the researcher's preconceptions.

Adu (2019) emphasizes the importance of interviews in qualitative research, particularly for researchers aiming to delve into the experiences of others. The one-on-one nature of these interviews facilitated personal interactions with each participant, allowing for the flexibility to adjust and expand questions in response to the answers received. This method ensures a deeper and more nuanced understanding of the participants' experiences and perspectives.

Frankfort-Nachmias and Nachmias (2015) highlight the significance of the researcher's familiarity with the research subject. In this study, the researcher's background as a former correctional officer provided a unique insight into the stigma associated with mental health treatment within correctional environments. This personal experience and familiarity with the culture, subculture, and prevailing attitudes toward mental health care in correctional settings were instrumental in framing the research context. However, it was essential to recognize and guard against potential biases that could impede a comprehensive understanding of the unique perspectives offered by the participants. Thus, conducting the study with impartiality, careful consideration, and thoughtfulness was paramount to maintaining the research findings' integrity and validity.

### **Methodology**

The target population for this study was present and former correctional officers in Maryland who had sought relevant behavioral health services from a licensed mental health provider in Maryland. The researcher collected data from frontline correctional officers in Maryland. Data was collected during the late phase of the COVID-19 pandemic using an online communication platform equipped with high-quality audio capabilities for virtual meetings. This setup allowed for real-time interactions with up to five participants. Additionally, a face-to-face interaction was conducted with one participant, adhering to safety protocols and enhancing the depth of data collected.

### **Sample Strategy**

Unlike probability methods such as random or stratified sampling, non-probability sampling relies on the researcher's expertise to select study components rather than using

random selection. Homogeneous sampling, a non-probability method, involves the researcher selectively choosing participants with similar characteristics for the study, such as frontline correctional officers. This subjective method is based on the relevance of the participants' experience to the study's objectives (Adu, 2019; Etikan, Musa, & Alkassim, 2016). Purposive sampling highlighted specific attributes within the target population of Correctional officers, selecting those who responded to the recruitment flyer to share their experiences in relation to the research focus (Creswell & Plano-Clark, 2011). The goal was not to generate a universally applicable sample but to emphasize specific traits that could address the research questions (Frankfort-Nachmias & Nachmias, 2015).

Building on the principles outlined by Frankfort-Nachmias and Nachmias (2015) and Vasileiou et al. (2018), which recommend a small but focused sample size for phenomenological studies, this research specifically targeted a select group of frontline correctional officers in Maryland. The study concentrated on officers with at least three years of service, aged 18 or older, aiming to gain a nuanced understanding of their mental health treatment pursuits. As noted by Etikan, Musa, and Alkassim (2016), these participants provided rich, detailed accounts that significantly deepened insights into the complex interplay of personal and professional factors influencing their help-seeking behaviors.

According to Frankfort-Nachmias and Nachmias (2015) and Vasileiou et al. (2018), a representative sample of five to ten participants would suffice for a phenomenological study. In qualitative research, smaller sample sizes are often preferred

to prioritize a comprehensive understanding. The objective was to delve into the experiences of frontline correctional officers who had served in Maryland correctional facilities for at least three years, examining their attitudes and perceptions toward pursuing mental health treatment. The selected participants contributed valuable firsthand insights and experiences (Etikan, Musa, & Alkassim, 2016).

### *Sample Size*

Generic qualitative researchers advocate for a comprehensive approach to facilitate a high-quality analysis given the number of participants. One of the critical roles of a researcher in generic qualitative research is to present a complete and detailed description of the participants' experiences concerning the phenomenon and to present the results using mutual themes and subthemes (Adu, 2019). Both Adu (2019) and Etikan, Musa, and Alkassim (2016) suggest that the saturation point is reached when no new themes or insights emerge from the data. Saturation could be achieved within the first ten planned interviews or even fewer, depending on the depth of the interviews.

### *Selection Criteria*

Specific selection criteria were essential for implementing a purposeful sampling method for this study. The focus was on evaluating correctional officers in Maryland who had firsthand experience seeking mental health services and their perspectives on help-seeking. These individuals were identified as the most suitable participants for the research, as they possessed the unique experiences necessary to address the study's research questions effectively. The selection criteria included participants' ability to



provide detailed accounts of their experiences related to the critical phenomenon of interest: the pursuit and utilization of mental health services.

Participants needed to have direct, ongoing professional interactions with incarcerated individuals. Additionally, eligibility for participation required that they had undergone at least eight therapy sessions, ensuring substantial experience in mental health service utilization to discuss. Their willingness to share these experiences and insights was also a critical factor in their selection.

### ***Participant Recruitment***

Before commencing the study, the researcher obtained approval from the Institutional Review Board (IRB). Following this approval, informed consent was sought from potential participants. Participation was entirely voluntary, focusing on individuals who were willing to participate. The informed consent forms were used to: (a) explain the study's purpose, potential risks, and benefits of participation; (b) inform participants of their right to withdraw at any point during the data collection and analysis phases without repercussions; and (c) assure participants of the confidentiality measures in place to protect their information during and after the study.

To recruit participants, the researcher utilized social media platforms such as WhatsApp and Facebook, as well as emails and text messages, to disseminate study information. Interested individuals were contacted via telephone or email and provided with detailed study information and an informed consent form. Only those who agreed to the terms outlined in the study and signed the informed consent form were scheduled for interviews.

Interviews were conducted one-on-one using semi-structured interview questions. These interviews took place online via the Zoom videoconferencing platform from the researcher's office, ensuring confidentiality. Participants chose interview times that were most convenient and private for them, and this approach also ensured that they incurred no transportation costs.

With participants' consent, the interviews were recorded to facilitate accurate transcription. This approach ensured that the data collected was comprehensive and reflected the authentic experiences and perspectives of the participants, contributing significantly to the richness and validity of the research findings.

### ***Saturation***

In this qualitative research, saturation was used as a guiding principle to determine when it was appropriate to cease data collection (Saunders et al., 2018). Saturation represents the point at which adding more participants does not yield new or additional data or insights. Glaser and Strauss (1967) first introduced the concept of data saturation in the context of grounded theory, and it has since been recognized and applied across various qualitative research methodologies.

Saunders et al. (2018) emphasize that saturation is a fundamental methodological element crucial to ensuring the comprehensiveness and validity of qualitative research. They further distinguish that achieving data saturation focuses on data generation rather than the researcher's interpretation. Hence, saturation in data collection is considered achieved when no new information emerges, irrespective of the researcher's ongoing analysis or understanding of the data.

During the study's design and implementation, the researcher accounted for the concept of saturation. Determining the sample size was not solely about numbers but also concerned the richness and depth of data each participant could provide. Adhering to the principle of saturation ensured that the phenomenon under study was thoroughly investigated without unnecessary expenditure of time and resources.

### **Instrumentation**

An open-ended question format was employed in data collection for this qualitative study, fostering exploration and allowing interviewees to express their unique perspectives with minimal restrictions. As the sole researcher, I conducted the interviews, made handwritten notes, gathered documents, and transcribed the interviews. This multi-pronged strategy aligns with the methodologies proposed by Creswell (2017, 2018), Frankfort-Nachmias and Nachmias (2015), and Patton (2002).

Instrumentation played a pivotal role in the qualitative research process. It formed the crux of the interviews, preventing the interviewer from defaulting to closed-ended questions or biased lines of inquiry. As posited by Chenail (2011), the researcher effectively assumed the role of the research instrument. However, this interaction between the researcher and the research process could potentially undermine the study's reliability.

The semi-structured interview questions were closely linked to the research questions, as the purpose of conducting these interviews was to answer the developed research questions effectively. The interview questions were formulated based on the

literature reviewed in Chapter 2, addressing the phenomena being studied, such as perceptions of mental care and psychological help-seeking among correctional officers.

The interviews were guided by the interview protocol designed by the researcher, detailed in Appendix A. The protocol consisted of 14-25 open-ended questions, ensuring consistency with the study's research problem. Additionally, demographic information was obtained from each participant, including age, gender, education, qualifications, supervisory role, and years of experience. As the investigator, the researcher formulated specific questions to structure the interview protocol guidelines.

### **Procedures for Recruitment, Participation, and Data Collection**

#### ***Procedure for Recruitment***

To recruit participants, various online and social media platforms were used to invite correctional officers to participate in a confidential audio-recorded interview study. The study aimed to gather their experiences of seeking therapy, contributing to new research on psychological help-seeking among frontline correctional officers in Maryland. The study details indicated that participation would take approximately 40-50 minutes, with the option to participate either in person or through video conferencing using an online communication platform.

It was emphasized that the researcher would not collect personal identifying information, although participants needed to meet specific criteria. These criteria included being 18 years or older, being a current or former frontline correctional officer, and having attended at least eight therapy sessions. Interested individuals were

encouraged to contact the researcher through the provided phone number or email address.

The researcher utilized a non-probability convenience sampling method due to its availability, accessibility, and ease of use. Although this method yielded five potential candidates, only one participant consented and completed the study. Since potential participants were recruited using electronic devices, estimating the sampling frame was impossible. The study was conducted under the approval of Walden University's Institutional Review Board (IRB) (Approval No. 05-11-22-0183206), following their guidelines (Walden University, 2022). Responses to the open-ended questions varied in length, ranging from a few words to several paragraphs.

### ***Participants and Data Collection***

All participants met the study's criteria: they were over 18 years old, had confirmed experience as frontline correctional officers, provided consent, and had either sought or received psychological assistance from a licensed mental health professional. Three male and three female correctional officers, both past and current, aged 18 years and older, were interviewed for this study. These participants provided detailed insights into their experiences with psychotherapy and mental health.

The data analysis process utilized manual open coding and NVivo software analysis, which facilitated the identification of patterns and themes relevant to the research questions (Adu, 2019; Creswell, 2013). To maintain reflexivity, the researcher engaged in transparent discussions to increase self-awareness and mitigate biases that could influence the analysis (Errasti-Ibarrondo et al., 2018; Van Manen, 1990, 2007).

The study targeted frontline correctional officers aged 18 and above who had therapy experience, ensuring a diverse participant pool. Interviews were conducted with six officers, allowing them to share their experiences and perspectives. The primary focus was on uncovering the officers' mental health experiences and their inherent meaning, examining the significance of their actions in recognizing and accepting behavioral health support (Smith & Osborn, 2015).

### ***Data Collection***

This study employed a meticulous data collection plan, adhering to the ethical guidelines mandated by Walden University's Institutional Review Board (IRB). The process emphasized safeguarding the personal information and identities of research participants through encrypted data storage and anonymization of participant details.

Correctional officers from Maryland who volunteered and consented to participate provided valuable insights into their professional experiences and mental health challenges. These officers were recognized for their service and willingness to engage in therapeutic interventions while managing their demanding careers, highlighting their commitment to personal growth and professional resilience (Denhof & Spinaris, 2016; Haas, 2015).

Confidentiality was a cornerstone throughout the research, ensuring that the details shared by participants about their therapeutic experiences and personal challenges remained secure. This commitment helped preserve the research's integrity and the participants' dignity (Elliot et al., 2015; Lambert, Barton-Bellessa, & Hogan, 2015).

The study aimed to investigate the mental health perceptions and counseling experiences of these officers in depth. By understanding their views and experiences, the research sought to identify effective support strategies that could be implemented within correctional systems to enhance officer well-being and operational effectiveness (Tanigoshi, Kontos, & Remley, 2008; Wade et al., 2015). This approach not only protected the participants but also ensured that the research could lead to actionable insights, fostering a supportive environment that acknowledges and addresses the psychological needs of correctional officers (Vasileiou et al., 2018).

### *Data Analysis Plan*

All participants met the study's criteria: they were over 18 years old, had confirmed experience as frontline correctional officers, provided consent, and had either sought or received psychological assistance from a licensed mental health professional. These criteria highlighted the targeted nature of the participant selection, focusing on those with direct experience in seeking psychological help. The study emphasized high integrity, transparency, and consistency, as recommended by generic qualitative methodology and Walden IRB guidelines. These traits underscored the rigor and ethical considerations integral to the research process.

During the interviews, participants were asked about their knowledge of mental health or psychological care, personal experiences with therapy, and the importance of treatment in a correctional setting. The emphasis on personal experiences with therapy and the importance of treatment in a correctional setting was directly tied to the study's objective of understanding the nuances of psychological help-seeking among correctional

officers. The use of direct quotes enriched the discussion by providing concrete details about the research setting, methodology, and focus areas. Thematic, mapping, cross-thematic, contextual, and comparative analyses were employed to examine mental health care and psychological help-seeking behaviors among frontline correctional officers. These methods added depth to the analysis, offering a clearer picture of the participants' experiences and the study context.

After the interviews, the data obtained were stored on an encrypted external drive. Each participant's audio recording was assigned a code and uploaded into the NVivo cloud. The recordings were then transcribed into text using a sound organizer and converted into Microsoft Word (MS) documents for analysis.

### ***Data Analysis Process***

This study utilized a qualitative methodology, emphasizing a descriptive approach through detailed interviews with correctional officers. Data analysis was conducted using Braun and Clarke's (2006) six-step thematic analysis model, as outlined in Chapter 3. The analysis process began with extensive familiarization with the data, where the interviews were read multiple times to gain a deep understanding of the content. This initial engagement is crucial for identifying significant patterns and insights from the participants' narratives.

The researcher meticulously analyzed the interview data, starting with the categorization of initial codes. These codes encompassed attitudes toward mental health, willingness to seek help, and other emerging themes. The primary goal of this analysis



was to construct a descriptive categorization system that facilitated an organized and coherent tabulation of data to elucidate the findings (Adu, 2019).

Initial codes were then systematically generated across the dataset, noting significant features or concepts. This coding process is fundamental in organizing the data into manageable segments that facilitate deeper analysis. According to Percy et al. (2015), systematic coding ensures that the analysis remains closely aligned with the empirical data, accurately reflecting the participants' experiences and perspectives. Following the coding phase, these codes were sorted into potential themes, involving a careful review of how the codes combined to form overarching themes and how these themes related to each other. Adu (2019) emphasizes the importance of this stage, as it transitions the initial codes into a structured analysis that begins to illustrate the broader narrative within the data.

The themes were then reviewed and refined to ensure they were coherent, consistent, and distinct. This refinement involved re-examining the collated codes for each theme to check if they formed a coherent pattern and ensured no overlap between themes. This stage is pivotal, as it solidifies the themes that will comprehensively describe the data. Each theme was then defined and named, which involved a final analysis to determine what each theme represented and how it contributed to the overall understanding of the research questions. Percy et al. (2015) note that naming themes requires careful consideration to ensure that the names accurately reflect the underlying data and the thematic analysis's conceptual richness.

Finally, the analysis culminated in creating a detailed thematic map and chart, visually and textually representing the main themes, associated codes, and sub-codes derived from the data. This thematic representation not only aids in summarizing the findings effectively but also enhances the reporting process's transparency and rigor, as advocated by Braun and Clarke (2006). By integrating Braun and Clarke's thematic analysis framework within the Generic Pragmatic Qualitative Research approach, this study ensures a systematic and rigorous qualitative data analysis, thereby enhancing the credibility and validity of the findings.

### **Issues of Trustworthiness**

To ensure the trustworthiness of the research findings, this study adhered to the principles outlined by Lincoln and Guba (1985), focusing specifically on credibility and confirmability. Credibility was ensured through meticulous data collection and analysis procedures. The researcher engaged in detailed documentation of narratives, allowing for a deep and authentic representation of the participants' experiences and perspectives. This detailed approach ensured that the research findings genuinely represented the collected data, thereby enhancing the study's credibility.

Confirmability was achieved by maintaining a rigorous approach to documenting the research process and decisions. This transparency is crucial for allowing other researchers to follow the process and evaluate the findings independently, thereby strengthening the study's reliability and overall trustworthiness. The research also involved a critical self-examination process known as reflexivity. By continually assessing and acknowledging personal biases, the researcher ensured that the findings

were shaped by the data, not by personal views or experiences, as recommended by Korstjens and Moser (2018).

### **Ethical Procedures**

The study adhered to stringent ethical standards, focusing on informed consent, confidentiality, and anonymity to protect participant identities and sensitive information. This commitment is crucial for maintaining the integrity of the research. Ethical considerations are vital in qualitative research, especially when dealing with diverse populations (Ponterotto, 2010; Øye et al., 2015; Feldman & Shaw, 2018).

Additional ethical considerations emerged from specific research settings, as discussed by Tulyakul & Meepring (2020) in the context of informed consent among student participants in faculty research, and by Davison et al. (2006), who examined consent negotiation in Northern Aboriginal communities. These studies highlight the challenges and nuances of research ethics board protocols in qualitative and collaborative research contexts.

The study upheld high ethical standards by ensuring that all ethical procedures were meticulously followed, including securing informed consent and maintaining confidentiality and anonymity. These measures were instrumental in safeguarding participant identities and sensitive data, thereby enhancing the ethical framework of the study and contributing to its rigor and trustworthiness. Reflexivity, a process of continuous self-examination, was employed to acknowledge and mitigate personal biases, ensuring that the findings were shaped by the data, not personal views (Korstjens & Moser, 2018).

Integrating NLP into thematic analysis introduces an innovative approach to mitigate potential researcher bias. NLP tools like ChatGPT\_Consensus served as instrumental aids in maintaining impartiality during data analysis, effectively minimizing the influence of the researcher's personal experiences or predispositions. This utilization of NLP in thematic analysis within the Generic Pragmatic Qualitative Research framework significantly enhances the objectivity and neutrality of qualitative research.

NLP is specifically addressed as a strategic tool to mitigate potential biases arising from the researcher's background as a former Correctional Officer. The employment of NLP enhances objectivity in qualitative data analysis by providing an automated, unbiased initial review of the text data collected from interviews. This approach is particularly crucial given the researcher's personal experiences and potential preconceptions that might influence the interpretation of data.

The integration of NLP into the data analysis process was designed to initially parse and categorize the data without the influence of the researcher's subjective views. By automating the initial stages of coding and theme identification, NLP helped in surfacing themes based solely on the data's inherent content, thereby reducing the risk of bias that might be introduced by the researcher's former connections to the field of correctional work.

The initial set of codes was developed based on the research questions and preliminary insights from the data. These codes were documented in a codebook with clear definitions for each code. The researcher independently applied the initial codes to the transcripts using the Microsoft Word comment feature, highlighting text segments

relevant to each code. The initial codes were then grouped into broader themes that captured the essence of the data, with each theme clearly defined and supported by examples from the transcripts.

To enhance the robustness of the thematic analysis, the researcher employed the ChatGPT Consensus program as a secondary method. The process involved several steps:

1. Uploading the transcribed Word documents into the ChatGPT Consensus program.
2. Allowing the Consensus program to initially review the transcripts and apply its codes based on the content.
3. Comparing the codes and themes generated by Consensus with those manually applied.
4. Noting discrepancies or differences in coding.
5. Discussing the coding and themes with the department chair and incorporating feedback to refine the codes and themes.
6. Adjusting the initial coding and thematic analysis based on the feedback and insights from the Consensus program to resolve any discrepancies.

This dual approach, combining manual thematic analysis with the ChatGPT Consensus program, provided an additional layer of validation and enhanced the credibility of the findings. By detailing the use of ChatGPT Consensus in conjunction with manual coding, this section offers a replicable framework for other researchers aiming to enhance the rigor of their qualitative data analysis.

This study explored the under-researched area of correctional officers' perceptions of mental health care and their patterns of seeking psychological help, filling a critical gap in existing research. The findings highlighted how correctional officers' attitudes toward mental health influenced their willingness to seek help, a complex issue in the correctional environment, where stigma, confidentiality concerns, lack of support, and fears of career repercussions can impede officers from accessing psychological assistance.

A general qualitative assessment approach was adopted for the research design, with semi-structured interviews as the primary data collection method. These interviews were ideal for this study as they allowed for collecting in-depth, exploratory data based on the participants' experiences. The qualitative data were meticulously analyzed using Braun and Clarke's (2006) six-step thematic analysis. NVivo 12 Pro was utilized to organize and manage this qualitative data effectively. This software facilitated the organization of transcribed data into coherent themes and subthemes, extensively presented in Chapter 4.

Chapter 4 began with an overview, focusing on presenting and analyzing the collected data. It described the context and environment in which the study was conducted, including relevant situational factors. Demographic details of the participants were provided, offering a background for understanding the diversity and relevance of the sample. The methods and procedures used for data collection were detailed, ensuring transparency and the ability to replicate the study. The analytical processes employed to interpret the data were explained, including thematic analysis, NVivo software, and NLP.

Measures taken to ensure the credibility, transferability, dependability, and confirmability of the findings were discussed, reinforcing the trustworthiness of the research.

The main findings were presented and organized around manual themes, sub-themes, and the primary research questions. Key themes and sub-themes identified through thematic analysis were detailed, such as stigma and judgment, the need for knowledge and information, job stress, supportive leadership and organizational impact, immediate and accessible support, and comprehensive and culturally sensitive training. The themes identified through manual coding were closely aligned with those derived from NVivo and NLP analyses, providing a comprehensive understanding of the data. The chapter summarized key findings and their implications, linking them to the research questions and theoretical framework.

By following this structured approach, Chapter 4 effectively navigated from data collection to elucidating themes, providing a robust foundation for interpreting the complex issues related to mental health perceptions and help-seeking behaviors among correctional officers.

## Chapter 4: Results

This chapter includes findings regarding mental health perceptions and psychological help-seeking behaviors of correctional officers in Maryland. Semi-structured interviews with six current and former officers engaged in mental health counseling were used to address complex dynamics influencing help-seeking behaviors. This study was grounded in the COR theory. Findings include insights regarding resource-based factors affecting help-seeking in high-stress correctional environments. Results and themes are presented according to the three primary research questions guiding this study.

I used the GPQRA to engage a purposive sample of correctional officers. Data collection was executed through in-depth one-on-one audio-recorded interviews that were designed to capture nuanced perspectives of participants. I used NVivo, a sophisticated qualitative data analysis software program, as well as NLP tools to enhance thematic analysis accuracy and integrity. NVivo supported organization and coding of transcription data, while NLP tools were used to authenticate identification of patterns and themes within narratives. This methodological choice was pivotal in terms of managing complex data and ensuring this comprehensive analysis aligned with study objectives.

The analysis process was meticulous and involved examining transcribed data to interpret participants' experiences and perspectives. NVivo enabled effective categorization and synthesis of large volumes of qualitative data, which supported me in developing a deeper understanding of underlying themes. Subsequent transcription of



these recordings facilitated a detailed thematic analysis, and I employed NLP to assist in identifying and interpreting themes. This approach minimized researcher bias and enhanced credibility of analysis. Thematic analysis by Braun and Clarke was employed to thoroughly examine and interpret qualitative data from interviews with correctional officers. This framework is well-suited for exploring rich and detailed qualitative data.

Ethical approval was obtained from Walden University's Institutional Review Board (IRB), ensuring all participants provided informed consent. I safeguarded their confidentiality and anonymity, which was critical in maintaining the integrity of research. Demographic characteristics of participants are detailed to provide context in terms of their insights and experiences. The chapter includes information regarding data collection and analysis procedures, showcasing my commitment to ethical standards and methodological rigor. Following this, identified themes are discussed concerning the broader literature on correctional officers' mental health, mainly focusing on barriers and facilitators influencing their use of psychological services. I sought to deepen understanding of interplay between individual, organizational, and societal factors that influence help-seeking behaviors of correctional officers. Insights will inform development of nuanced interventions to enhance mental health support within correctional environments, thereby contributing to this critical workforce's overall wellbeing and operational effectiveness.

### **Setting**

I focused on perspectives of six current and former correctional officers in Maryland who had engaged in healthcare counseling services with licensed mental health

professionals. I targeted officers within Maryland. Although I initially aimed to include 10 officers, I ultimately proceeded with six participants who were recruited through social media. Flyers advertising the study were posted to ensure participants volunteered without external influence.

This recruitment strategy was critical in terms of maintaining integrity and impartiality of research findings. It was essential to ensure no personal, organizational, or other external factors influenced participants' experiences or interpretation of study results. Careful selection of participants and transparency of the recruitment process were crucial in minimizing potential biases and preserving the study's objectivity.

During the COVID-19 pandemic, I adapted to conduct semi-structured individual interviews remotely in order to mitigate the risk of spreading the virus. Using Zoom, I engaged with six participants, ensuring adherence to public health guidelines while maintaining integrity of the research process. Before conducting interviews, it was confirmed both participants and myself had access to a stable internet connection and were familiar with Zoom. This included testing audio quality to minimize potential interview disruptions. The semi-structured format of interviews allowed for flexibility in terms of questioning, ensuring all crucial research topics were adequately covered.

Establishing rapport with participants in virtual environments required additional efforts, which involved engaging in preliminary conversations to build trust and comfort. I made a conscious effort to create a comfortable and engaging atmosphere at the beginning of each interview, acknowledging unusual circumstances and expressing appreciation for their participation.

For the one participant who was interviewed in person, strict safety protocols were followed, including using masks, maintaining physical distancing, and conducting the interview in a well-ventilated area. These steps ensured safety while allowing for more personal interactions, facilitating a deeper exploration of topics. This approach was crucial in terms of facilitating open and honest dialogue, enhancing data quality and depth. Given the sensitive nature of interviews, all Zoom sessions were personalized, and participants were issued protected and customized links. Recordings were stored securely. Participants were informed about data handling procedures to maintain confidentiality.

The remote format facilitated selecting convenient times for interviews. Additionally, it eliminated the need for travel, enhancing the study's accessibility for those who might have faced challenges attending in person. By conducting interviews via Zoom, I continued research without compromising participant safety or data quality. This approach demonstrated adaptability and responsiveness to unprecedented circumstances, ensuring continuation of research during a global health crisis.

### **Demographics**

The sample for this study included six participants. While 17 officers initially responded to the survey, two were eliminated because they did not meet research criteria, and nine chose not to participate before or after signing informed consent forms. Consenting participants included three females and three males who met criteria to participate in the study. Selection of participants was based on their direct and personal

knowledge of the phenomena of interest. Their direct involvement or exposure to this makes their insights valuable and relevant.

Participants' personal experiences involving the subject matter led to detailed, nuanced, and context-rich information. This depth of data is crucial for a comprehensive understanding of phenomena being studied and informed perspectives based on actual experiences. Using purposeful sampling enhances credibility of research findings, lending authority and authenticity to outcomes.

The chapter is structured first to recapitulate the study's objectives and the guiding research questions, providing a cohesive transition from the methodological groundwork laid in Chapter 3. It then details the participant group's demographic characteristics and the data collection settings, followed by a presentation of the findings organized by thematic categories derived from the data analysis. Each theme is discussed in the context of existing literature to offer a comprehensive understanding of the Officers' experiences and perceptions.

The findings presented herein aim to enrich the existing body of knowledge by highlighting the specific needs and challenges faced by correctional officers in Maryland regarding mental health care and psychological help-seeking. This effort contributes to the broader goals of enhancing mental health interventions and support systems explicitly tailored to this unique professional group.

**Table 1***Descriptive Data*

| Participant   | Age | Sex    | Years of Service | Country of Origin |
|---------------|-----|--------|------------------|-------------------|
| Participant 1 | 37  | Male   | 17               | African American  |
| Participant 2 | 39  | Female | 20               | African American  |
| Participant 3 | 48  | Male   | 10               | African American  |
| Participant 4 | 41  | Female | 12               | African American  |
| Participant 5 | 38  | Female | 18               | African American  |
| Participant 6 | 49  | Male   | 15               | African           |

Participants' ages ranged from 37 to 49 years, with educational backgrounds from high school diplomas to master's degrees. Their service experience varied from 10 to 20 years. A summary of the participant's demographic information is denoted in Table 1. In the study, the six participants demonstrated varying years spent working as correctional officers. A significant majority of the sample (76%) were participants who had over 15 years of experience, as shown in Table 1. In contrast, the remaining 24% of the participants had 10–12 years of experience in the correctional field.

Roles and qualifications among the officers also showed considerable variation. Only one officer held supervisory responsibilities and was qualified in weapon handling and tactical operations. While not in supervisory roles, two other officers were trained in using weapons. The remaining officers were assigned to security and registration posts, performing duties across minimum, medium, and maximum security settings.

All participants openly disclosed their ethnic backgrounds, with five identifying as African Americans and one from Africa, all of whom were from the same racial group. The age of the participants in the study showed some variability. They ranged from 37 to

49 years old, as detailed in Table 1. Males and females were equally represented in the sample.

### **Data Collection**

Before data collection began, approval for this study was obtained from Walden University's Institutional Review Board (IRB), with approval number 05-11-22-0183206. Recruitment was conducted by posting flyers on social media platforms such as Facebook and WhatsApp, explicitly targeting current and former correctional officers in Maryland. The inclusion criteria required participants to be frontline correctional officers who had sought or received mental health services from a licensed provider.

Of 17 officers who responded to the recruitment efforts, 15 met the selection criteria. Ultimately, six provided informed consent to participate in the study. The semi-structured interviews were conducted over eight months, allowing for a thorough exploration of each participant's experiences and perspectives following ethical research practices.

I collected participants' email addresses and sent them the informed consent form, which they were asked to read, sign, and return via email. Subsequently, interviews were scheduled, during which each participant was issued a personalized and customized Zoom link. The interviews were conducted at various times of the day to accommodate the participants' availability. In addition to possessing written consent for the study, verbal consent to record the interview was secured at the beginning of each session. All participants provided verbal consent to be recorded. The researcher also requested their demographic information and conducted the interviews via Zoom. The interviews lasted

an average of 27 to 41 minutes, as shown in Table 2, and were recorded using Zoom's built-in recording system.

**Table 2**

*Length of Interview Audio and Transcripts*

| Participant   | Length of transcript in pages (Times New Roman 12, double-spaced) | Length of an audio interview (minutes) |
|---------------|-------------------------------------------------------------------|----------------------------------------|
| Participant 1 | 10                                                                | 21.07                                  |
| Participant 2 | 12                                                                | 25.01                                  |
| Participant 3 | 13                                                                | 29.51                                  |
| Participant 4 | 13                                                                | 23.50                                  |
| Participant 5 | 16                                                                | 29.11                                  |
| Participant 6 | 14                                                                | 31.53                                  |

Data were collected from six participants who volunteered for the study without being coerced or offered any incentives. Participants were asked open-ended questions, which served as the interview protocol seen in Appendix A, and each participant was assigned an alphanumeric code (e.g., P1, P2) to maintain confidentiality. The data were transcribed verbatim. The interview recordings and transcripts were stored on a password-protected external drive and secured in an office safe.

### **Data Analysis**

The qualitative data were analyzed using NVivo software and NLP tools. The analysis began with transcribing the interviews verbatim, followed by initial coding in NVivo. Codes were then categorized into broader themes through an iterative process involving multiple rounds of review and refinement. NLP tools aided in identifying patterns and themes by analyzing linguistic structures and the frequency of terms. For

example, the theme "Organizational Support" emerged from codes related to leadership behaviors, accessibility of resources, and supervisory practices.

The data analysis process adhered closely to the methods outlined in Chapter 3, ensuring consistency with the GPQRA. The thematic analysis identified key themes related to the research questions, organized around the three primary research questions, with themes and sub-themes derived from manual coding and NVivo analysis. This approach emphasizes a systematic and comprehensive exploration of qualitative data to extract meaningful insights that are directly applicable to real-world settings.

NVivo, a qualitative data analysis software, was utilized to manage and organize the data effectively. This software facilitated the coding of interview transcripts and the identification and categorization of emerging themes and patterns. The use of NVivo ensured a structured and detailed analysis, aligning with the rigorous standards of GPQRA, which prioritize methodological consistency and depth in qualitative research.

Thematic analysis was the primary technique used, allowing for an in-depth exploration of the data. This approach involved several phases: data familiarization, initial code generation, theme searching, theme reviewing, theme defining and naming, and finally, compiling the report, as shown in Figures 1-2 and Tables 3-5. Each phase was meticulously conducted to ensure that the analysis was comprehensive and aligned with the theoretical frameworks and research questions guiding the study..

### **Evidence of Trustworthiness**

This preliminary manual analysis helped establish a broad understanding of the main topics discussed by participants. Integrating ChatGPT's Consensus tool into the



data analysis process of this qualitative study ensured the integrity and depth of the analysis. These tools were systematically integrated, and by following a rigorous methodology, the study leveraged the strengths of advanced NLP technologies to enhance the objectivity and depth of qualitative analysis. This approach ensured that the findings were grounded in the data and free from potential biases that could arise from the researcher's background as a former Correctional Officer. This method significantly contributed to the trustworthiness and validity of the research outcomes.

A critical evaluation involved comparing the themes identified by NLP with the raw data, ensuring that these automated insights were accurate and reflective of the data. This step was vital for validating the integrity of the analytical process and ensuring that the final thematic analysis remained faithful to the participants' narratives, free from the researcher's personal bias. By leveraging NLP tools to enhance objectivity and neutrality, integrating NLP thematic analysis offers a promising avenue for researchers to address and mitigate potential biases in qualitative research. This approach ensures that the research outcomes are more reliable and valid, faithfully representing the data and contributing to the field of qualitative research.

The validated themes were detailed in the findings chapter of the study and linked to the research questions and theoretical framework by meticulously documenting each step in the data analysis process, highlighting the distinct roles played by NLP tools alongside manual analysis and NVivo. This approach ensured a high level of transparency and accountability, crucial for the validity and reliability of qualitative research. Implementing NLP tools served primarily to verify and supplement the findings

derived from manual coding and NVivo analysis, rather than directly shaping the research findings. The validated themes from the NLP analysis were then integrated into a broader thematic framework, ensuring they were comprehensive and well-grounded in the data.

The analytical process was characterized by a continuous effort to bridge theoretical concepts with empirical data. This process also involved aligning each analytical step with the GPQRA framework to ensure that all findings were based on empirical evidence and were theoretically sound. Using NVivo and NLP tools enhanced the rigor and precision of the data analysis, enabling a robust synthesis of the participants' experiences and perceptions.

By meticulously following the methodological framework detailed in Chapter 3 and leveraging advanced analytical tools, the study upheld the integrity and trustworthiness of the research process. This methodological consistency ensured that the findings presented in this chapter provide a reliable and in-depth understanding of the complex issues investigated, reflecting the real-world experiences and challenges faced by correctional officers in their professional contexts.

Following the initial overview, detailed coding procedures were implemented. This step involved a meticulous examination of the data, where specific instances within the transcripts were marked as significant. These instances were coded systematically across the dataset, a method fundamental to thematic analysis for developing a structured and comprehensive understanding of the data.

As codes were generated, they were continuously reviewed and refined. This iterative coding and theme development process is essential to thematic analysis as it ensures that the themes developed are robust and well-supported by the data. This stage often involves revisiting the data multiple times to refine codes and define themes, ensuring that they accurately reflect the nuances of the data.

Credibility was ensured through triangulation by cross-referencing the interview data and findings with existing literature. In addition, detailed descriptions of the research context and participants' experiences were provided to allow for transferability. A detailed audit trail of the data analysis process was maintained, documenting each step taken to analyze the data, ensuring dependability and confirmability. The use of NLP tools provided an objective layer of analysis, reducing potential researcher bias.

## **Results**

The results are organized around the three primary research questions, presenting themes and sub-themes identified through thematic analysis. Manual coding is an essential process in qualitative research, involving the identification and categorization of key themes and patterns within the data. This method requires meticulous attention to detail as the researcher reads through the data, applies codes to significant pieces of text, and groups these codes into meaningful themes (Braun & Clarke, 2006). This study utilized manual coding alongside NVivo software to ensure a thorough and nuanced analysis of the interview transcripts.

Table 3 presents the themes identified through manual coding. These themes capture the correctional officers' perceptions and experiences regarding mental health

and psychological help-seeking behaviors. Manual coding allows for a deep and comprehensive exploration of the data, ensuring that the richness and complexity of the participants' narratives are fully captured (Patton, 2002). This detailed approach enhances the understanding of the factors influencing mental health perceptions and help-seeking behaviors, providing valuable insights for developing targeted interventions (Percy, Kostere, & Kostere, 2015; Adu, 2019).

**Table 3**

*Clustering of Initial Codes to Form Themes*

| Initial Pre-Determined Codes | Highest Initial Pre-Determined Codes                                                                                                   |
|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Seeking Help Concerns        | Labeled (33); Risks (28); Judgment (17); Lack of support (15); Backlash (14); Effectiveness (12); Isolating (12); Indifference (12)    |
| Perceptions of Mental Health | Required/mandatory (27); Profession support (13); Coping mechanisms (12); Temperament (12); Self-awareness (11); Mental Stability (10) |
| Willingness to Seek Help     | Stress (24); Coping (20); Burnout (15); Unburdening/relief (11); Desire for support (10)                                               |
| Coping with Stigma           | Encouraging others (18); Initiative (15); Receptive (11); Persistence (11)                                                             |
| The Decision to Seek Help    | Relief/Support (35); Burnout (17); Rewards (10)                                                                                        |
| The Experience               | Helpful (13); Restoring (10); Rewarding (10)                                                                                           |

This qualitative study provides a comprehensive examination of the factors influencing psychological help-seeking behaviors among correctional officers in Maryland. Through in-depth interviews and rigorous thematic analysis, several key

themes emerged that reflect the officers' perceptions, concerns, and lived experiences regarding mental health services and their decisions to seek help.

Table 3 presents a structured overview of the initial codes derived from your research questions and their clustering into relevant themes. This process highlights the key issues and perceptions identified through qualitative data analysis, categorizing them into distinct themes that offer insight into the mental health challenges and responses among correctional officers.

The table organizes data into themes such as “Seeking Help Concerns,” “Perceptions of Mental Health,” and “Willingness to Seek Help,” each supported by specific codes and their frequency counts. This structure facilitates a nuanced discussion of the factors influencing mental health support in correctional settings, providing a clear understanding of the primary areas of concern.

### **Theme 1: Perceptions of Mental Health**

The analysis revealed a spectrum of perceptions regarding mental health among correctional officers, shaped by both personal experiences and observed attitudes within their professional community. This theme explores the officers' understanding of mental health struggles, the significance they place on psychological well-being, and their attitudes toward mental health services. Understanding these perceptions is critical for identifying the factors that either facilitate or impede help-seeking behaviors.

The analysis revealed a spectrum of perceptions regarding mental health among correctional officers, influenced by both personal experiences and observed attitudes within the professional community. This theme delves into the officers' understanding of

mental health, the importance they place on psychological well-being, and their attitudes toward mental health services. Understanding these perceptions is crucial for identifying both the barriers to and facilitators of help-seeking behavior.

Perceptions of mental health varied significantly among the officers. Some viewed mental health support as essential and beneficial, while others expressed skepticism or indifference. The theme includes codes such as "required/mandatory" (27), "professional support" (13), and "coping mechanisms" (12). Some officers recognized the importance of mental health support in maintaining professional resilience and effective coping strategies and the importance of mental health support in maintaining professional resilience. P3 said:

Recognizing that it is acceptable to not feel okay was a pivotal moment for me. It is about receiving professional support rather than just receiving a token of encouragement.

This variation in perceptions underscores the broader challenges within the correctional environment, where mental health is often misunderstood or undervalued.

Participant 2 provided a contrasting perspective. P2 said:

To some of us, mental health support is as crucial to us as our physical protection. To others, it is an unseen burden that we are taught to disregard. I used to perceive it as a weakness, but witnessing a colleague go through therapy and emerge stronger has altered my viewpoint.

Insights from this theme reveal the varied perceptions of mental health among correctional officers, supported by participant experiences and perspectives. The analysis

highlights the barriers and facilitators to understanding and valuing mental health support within the correctional environment, offering valuable implications for developing interventions that promote a healthier work culture.

### **Theme 2: Seeking Help Concerns**

Correctional officers expressed a range of concerns regarding seeking mental health support, highlighting the complex and often conflicting perceptions within the correctional environment. These concerns include fears of being labeled as weak or incapable, potential career risks, judgment from peers, and a perceived lack of institutional support. The varying views among officers reflect the tension between the need for professional mental health support and the stigma associated with seeking help in a high-stress, performance-driven environment.

The theme of seeking help concerns primarily revolves around the apprehensions that correctional officers have regarding psychological support. The theme is supported by specific concerns that emerged during the interviews, with high frequencies of codes such as "Labeled" (33), "Risks" (28), and "Judgment" (17). These concerns underscore the significant barriers that correctional officers face when considering whether to seek psychological help. The fear of backlash (14) and the perceived ineffectiveness (12) of mental health programs further contribute to the reluctance to engage in mental health services.

These concerns are deeply rooted in fears of professional repercussions, social stigma, and judgment from peers. Officers expressed significant worries about being

labeled as weak or unfit for duty, which has a profound impact on their willingness to seek help. Articulating the fear of stigma, P6 said:

The fear of being branded as weak or incapable just for seeking help is paralyzing. It feels like you're not just fighting your inner demons but also battling the stigma from those around you.

Some officers viewed mental health as an essential aspect of their well-being, recognizing the importance of professional support in maintaining resilience and coping with the demands of their job. P1:

The badge we carry comes with an unwritten rule of invincibility. Admitting you need help feels like you're relinquishing part of that identity.

However, others were skeptical about the effectiveness of mental health interventions, particularly when participation in such programs was mandated. P6 highlighted the paralyzing fear of being perceived as weak:

"The fear of being branded as weak or incapable just for seeking help is paralyzing. It feels like you're not just fighting your inner demons but also battling the stigma from those around you.

This skepticism often stemmed from concerns that mandatory mental health programs might not adequately address their individual needs and could instead lead to negative consequences, such as being labeled or judged by their peers and supervisors.

This quote reflects the profound impact of stigma and the lack of support on the officers' willingness to seek help. The reluctance to engage in mental health services is



not just about personal skepticism but is deeply intertwined with the broader organizational culture that often discourages open discussions about mental health.

The significant concerns correctional officers face when considering mental health support, including fears of stigma and professional repercussions, are brought to light in this section. Participant experiences underscore the need for addressing these barriers to create a more supportive environment for seeking help.

### **Theme 3: Willingness to Seek Help**

Willingness to seek help was influenced by several interrelated factors, including job-related stress, burnout, and the desire for support. These factors are reflected in the codes "stress" (24), "coping" (20), and "burnout" (15). This theme captures the complex interplay between personal challenges and professional demands that impact officers' decisions to seek help. These factors are reflected in the codes "stress" (24), "coping" (20), and "burnout" (15). The complex interplay between these personal and professional challenges significantly impacts officers' decisions to seek help. P5 said:

I think that if you're open to mental health or therapy, you know so or seeing a psychologist, like I said, the person who prescribes you medication, psychiatrist. Mm hmm. So I think that if you're open to it, then oh, you know, then if you're open to go outside of work okay, I think I think I should try this therapy thing out. But is it ever suggested? Probably not.

This reflection underscores the critical role that both personal initiative and workplace culture play in shaping attitudes toward seeking help. Despite the recognition of mental health support's importance, there is often a lack of proactive encouragement

within the workplace. Emphasizing the need for mandatory mental health support. P5 reflected on the personal openness to mental health services:

I think that if you're open to mental health or therapy, you know, so or seeing a psychologist like I said, the person who prescribes you medication, psychiatrist.

P3 said:

Oh, the first year, I really think it should be mandatory. No one prepares you mentally for that. So, I think it should be a mandatory requirement as soon as you go into a correctional setting.

Citing the importance of of regular mental health training P6 stated:

Regular mental health training should be mandatory for all staff.

Highlighting the value of mandatory mental health check-ins P1 shared:

Regular mental health check-ins should be mandatory. It would help catch issues early before they become serious problems.

Factors influencing correctional officers' willingness to seek psychological help, such as stress and the role of mandatory programs, are explored in this part of the analysis. The findings suggest the importance of fostering an environment that encourages proactive mental health support and addresses the complexities of help-seeking behavior.

#### **Theme 4: Coping with Stigma**

Stigma emerged as a significant barrier to seeking help. Participants employed various strategies to cope with and overcome this challenge. The themes encouraging others (18), taking the initiative (15), being receptive (11), and persistence (11) in the

face of stigma associated with mental health struggles emphasized peer support, personal initiatives, and fostering a culture of receptivity. P4 said:

Hearing a coworker openly discuss their therapy made me feel less isolated and more open to seeking help. Starting small conversations about stress and coping strategies with peers opened a new avenue of support I never thought I had. These strategies highlight the potential of peer support in overcoming stigma. Additionally, the role of leadership in fostering a supportive environment is crucial.

To illustrate the power of peer support P4 shared:

Starting small conversations about stress and coping strategies with peers opened a new avenue of support I never thought I had.

Opening up about the struggles to help break stigma, P5 continued:

Stigma is like a shadow that follows you around, but opening up about my struggles has encouraged others to do the same. It's about breaking the cycle.

Strategies that correctional officers use to cope with the stigma associated with mental health are addressed here. Participant experiences highlight the importance of peer support and leadership in overcoming stigma, emphasizing the need for cultural change within the correctional environment.

### **Theme 5: The Decision to Seek Help**

The decision to seek help is often driven by a critical juncture where personal or work-related stressors become overwhelming. This theme includes codes such as "relief/support" (35) and "burnout" (17), highlighting the factors that prompt officers to

pursue professional mental health services. Family and close relationships were identified as crucial influences. P3 noted:

I don't think as an Officer, you know, at that time, I don't think I was encouraged even to seek psychological help despite, you know, the things that I was witnessing at work despite the violence at the time, despite, you know, the day-to-day hassles that happened at work.

P5 continued:

It wasn't until I noticed the toll my job was taking on my family life that I decided to seek help.

This theme emphasizes the significant role of external support systems in encouraging officers to seek help. P1 said,

I realized that the activities I used to enjoy, which were my outlets for stress, had become sources of stress themselves. That was my wake-up call to seek help.

This analysis examines the critical moments and factors that lead correctional officers to seek mental health support. The findings reveal the importance of recognizing and responding to stressors, both personal and professional, in promoting timely help-seeking behavior.

### **Theme 6: Challenges in Correctional Settings**

The correctional environment presents unique challenges that exacerbate mental health struggles among officers. This theme captures the systemic barriers to accessing mental health services, such as bureaucratic hurdles, confidentiality concerns, and insufficient resources. P2 expressed:

I don't know how, but your supervisor and your co-workers will always know when you're going to EAP when you contacted EAP. So I felt like it was a divide somewhere. There's a leak somewhere in the system which made me not want to do it.

The analysis highlights the significant impact of the correctional environment on officers' mental health, emphasizing the need for systemic changes to improve access to mental health support. For example, P4 highlighted, "The job itself can cause you to have mental health struggles if you don't pay close attention to yourself."

The lack of emphasis on mental health in the correctional system was noted by P3.

Do I know that it's accessible? No, I didn't. You know, in corrections they don't put that as a forefront. They more so put in the forefront of physical health rather than the mental health portion of it.

P1 continued:

It's not spoken about, and the only time that you actually hear about it is when something actually happened - it's never said, you know, inside of the facility.

Discussing the unique challenges of maintaining mental health within a correctional environment P6 noted:

The job itself can cause you to have mental health struggles if you don't pay close attention to yourself. P2 discussed the frustration with the system's lack of responsiveness stating: "By the time you get the help you're already past breaking.

The system needs to be more responsive."

P6 highlighted the potentially harmful effects of the job,

Well, mental health in a correctional setting can be very, very, very intoxicating at times if you don't have a balance in your life, overall mental health and in in.

Corrections could damage you severely because of the trauma that we experience.

This emphasizes the critical need for balance and support to mitigate the negative impacts of correctional work on mental health. P2 stated: "When you become a correctional officer, they do have something in place. I just found that accessing help is hard. It defeats the purpose of me being anonymous." P4 said: "We are so short, oh no, we're not referring anybody because we need this body here."

The unique challenges correctional officers face in accessing mental health services within a correctional setting are outlined in this section. The findings highlight the systemic barriers that need to be addressed to improve mental health support and well-being among officers.

## **Results**

Thematic analysis is a qualitative research method used to identify, analyze, and report patterns (themes) within data. According to Braun and Clarke (2006), this method involves several phases, including familiarizing the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing the final report. The thematic analysis provides a flexible and helpful research tool, potentially providing a rich, detailed, yet complex data account. This approach was utilized in the current study to fully explore the participants' experiences and perceptions

regarding mental health care and help-seeking behaviors (Braun & Clarke, 2006; Percy et al., 2015; Adu, 2019).

In Table 4, the thematic analysis focuses on the perceptions of mental health and the experiences of participants seeking psychological help. The data is clustered into meta-themes, each representing a significant aspect of the participants' experiences and perspectives.

**Table 4***Thematic Findings on Perceptions of Mental Health and Seeking Psychological Help*

| Data meta-themes                    | Clustering of Key Findings                                                                                                                                                                                |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Perceptions of Mental Health        | Acknowledged the importance of mental health in daily life and work.<br>Perceive mental health as linked to job performance in professional and personal spheres.                                         |
| Challenges in Correctional Settings | Officers lack sufficient mental health resources and training in correctional facilities.<br>Unanimously acknowledged that seeking mental health care is stigmatized, especially among Officers of color. |
| Experiences with Seeking Help       | Have varied experiences seeking mental health support.<br>Concern about being perceived as weak or unstable if they seek Help is common.                                                                  |
| Influence of Job Stress             | The stressful and traumatic nature of their work significantly affects Officers' mental health.<br>Maintaining a tough exterior in high-stress situations is emphasized.                                  |
| Training and Awareness:             | Unanimous Calls for better mental health training and awareness, potentially led by external experts.<br>Understanding mental health from a cultural perspective is essential.                            |
| Role of Personal Characteristics:   | Factors such as race, gender, and cultural background significantly influence attitudes toward mental health and help-seeking behaviors.                                                                  |
| Impact of External Factors:         | Societal Stigma, the correctional environment, and institutional policies shape Officers' attitudes and experiences.                                                                                      |
| Recommendations for Improvement:    | Officers suggest more immediate and accessible mental health support.<br>Unanimous support for on-site therapists and dedicated mental health days are proposed.                                          |

The participants recognized the critical role mental health plays in their professional performance and personal lives. P4 emphasized: "Mental health is a part of our everyday living and it's a part of everything that we do, whether it's still a family, work, or even our social lives."



This reflects the theme that mental health is perceived as fundamentally linked to both job performance and personal well-being. Participants reported a lack of sufficient mental health resources and training within correctional facilities. The inadequacy of mental health resources was highlighted by P2, who stated: “You'd have to dig through your insurance package and find out if you can [access mental health services]. But it's not something spoken in the jail that anybody speaks about or encourages you to do.”

The participants reported varied experiences with seeking mental health support, with some finding it beneficial and others encountering significant barriers. P5 shared: “Therapy in correctional was... I was open to it. You know, I wasn't opposed to it at all. But there was no clear pathway to access it.” This highlights the challenges correctional officers face in accessing mental health services, even when they are willing to seek help.

There were unanimous calls for better mental health training and awareness programs, ideally led by external experts. P5 remarked: “Training should be more in-depth and cover how to deal with our own mental health. Bringing in outside experts could give us a fresh perspective.”

This suggests that current training is inadequate in addressing the mental health needs of correctional officers.

Personal characteristics, such as race, gender, and cultural background, play a crucial role in shaping officers' perceptions and attitudes towards mental health and seeking help.

P2 reflecting on her experience as a person of color, stated:

Being a person of color, I will say that seeking mental health therapy... is a no no. You have to go to your grandparents, you pray about it. It's this unspoken rule that whatever you're going through stays in a house kind of mentality.

External factors, including societal stigma, the correctional environment, and institutional policies, significantly influence how officers perceive and engage with mental health services.

P2 elaborated:

You should have been given a number or a person's name, I shouldn't have to fill out paperwork, be interrogated, or go through three or four people. It was kind of disheartening. It made you not even want to try.

There were strong recommendations for providing more immediate and accessible mental health services within correctional facilities.

P1 emphasized the need for on-site therapists, stating:

I also believe and I hope to see one day that we have actual therapists on-site and in every facility, even if it's just one because we experience different things throughout our days. Having someone on-site who you can talk to right away would make a huge difference.

Research has shown that the stressful and traumatic nature of correctional work significantly impacts participants' mental health. The inherent stress and trauma of correctional work take a substantial toll on participants' mental well-being, necessitating effective coping mechanisms and support systems. According to P5:

Every shift tests your limits; you spend hours on high alert, and it drains you completely. It's not just the physical exhaustion, it's the mental strain that wears you down over time. We don't really have systems in place that help us deal with this. You're kind of left to figure it out on your own.

Another, P3 said:

I don't think as an Officer, you know - at that time - I was encouraged even to seek psychological help despite, you know, the things that I was witnessing at work, despite the violence at the time - despite, you know, the day-to-day hassles.

This illustrates the pervasive cultural expectation within the correctional environment to maintain a tough exterior, which can hinder the acknowledgment and addressing of mental health struggles. Unanimous calls were made for better mental health training and awareness, potentially led by external experts. As P5 said: "Therapy in correctional was ... I was open to it. You know, I wasn't opposed to it at all. But there was no clear pathway to access it."

This emphasizes the strong demand for improved mental health training and awareness programs, ideally facilitated by external mental health professionals, to ensure credibility and effectiveness. Understanding mental health from a cultural perspective is essential for practical training, including cultural competence, to address the participants' diverse backgrounds and experiences. Personal characteristics such as race, gender, and cultural background play a crucial role in shaping participants' perceptions and attitudes towards mental health and seeking help. P2 noted:

You have these barriers, like a lot of bureaucracy and paperwork, and you're constantly worried about confidentiality. There's just not enough resources to go around. It makes getting help really tough.

External factors, including societal stigma, the nature of the correctional environment, and existing institutional policies, significantly influence how participants perceive and engage with mental health services. There is a strong recommendation for providing more immediate and accessible mental health services within correctional facilities. Participants universally support having on-site therapists and dedicated mental health days to ensure timely and effective mental health support.

The thematic analysis reveals that correctional officers acknowledge the importance of mental health but face significant barriers to accessing adequate mental health support. The challenges within the correctional environment, compounded by societal and institutional factors, necessitate comprehensive interventions that include better resources, training, and policies to support Officers' mental well-being. Addressing these issues through the lens of the COR theory can provide a structured approach to developing targeted strategies for improving mental health outcomes among correctional officers.

**Table 5***COR Themes Results*

| Data meta-themes                                                                      | Clustering of Key Findings                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Understanding the importance of seeking Help and the influence of Stigma and Barriers | <p><b>Broad Recognition:</b> Officers widely recognize the importance of mental health in their personal and professional lives. They acknowledge the interplay between mental well-being and job performance.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Challenges in Correctional Settings                                                   | <p><b>Varied Perceptions:</b> While some view mental health as a critical aspect of overall well-being, others see it as a secondary concern, overshadowed by the immediate demands of the job.</p> <p><b>Professional Stigma:</b> A prevalent theme is the concern about being perceived as weak or unstable for seeking mental health support, reflecting a deep-seated professional stigma.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Experiences with Seeking Help                                                         | <p><b>Cultural Influences: Influence of Personal Characteristics:</b> Race, gender, and cultural background significantly shape attitudes and experiences related to mental health and help-seeking.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Impact of Stress                                                                      | <p><b>External Pressures:</b> Societal Stigma and the specific nature of the correctional environment, coupled with institutional policies, play a critical role in shaping these attitudes. Particularly among officers of color, there is an additional layer of cultural Stigma, where seeking mental health support might be viewed as a sign of weakness or failure.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Training and Awareness:                                                               | <p><b>Lack of Resources:</b> There is a notable deficiency in mental health resources within correctional settings, including a lack of trained professionals and adequate facilities.</p> <p><b>Inadequate Training:</b> Officers report insufficient training regarding mental health, which impacts their ability to recognize and address their own mental health needs.</p> <p><b>Mixed Experiences:</b> Experiences vary significantly, with some Officers reporting supportive environments while others describe an utter lack of institutional support.</p>                                                                                                                                                                                                                                                                       |
| Recommendations for Improvement:                                                      | <p><b>Need for Systemic Change:</b> There is a clear call for systemic changes in the approach to mental health within correctional facilities, emphasizing the need for better policies and practices to cope.</p> <p><b>Immediate Support:</b> Suggestions include providing immediate and accessible mental health support, such as on-site therapists and dedicated mental health days.</p> <p><b>Proactive Measures:</b> Officers recommend proactive measures in mental health care rather than the current reactive stance.</p> <p><b>Enhanced Training:</b> There was a call for more comprehensive training programs, potentially led by external mental health experts.</p> <p><b>Cultural Sensitivity:</b> Training should also encompass cultural sensitivity to address the diverse backgrounds of correctional officers.</p> |

Participants recognized the critical importance of mental health in both their personal and professional lives. The broad recognition of the significance of mental well-being. P3 highlighted:

If your mind isn't right, you can't do your job properly. Mental health is just as important as physical health.

### **Varied Perceptions**

Participants exhibited varied perceptions of mental health within the correctional environment. Some viewed mental health as a crucial component of overall well-being, essential for both personal and professional success. For example, P3 emphasized:

If your mind isn't right, you can't do your job properly. Mental health is just as important as physical health.

This perspective underscores the belief that maintaining mental health is integral to effective job performance. On the other hand, some participants considered mental health to be a secondary concern, overshadowed by the immediate demands of their job. P4 remarked:

I know mental health is important, but when you're dealing with a situation, it's the last thing on your mind. You're focused on getting through the day.

This reflects a prioritization of short-term survival over long-term well-being, consistent with COR theory, which suggests that individuals may prioritize immediate resource conservation over more abstract or long-term needs. These varied perceptions highlight the complexity of addressing mental health in correctional settings, where the pressures of the job can lead to conflicting attitudes about the importance and practicality of seeking help.

### ***Professional Stigma***

A significant barrier identified was the concern about being perceived as weak or

unstable for seeking mental health support. This deep-seated professional stigma was prevalent among participants, contributing to their reluctance to seek help. The COR theory suggests that the fear of losing social standing and professional reputation (valuable social resources) can significantly deter help-seeking behavior.

P2 shared: "When you tell somebody you're in therapy or you're seeing a psychiatrist to help you through a mental health breakdown or an inmate spit on you or threw [expletive] at you, they still see it as a weakness. In this line of work, you can't afford to be seen as weak.

This fear of losing social standing and professional reputation can significantly deter help-seeking behavior, reflecting the professional stigma entrenched in the correctional environment.

### ***Cultural Influences***

Race, gender, and cultural background significantly shape attitudes and experiences related to mental health and help-seeking. Officers of color, in particular, face additional layers of cultural stigma, where seeking mental health support might be viewed as a sign of weakness or failure.

P2 highlighted this challenge, stating:

As a person of color, mental health issues are often handled within the family or through prayer. It's an unspoken rule that what happens in the house stays in the house, so seeking outside help can be seen as a betrayal.

This cultural dimension adds complexity to the issue of stigma and help-seeking, making it more challenging for Officers to access necessary support. COR theory

indicates that cultural resources and identity are essential, and the threat of losing these resources can further complicate help-seeking behaviors. P6 said:

I'm originally from [Africa] and seeking, you know, psychological help is a taboo, where I come from. And so it was a challenge for me to go see a therapist, the perception, the understanding is that if we go see a shrink, you know, that you are crazy, they label you as crazy, you know, in [Africa], it just means you are completely out of control. You are losing your mind. And when you are labelled as such, nobody wants to have anything to do with you. You know, you are ostracized - you are abandoned. There is no support whatsoever.

P6 continued:

But when I got here and I started walking to the correctional arena and I got to learn more about how, you know, seeking psychological help, it was very, very helpful. I changed my mindset. I must be honest that it was really, really helpful.

P5 shared:

She didn't bite me. It wasn't a bad experience. I kind of - I don't know - the fact that you can go speak to somebody.

### ***External Pressures***

External pressures, including societal stigma and the specific nature of the correctional environment, coupled with institutional policies, play critical roles in shaping officers' attitudes toward mental health and help-seeking. These pressures can further discourage officers from seeking necessary psychological help, reinforcing the stigma associated with mental health struggles.



P4 discussed the impact of these external pressures, noted:

The correctional environment is not just physically tough; it's mentally draining.

There's an unspoken rule that you have to be tough all the time, and the institution doesn't really support you if you show any sign of mental weakness. The societal view that we should just 'deal with it' makes it even harder to seek help.

According to COR theory, external pressures and environmental stressors can lead to significant resource loss, making it more challenging for officers to seek

### **Lack of Resources Challenges in Correctional Settings**

Participants described notable deficiencies in mental health resources within correctional settings, including a lack of trained professionals and adequate facilities. This lack of resources was identified as a significant barrier to seeking help. COR theory suggests that adequate resources are crucial for stress management and well-being. The resource deficiency represents a significant threat to officers' ability to conserve and build their resource pool.

### ***Inadequate Training***

Participants reported insufficient training regarding mental health, which impacts their ability to recognize and address their own mental health needs. The lack of comprehensive training programs limits officers' knowledge and capacity to seek help effectively.

P2 highlighted this concern, stating:

We get training on everything—use of force, dealing with inmates, but nothing on how to handle our own mental health. It's like they expect us to just figure it out on our own, but we're not equipped for that.

This lack of training not only affects individual officers but also undermines the overall well-being of the correctional staff as a whole. COR theory suggests that adequate training is a critical resource that can enhance officers' capability to manage stress and maintain mental health, thereby conserving their psychological resources.

### ***Mixed Experiences with Seeking Help***

Experiences with seeking help varied significantly among participants. Some reported supportive environments where mental health care was accessible and encouraged, while others described an utter lack of institutional support, highlighting inconsistencies in the provision of mental health services. COR theory indicates that supportive environments facilitate resource gain and conservation, while lack of support leads to resource depletion and increased stress.

### **Impact of Stress and Need for Systemic Change**

There was a consistent call for systemic changes in the approach to mental health within correctional facilities. Participants emphasized the need for better policies and practices to cope with job-related stress and mental health challenges. This systemic change was deemed essential to creating a supportive environment that reduces stigma and encourages help-seeking. According to COR theory, systemic changes that provide better support and resources can help conserve and build officers' resource pools, improving mental health and reducing stress.

## **Recommendations for Improvement**

### ***Immediate Support***

Participants suggested providing immediate and accessible mental health support, such as on-site therapists and dedicated mental health days. These measures were seen as crucial in providing timely help and reducing the stigma associated with seeking mental health support. COR theory suggests that immediate support helps conserve resources by providing timely and accessible interventions, reducing the risk of resource depletion.

P1 said:

I also believe and I hope to see one day that we have actual therapists on site and in every facility, even if it's just one because we experience different things throughout our days. Having someone on-site who you can talk to right away would make a huge difference. It would show that the department takes our mental health seriously.

### ***Proactive Measures***

Participants recommended proactive measures in mental health care rather than the current reactive stance. Proactive approaches include regular mental health check-ins and early interventions, which can prevent the escalation of mental health struggles. COR theory supports proactive measures as they help conserve resources, and early intervention prevents significant resource loss. According to COR theory, external pressures and environmental stressors can lead to significant resource loss, making it more challenging for officers to seek help

### *Enhanced Training*

Participants strongly called for more comprehensive training programs, potentially led by external mental health experts. Enhanced training would equip officers with the necessary knowledge and skills to manage their mental health effectively. Participants emphasized the importance of specialized training for mental health management.

P5 said:

Training should be more in-depth and cover how to deal with our own mental health. Bringing in outside experts could give us a fresh perspective.

This sentiment was echoed by other participants who emphasized the importance of specialized training for mental health management.

P6 shared:

The fact that you're able to talk to a therapist say every three months even once every three months you go talk to somebody. The fact that you're able to talk to a professional outside of the correctional facility makes a difference that well when you come back now will have you to look at these fresh. I think that's how it should be.

Participants also suggested that such training programs should include practical exercises and provide a safe space for officers to discuss their mental health challenges.

P5 stated:

They [as in therapist] can't tell anybody, you know, if you tell your momma, or you tell, they might tell somebody else, but by law and you, they cannot let anybody what you talk about - that thought it was a safe space for me.

P1 emphasized the importance of immediate access to mental health professionals:

Having to go through EAP, four weeks have passed and you were severely traumatized by whatever that situation was. I'm completely overwhelmed and don't want to talk to you. So I feel like if we had counselors actually in the facility that we have major crises, we can just go in that moment to speak somebody.

The consensus among participants indicates a clear need for the correctional department to implement more robust training programs focused on mental health, facilitated by experts who can offer fresh perspectives and practical coping strategies. COR theory highlights the importance of training as a resource that enhances individuals' capability to cope with stress and maintain their mental health.

### ***Cultural Sensitivity***

Training should also encompass cultural sensitivity to address the diverse backgrounds of correctional officers. Culturally sensitive training programs can help reduce stigma and encourage officers from all backgrounds to seek help. COR theory indicates that acknowledging and supporting cultural resources is crucial for reducing stigma and enhancing help-seeking behaviors.

Stigma was identified as a significant barrier to seeking help. Correctional officers expressed fears of being perceived as weak or unstable, which deterred them from accessing mental health services. This stigma manifests through fears of judgment and professional repercussions, profoundly affecting their help-seeking behaviors (Karaffa & Tochkov, 2013; Vogel et al., 2007). Recent findings by Williams et al. (2022) confirm the persistent deterrent effect of stigma in high-stress professions.

The participants reported a notable deficiency in mental health resources within correctional settings, including a lack of trained professionals and adequate facilities. This aligns with the COR theory, which focuses on the impact of resource depletion on stress and well-being (Carleton et al., 2020; Fusco et al., 2021).

The study advocates for systemic changes to mental health policies within correctional facilities to ensure better support and accessibility of services. This includes implementing mental health days, on-site therapists, and mandatory mental health screenings (Spinaris, Denhof, & Kellaway, 2012).

The findings suggest that more comprehensive training programs, potentially led by external mental health experts, are needed to equip officers with the necessary tools to recognize and address mental health struggles (Lee & Kim, 2019; Thompson et al., 2021).

Officers of color face additional layers of cultural stigma, highlighting the need for culturally sensitive approaches to mental health interventions (Williams et al., 2022; Obidoa et al., 2011). These findings underscore the importance of understanding the



Additional keywords, including "just," "see," "feel," "talk," and "coping," appear as focal points in the analysis, shedding light on subjects related to personal experiences, emotional states, and strategies for managing challenges. Such terms enhance our understanding of the depth of discourse surrounding the personal and psychological struggles faced by the participants.

Moreover, contextual words like "awareness," "isolation," "stress," and "responsive" are observed in smaller fonts within the word cloud. These terms provide a nuanced context to the primary themes, potentially indicating the environmental and emotional conditions associated with the participants' expressed needs for support within the correctional setting. This visual representation underscores the varied and complex view of themes relevant to the study's focus on mental health and support within correctional facilities.

The size of each word in the cloud corresponds to its frequency of occurrence, with more significant words appearing more frequently in the data. The most prominent term in this word cloud is "support," indicating its central role in the participants' narratives. Correctional officers frequently discussed the importance of having robust support systems, including professional mental health services, peer support, and family support, to manage their mental health challenges.

Words like "help," "services," and "access" highlight the process of seeking and obtaining mental health services. This theme encompasses the various barriers and facilitators officers encounter when accessing mental health support, such as the



availability of services, organizational policies, and personal attitudes toward help-seeking.

Terms such as "mental," "health," and "well-being" suggest a focus on the participants' understanding and attitudes toward mental health. This theme explores how officers perceive mental health struggles and the importance they place on maintaining psychological well-being.

The word "coping" is again prominent, indicating that officers frequently discussed their coping mechanisms for dealing with job-related stress and mental health challenges. This theme includes seeking support, engaging in self-care activities, and utilizing professional mental health services.

Terms like "stigma" and "judgment" reflect the negative perceptions and social risks associated with seeking mental health services. Participants expressed concerns about being judged by colleagues and superiors, a barrier to help-seeking behaviors.

Words like "burnout" and "stress" indicate the high levels of occupational strain experienced by correctional officers. This theme underscores the need for effective stress management and mental health interventions within the correctional environment.

Terms such as "initiative" and "resilience" highlight the role of personal agency in managing mental health. Officers described taking proactive steps to seek help and improve their mental health despite the challenges and stigma.



Terms such as "labeled," "judged," and "status" reflect the stigma associated with seeking mental health services. Participants expressed concerns about being labeled or judged negatively by their peers and superiors, which can deter them from seeking the help they need.

Words like "actively," "initiative," and "honestly" suggest that many officers take a proactive approach to managing their mental health. This indicates a recognition of the importance of mental health and a willingness to take steps to maintain it despite potential barriers.

The presence of terms like "burnout" and "stress" underscores the high levels of occupational strain experienced by correctional officers. This aligns with the central theme of coping as officers seek ways to manage and mitigate these stressors.

Words such as "changed," "influenced," and "event" suggest that officers' experiences and perceptions of mental health are shaped by significant events and influences within their work environment. This may include changes in policy, organizational support, and personal experiences with mental health struggles.

Terms like "knowledge," "information," and "understanding" highlight a need for greater awareness and education about mental health. This indicates that increasing knowledge and reducing misinformation could improve mental health outcomes for correctional officers.

Both word clouds visually represent the themes discussed by correctional officers, yet they highlight slightly different focal points. The first-word cloud (Figure 1) emphasizes the participants' fundamental need for support, revealing a desire for

enhanced support mechanisms within the correctional setting. It also includes terms that reflect the emotional and environmental context of the participants' experiences, such as "awareness," "isolation," and "stress."

In contrast, the second word cloud (Figure 2) focuses more on the coping strategies and proactive measures correctional officers took. Terms like "actively," "initiative," and "honestly" indicate a proactive approach to managing mental health. Additionally, this word cloud underscores the impact of significant events and influences on officers' mental health, as suggested by terms like "changed," "influenced," and "event."

While both word clouds highlight the importance of support and coping mechanisms, the first-word cloud centers more on the expressed needs and contextual conditions, whereas the second word cloud emphasizes proactive approaches and the influence of significant experiences on mental health.

### **NVivo and COR Theory Results**

The NVivo word clouds visually represent the most frequently occurring terms in the interview transcripts from correctional officers. The following presents how these themes address the research questions regarding mental health perceptions and help-seeking behaviors among correctional officers.

Participants frequently discussed their coping mechanisms for managing job-related stress and mental health challenges, including expressed concerns about being judged or labeled negatively by colleagues and superiors, which affects their willingness to seek help.

Several participants described taking proactive steps to seek help and engage in self-care activities, demonstrating resilience. The availability and effectiveness of support systems, including peers, family, and mental health professionals, were frequently mentioned as critical for officers' mental health. High levels of occupational stress and burnout were significant concerns for many officers, impacting their mental health and job performance.

Societal stigma and negative judgments about mental health struggles pose a threat to officers' social and professional resources. Addressing these societal perceptions is crucial for reducing stigma and encouraging officers to seek mental health support without fear of judgment or resource loss.

Knowledge and information are valuable resources that enhance officers' ability to manage their mental health. Increasing awareness and education about mental health struggles and available resources can help officers conserve their cognitive and emotional resources by reducing uncertainty and misinformation.

Significant events and organizational changes can threaten or enhance resource conservation. Positive changes, such as improved mental health policies and supportive leadership, contribute to resource gain, while negative experiences lead to resource loss. Understanding these influences is crucial for designing interventions that support resource conservation and promote a healthier work environment.

These findings comprehensively overview the critical themes identified through NVivo and COR theory results. To further enhance the objectivity and depth of this research, the following section integrates NLP themes. Incorporating NLP allows for

more sophisticated text analysis, uncovering patterns and insights that may not be immediately apparent through manual coding alone. This combination of methodologies aims to minimize potential researcher bias and ensure that themes and patterns are identified based on the data rather than subjective interpretation.

### **Integration of NLP Themes**

Thematic analysis, supported by the strategic use of NVivo, was employed to enhance data organization and facilitate identifying connections between themes and subthemes. This integration ensured the findings were robust, reliable, and reflective of the participants' experiences and perceptions. Additionally, NLP tools were incorporated further to enhance the objectivity and depth of the analysis. This combination allowed for systematic data analysis presented in this chapter and interpretation offered in the next chapter, minimizing potential researcher bias and ensuring themes and patterns were identified based on the data rather than subjective interpretation. This innovative approach aligns with the Generic Pragmatic Qualitative Research framework, emphasizing methodological rigor and analytical precision (Braun & Clarke, 2006; Adu, 2019; Percy et al., 2015)

**Table 6***NLP Themes Analysis*

| Data meta-themes                                                                      | Clustering of Key Findings                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Understanding the importance of seeking Help and the influence of Stigma and Barriers | <p><b>Broad Recognition:</b> Officers widely recognize the importance of mental health in their personal and professional lives. They acknowledge the interplay between mental well-being and job performance.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Challenges in Correctional Settings                                                   | <p><b>Varied Perceptions:</b> While some view mental health as a critical aspect of overall well-being, others see it as a secondary concern, overshadowed by the immediate demands of the job.</p> <p><b>Professional Stigma:</b> A prevalent theme is the concern about being perceived as weak or unstable for seeking mental health support, reflecting a deep-seated professional stigma.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Experiences with Seeking Help                                                         | <p><b>Cultural Influences: Influence of Personal Characteristics:</b> Race, gender, and cultural background significantly shape attitudes and experiences related to mental health and help-seeking.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Impact of Stress                                                                      | <p><b>External Pressures:</b> Societal Stigma and the specific nature of the correctional environment, coupled with institutional policies, play a critical role in shaping these attitudes. Particularly among officers of color, there is an additional layer of cultural Stigma, where seeking mental health support might be viewed as a sign of weakness or failure.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Training and Awareness:                                                               | <p><b>Lack of Resources:</b> There is a notable deficiency in mental health resources within correctional settings, including a lack of trained professionals and adequate facilities.</p> <p><b>Inadequate Training:</b> Officers report insufficient training regarding mental health, which impacts their ability to recognize and address their own mental health needs.</p> <p><b>Mixed Experiences:</b> Experiences vary significantly, with some Officers reporting supportive environments while others describe an utter lack of institutional support.</p>                                                                                                                                                                                                                                                                       |
| Recommendations for Improvement:                                                      | <p><b>Need for Systemic Change:</b> There is a clear call for systemic changes in the approach to mental health within correctional facilities, emphasizing the need for better policies and practices to cope.</p> <p><b>Immediate Support:</b> Suggestions include providing immediate and accessible mental health support, such as on-site therapists and dedicated mental health days.</p> <p><b>Proactive Measures:</b> Officers recommend proactive measures in mental health care rather than the current reactive stance.</p> <p><b>Enhanced Training:</b> There was a call for more comprehensive training programs, potentially led by external mental health experts.</p> <p><b>Cultural Sensitivity:</b> Training should also encompass cultural sensitivity to address the diverse backgrounds of correctional officers.</p> |

The relevance of the data to the research questions was meticulously reviewed by evaluating the connections between highlighted statements, phrases, and predetermined

themes such as perceptions of mental health, willingness to seek help, coping with stigma, and counseling experiences. This systematic evaluation was essential to ensure alignment with the study's aims and to verify that the data extracts substantiated the research questions.

### **Research Question 1: Personal Factors**

How do stigma, coping strategies, and personal history influence correctional officers' decisions to seek psychological assistance?

#### **Theme 1: Perceptions of Mental Health**

Correctional officers' perceptions of mental health within their professional context varied significantly. Some officers recognized the importance of psychological well-being and were open to seeking help, while others were skeptical about the effectiveness of mental health services. Concerns about being labeled, judged, and facing professional and social risks were prominent.

P3 noted:

*The stigma is real—you're seen as weak or not cut out for the job.*

#### **Theme 2: Varying Views on Mental Health**

Officers expressed diverse opinions on mental health. Some saw it as essential and supported the need for professional mental health services, while others questioned the efficacy of these services and were wary of mandatory participation.

P1 shared:

I believe mental health is crucial, but I'm not sure mandatory programs are the best approach.



**Theme 3: Readiness to Seek Psychological Assistance**

Factors such as personal stress, coping strategies, burnout, and the desire for emotional support influenced officers' readiness to seek psychological assistance.

**Research Question 2: Organizational Impact**

What impact do organizational factors such as leadership support, the accessibility of mental health resources, supervisory practices, and training have on correctional officers' willingness to engage with psychological support services?

**Theme 4: Organizational Support and Leadership**

Leadership support was crucial in influencing officers' willingness to seek help. Supervisory practices played a significant role. Supportive supervisors encouraged officers to seek help, while lack of support deterred them.

**Theme 5: Accessibility and Resources**

The availability and accessibility of mental health resources significantly impacted help-seeking behaviors. Participants expressed frustration with the bureaucracy that cannot help them, especially during a crisis. P2 shared:

by the time you get the help, you're already past breaking. The system needs to be more responsive.

Several participants highlighted the inadequacy of available resources, and more mental health professionals who understand our work environment are needed.

**Theme 6: Training and Supervisory Practices**

The study found that adequate mental health training programs were often lacking. P3 observed:

They provide mental health services for inmates; why not the same for officers?

The importance of training in recognizing and addressing mental health struggles was emphasized.

P6 shared:

Regular mental health training should be mandatory for all staff.

### **Research Question 3: Societal Influence**

How do societal factors, including media portrayal, public opinion, and intervention approaches, influence the stigma associated with mental health struggles among correctional officers?

#### **Theme 7: Media Portrayal and Public Opinion**

Societal attitudes and media portrayals were found to contribute to the stigma around mental health. Participant 5 highlighted the negative impact of media portrayals.

P5 stated:

The media often portrays us in a negative light, which adds to the stigma of seeking help.

Public perception of correctional officers and their mental health needs influenced their willingness to seek help.

P4 commented:

People don't understand the stress we're under, and it makes it harder to reach out for help.

#### **Theme 8: Intervention Approaches**

The study underscored the need for targeted interventions to reduce stigma. P6

emphasized the importance of confidentiality and immediate support, noting:

Confidential and immediate support services are crucial. We need to trust that our privacy will be respected.

The effectiveness of current intervention approaches was questioned, with officers calling for more comprehensive and accessible programs.

P2 suggested:

Interventions need to be more proactive and tailored to our unique challenges.

### **Conclusion**

The findings of this study underscore the critical importance of mental health for correctional officers, revealing the multifaceted challenges they face in seeking psychological help.

### **Recognition of Mental Health Importance**

Participants widely recognized the importance of mental health in their personal and professional lives. They acknowledged the interplay between mental well-being and job performance. Mental health was perceived as a vital resource that participants strove to maintain to enhance their overall resource pool, including job performance and personal relationships. While some participants viewed mental health as critical to overall well-being, others saw it as secondary, overshadowed by immediate job demands. These varied perceptions reflected different prioritization of resources, with some participants focusing on immediate job-related resources over long-term mental health resources (Hobfoll, 1989, 2018; Violanti et al., 2017).

### ***Professional Stigma***

A prevalent concern among participants was the fear of being perceived as weak or unstable for seeking mental health support, reflecting deep-seated professional stigma. This stigma acted as a barrier to resource acquisition, as fear of losing social and professional standing deterred participants from seeking necessary help. Race, gender, and cultural background significantly shaped attitudes and experiences related to mental health and help-seeking. Personal characteristics influenced the types of resources valued and the strategies used to conserve them. Cultural stigma exacerbated resource loss and hindered help-seeking, with societal stigma, the correctional environment, and institutional policies playing critical roles in shaping attitudes, especially among participants of color who faced additional cultural stigma (Ricciardelli et al., 2020; Kitaeff, 2011).

### ***External Pressures and Resource Deficiency***

External pressures threatened resource conservation, making it harder for participants to seek help without risking further resource depletion. There was a notable deficiency in mental health resources within correctional settings, including a lack of trained professionals and adequate facilities. This scarcity of mental health resources represented a significant threat to resource conservation, leaving participants vulnerable to stress and burnout (Brower, 2013; Carleton et al., 2020).

### ***Insufficient Training***

Participants reported insufficient training regarding mental health, impacting their ability to recognize and address their own needs. Inadequate training limited their ability

to develop and utilize coping strategies, leading to resource depletion. Experiences with seeking help varied significantly, with some participants reporting supportive environments and others describing a lack of institutional support. These mixed experiences reflected the variability in resource gain and loss, with supportive environments enhancing resource pools and lack of support exacerbating resource loss. The stressful and traumatic nature of correctional work significantly affected participants' mental health. Job stress and trauma represented ongoing threats to resource conservation, making it crucial for participants to find effective coping mechanisms to prevent resource depletion (Violanti et al., 2017; Ricciardelli et al., 2020).

### ***Call for Systemic Changes***

There was a clear call for systemic changes in the approach to mental health within correctional facilities, emphasizing better policies and practices. Systemic changes could create a supportive environment that enhances resource conservation and promotes mental well-being. Suggestions included providing immediate and accessible mental health support, such as on-site therapists and dedicated mental health days. Immediate support could prevent resource loss and promote resource gain, helping officers manage stress more effectively (Carleton et al., 2020; Fusco et al., 2021).

### ***Proactive Measures and Comprehensive Training***

Participants recommended proactive measures in mental health care rather than the current reactive stance. Proactive measures would help conserve resources by addressing issues before they escalate, reducing overall resource depletion. There was a call for more comprehensive training programs, potentially led by external mental health

experts. Enhanced training would equip officers with the tools to conserve their mental health resources and build resilience. Training should encompass cultural sensitivity to address the diverse backgrounds of correctional officers. Culturally sensitive training would help conserve resources by addressing specific needs and reducing culturally based resource depletion (Ricciardelli et al., 2021; Chen et al., 2022).

### ***Application of COR Theory***

When applied through the COR theory lens, the analysis supported the complex dynamics of mental health perceptions and help-seeking behaviors among correctional officers. The critical themes highlighted the importance of coping strategies, support systems, stigma reduction, stress management, training, and cultural sensitivity in conserving and enhancing resources (Hobfoll, 1989, 2018; Halbesleben et al., 2014). These insights were crucial for developing targeted interventions that addressed correctional officers' specific needs and challenges, ultimately promoting better mental health and well-being within this high-stress profession.

### ***Methodological Rigor***

Chapter 4 explored the data collection and analysis processes used in this study. The findings underscored the need for targeted interventions to support the mental health and well-being of correctional officers in high-stress correctional environments. Key themes were identified and discussed, highlighting the personal, organizational, and societal factors influencing correctional officers' mental health perceptions and help-seeking behaviors. Each theme was named and described in detail, explaining how they related to the broader research questions and theoretical framework. The thorough process

of thematic analysis, which ranged from data familiarization to reporting the findings, ensured that the conclusions drawn were well-founded and rigorously supported by the evidence. This methodical approach enhanced the credibility of the research and contributed to the field by providing detailed insights into correctional officers' mental health perceptions and psychological help-seeking behaviors. All transcripts were prepared and reviewed using standardized formatting to facilitate a consistent and error-free analysis. This uniformity in document preparation helped maintain focus during the analytical process and reduced the likelihood of errors in data interpretation.

This chapter transitioned from the methodological setup detailed in Chapter 3 into the core findings of the research, which focused on the mental health perceptions and psychological help-seeking behaviors of correctional officers. By meticulously following a structured approach to thematic analysis, the study effectively navigated from data collection to elucidating themes, providing a robust foundation for interpreting complex issues.

Rigorous application of thematic analysis ensured a methodologically sound exploration of the qualitative data and enabled a substantive examination of the emergent themes. These themes, central to understanding the intricacies of mental health challenges and the dynamics of help-seeking among correctional officers, were detailed in this chapter. The analysis underscored the critical relationships between individual experiences and broader systemic issues, highlighting the implications for mental health support and policy development within correctional environments.

The findings presented in this chapter were directly the result of the stringent analytical process undertaken. They offered valuable insights into correctional officers' specific needs and barriers, contributing significantly to the ongoing discussions about improving mental health interventions and developing supportive policies in correctional settings. This narrative aligned with the theoretical and methodological framework established earlier and enhanced our understanding of a pivotal aspect of correctional officers' professional and personal lives.

Themes identified through NVivo and NLP analyses were closely aligned with those found in the manual coding process. Both methods highlighted the critical importance of mental health, the impact of stigma and barriers, the challenges within correctional settings, the significant stress faced by officers, and the varied experiences with seeking help. The recommendations for improvement also reflected a consensus on the need for better resources, training, and systemic changes to support correctional officers' mental health effectively. These consistent findings underscored the validity and reliability of the identified themes and provided a robust foundation for developing targeted interventions to promote mental well-being in this high-stress profession..

### **Summary**

This chapter involved exploring data collection and analysis processes in this study. I highlighted the importance of trustworthiness and measures to ensure credibility, transferability, dependability, and confirmability. A purposeful sampling approach was used to recruit six participants who were current or former correctional officers in



Maryland with experience in mental health counseling. Semi-structured interviews were conducted remotely via Zoom due to the COVID-19 pandemic.

Thematic analysis was employed to identify key themes from interview transcripts using Braun and Clarke's (2006) six-step model. NVivo 12 facilitated data management and coding. NLP was used to supplement analysis and provide objective interpretation. A meticulous approach and audit trail of data analysis process were maintained to ensure trustworthiness.

Chapter 4 includes findings from semi-structured interviews with six correctional officers. These included profound effects of job-related stress and exposure to traumatic events on officers' mental health, stigma attached to seeking mental health services within correctional environments, and perceived deficiencies in current support systems.

The chapter commenced with an overview of gathered data. I then described the context and environment in which the study was conducted and relevant situational factors. Participants' demographic details were provided to understand diversity in terms of gender, age, and experience among the sample. Methods and procedures that were used for data collection were outlined to ensure transparency and replicability. Analytical processes to interpret data were explained, including thematic analysis and NLP. Measures to ensure credibility, transferability, dependability, and confirmability of findings were discussed to reinforce the trustworthiness of research.

Main findings were organized in terms of themes and subthemes through thematic analysis. Key themes included stigma and judgment, the need for knowledge and information, job stress, supportive leadership, immediate and accessible support, and

culturally-sensitive training. Themes that were identified through manual coding were closely aligned with those derived from NVivo and NLP analyses, providing a comprehensive understanding of data. I summarized essential findings and their implications, linking them to the research questions and theoretical framework.

Chapter 5 includes a detailed discussion of results and their implications. I interpret the significance of themes that were identified in Chapter 4, providing a comprehensive understanding of how these insights can inform future mental health interventions and policies for correctional officers. Recommendations for practical applications and areas for future research are also explored, aiming to address unique challenges correctional officers face and enhance their mental health and overall well-being.

## Chapter 5: Discussion, Conclusions, and Recommendations

Chapter 5 includes findings from semi-structured interviews with six correctional officers, focusing on job-related stress, stigma, and deficiencies in support systems. I discuss implications, recommendations for practice and policies, contributions to social change, conclusions, and recommendations.

Key themes were stigma and judgment, need for knowledge and information, job stress, supportive leadership, accessible support, and culturally-sensitive training. These themes were identified through manual coding, NVivo analyses, and NLP to ensure credibility, transferability, dependability, and confirmability of findings. These themes highlight barriers officers face in terms of seeking psychological support and underscore the need for comprehensive mental health programs that are tailored to their unique challenges. Measures to ensure credibility, transferability, dependability, and confirmability of findings were discussed to reinforce research trustworthiness.

This chapter includes an examination of implications of findings on mental health perceptions and psychological help-seeking behaviors among correctional officers. Using the GPQRA, I offer a framework for exploring these issues within the correctional setting. This facilitated an understanding of dynamics governing mental health perceptions and actions among officers.

Three research questions guided this study:

RQ1: How do factors such as stigma, coping strategies, and personal history influence correctional officers' decisions to seek psychological assistance?

RQ2: What is the impact of organizational factors, including leadership support, accessibility of mental health resources, supervisory practices, and training on correctional officers' willingness to engage with psychological support services?

RQ3: How do societal factors, including portrayal in the media, public opinion, and intervention approaches influence stigma associated with mental health struggles among correctional officers?

Thematic analysis revealed several critical challenges and needs highlighted by correctional officers. Findings underscored a pervasive stigma associated with mental health struggles within the correctional environment profoundly influencing officers' willingness to seek help. Concerns about being labeled as weak or unstable deter many from pursuing necessary psychological assistance, highlighting the need for stigma reduction strategies (Corrigan et al., 2014; Vogel et al., 2013).

The study showed while some organizational support exists, significant gaps remain, particularly regarding mental health resources, training, and supportive supervisory practices. These gaps often leave officers feeling unsupported and skeptical about benefits of available mental health programs. Societal attitudes and media portrayals contribute to mental health stigma. These external influences shape internal perceptions and behaviors, making societal change pivotal in terms of improving mental health outcomes in correctional settings (Thompson et al., 2015; Watson & Corrigan, 2013).

Using the COR theory reluctance to seek help can be considered a protective or a strategy to avoid further resource loss such as social credibility or professional standing

(Hobfoll et al., 2018). There is a critical need for comprehensive training programs that educate officers about mental health and equip them with practical tools to manage stress and seek help discreetly and effectively (Fisher et al., 2017; Lambert et al., 2018). Correctional institutions should consider policy reforms that facilitate more accessible mental health resources, reduce the stigma of seeking help, and ensure leadership practices support these initiatives (Gunderson et al., 2019; Lambert et al., 2018). Broader cultural changes are necessary to alter public and media narratives involving mental health in correctional environments. These changes could help mitigate external pressures that influence internal stigmas (Corrigan et al., 2014; Vogel et al., 2013).

I used manual coding and NLP to verify critical patterns and trends. This comprehensive approach ensured a robust understanding of data and highlighting of significant themes. Measures to ensure credibility, transferability, dependability, and confirmability of findings included detailed documentation, triangulation, and maintaining an audit trail, reinforcing validity of the study. Triangulation was achieved using multiple data sources and methods to cross-verify results. An audit trail was used to document the research process, decisions, and changes to enhance transparency and accountability. I aimed to synthesize key findings, explore their broader implications, and provide actionable recommendations for improving mental health support for correctional officers.

### **Interpretations of Findings**

Findings from Chapter 4 revealed critical insights regarding mental health perceptions and help-seeking behaviors of correctional officers. Thematic analysis

highlighted the pervasive stigma within the correctional environment influencing officers' willingness to seek help. This chapter involved examining implications of findings, interpreting them using the COR theory, and recommendations for practice and policy. Key themes are discussed, highlighting personal, organizational, and societal factors influencing correctional officers' mental health perceptions and help-seeking behaviors.

### **Perceptions of Mental Health Stigma**

Correctional officers recognize the importance of mental health in their personal and professional lives, viewing it as a vital resource that enhances job performance and personal relationships (Violanti, 2020). They understand the connection between mental well-being and effectiveness at work (Bezerra Carvalho & Santos, 2022; Ricciardelli, Power, & Medeiros, 2021). However, perceptions of mental health within their professional context vary significantly. While some officers appreciate the value of psychological well-being and are open to seeking help, others question the effectiveness of mental health services. There is a divide between those who see mental health support as essential and those who are wary of mandatory participation.

Concerns about being labeled, judged, and facing professional and social risks are common. As Participant 3 noted, "The stigma is real—you're seen as weak or not cut out for the job" (Karaffa & Tochkov, 2013). This aligns with the COR theory, which suggests that individuals strive to protect and build resources, and stress arises from the potential loss of these resources (Hobfoll, 1989). For correctional officers, the fear of losing social

standing or respect among peers—valuable resources—explains their reluctance to seek help.

The study highlights that stigma surrounding mental health significantly impacts officers' willingness to seek psychological support (Jessiman-Perreault et al., 2021; Ricciardelli et al., 2019; Denhof et al., 2014). This stigma, deeply ingrained in correctional culture, values toughness and self-reliance over vulnerability and seeking assistance (Violanti et al., 2017). As a result, many officers avoid seeking help to protect their social standing and to avoid being perceived as weak or unfit for duty.

Participants consistently expressed concerns about being labeled as weak or unreliable. For example, Participant 3 stated, "The stigma is real—you're seen as weak or not cut out for the job" (Karaffa & Tochkov, 2013). This fear of judgment from peers and supervisors creates a significant barrier to accessing mental health resources, even when officers recognize the need for support. Moreover, the study reveals that stigma is perpetuated not only by colleagues but also by organizational structures. Officers who sought help were often met with skepticism or reprimand, reinforcing the perception that mental health struggles are a sign of weakness. This finding underscores the significant barriers to accessing mental health support within correctional facilities (Jessiman-Perreault et al., 2021; Ricciardelli et al., 2019).

### ***Challenges in the Correctional Setting***

Correctional officers face numerous challenges in their work environment that impact their mental health. These include high-stress conditions, exposure to violence, and long working hours. Participants described every shift as testing their limits, with

many officers spending hours on high alert, leading to complete physical and psychological exhaustion. This is supported by research documenting the high levels of stress and burnout among correctional staff (Lambert et al., 2018; Ricciardelli, Power, & Medeiros, 2021).

According to the COR theory, ongoing stress leads to resource depletion, which, if not adequately addressed, can result in declining mental health (Hobfoll et al., 2018). The constant threat of resource loss, including physical and emotional resources, exacerbates the stress correctional officers face daily. Research confirms that the high-stress nature of correctional environments and the lack of adequate support systems significantly increase stress, emphasizing the need for improved mental health resources (Ricciardelli, et al., 2021). The study highlighted several bureaucratic hurdles correctional officers face when seeking mental health support, including lengthy wait times, complex procedures, and lack of confidentiality. These challenges exacerbate the existing barriers to help-seeking behaviors.

Participants reported that accessing mental health support within correctional facilities often involves extensive wait times, discouraging them from pursuing psychological assistance. As one participant noted, "By the time you get through the red tape, it's almost too late. You're already past the point where you needed the help." Literature supports this, indicating that delays in accessing mental health care can worsen outcomes for individuals in high-stress professions (Smith et al., 2018). In addition to long wait times, officers highlighted the complexity of procedures required to access mental health services. Extensive forms, approvals, and navigating multiple



administrative levels add to their stress. Moreover, concerns about confidentiality emerged as a significant issue. Officers feared that their mental health information might be disclosed to supervisors or peers, leading to stigma or professional repercussions. As one participant expressed, "The process is just too complicated and makes you feel exposed. There's no privacy, and everyone seems to know your business." These bureaucratic challenges align with the COR theory, which suggests that the perceived loss of valuable resources—such as time, privacy, and professional standing—can deter individuals from seeking help. The findings emphasize the need for correctional facilities to streamline access to mental health services and ensure confidentiality to encourage more officers to seek support.

Thematic analysis revealed several critical challenges that correctional officers face, further deepening the understanding of their mental health perceptions and help-seeking behaviors. Correctional officers often experience stigma associated with mental health struggles, which significantly influences their decision to seek psychological support. The fear of being labeled as weak or incapable discourages many from pursuing necessary assistance. This aligns with findings by Corrigan et al. (2014) and Vogel et al. (2013), who emphasize the impact of stigma on help-seeking behaviors in high-stress professions. There is a clear need for correctional officers to be better informed about mental health resources and support mechanisms. A lack of awareness regarding mental health symptoms and available services contributes to the underutilization of support systems. Studies show that increased training and awareness programs lead to better self-management and mental health outcomes among law enforcement personnel (Smith &

Ferdik, 2017). The high levels of stress associated with correctional work—including exposure to violence, long hours, and constant vigilance—have a profound impact on officers' mental health. This stress often leads to burnout, PTSD, and other mental health issues, as documented in the literature (Violanti et al., 2022; Carleton et al., 2020). The findings underscore the need for systemic interventions to address the unique stressors faced by correctional officers.

Leadership plays a crucial role in promoting mental health initiatives. Officers who perceive their supervisors as supportive are more likely to engage in help-seeking behaviors. This finding supports the COR theory, which suggests that supportive environments can mitigate resource loss and encourage resilience. Other studies also highlight the importance of leadership in fostering a culture where mental health discussions are normalized (Ricciardelli et al., 2021; Smith & Jones, 2017).

The lack of accessible mental health resources was a recurring theme. Officers emphasized the need for more on-site mental health professionals, regular check-ins, and culturally-sensitive training programs. Such resources would help address barriers to help-seeking and improve overall mental health outcomes. Literature supports these recommendations, indicating that culturally-sensitive interventions can significantly enhance the effectiveness of mental health programs (Lewis et al., 2022; Ricciardelli, et al., 2021).

### ***Experience with Seeking Help***

Correctional officers who sought mental health support often faced challenges related to accessibility and responsiveness. As Participant 2 shared, "After seeing things

that no one should, you need someone to talk to, but the paperwork, the waiting—it's discouraging. By the time you get the help, you're already past breaking." This sentiment underscores the need for more immediate and accessible mental health resources to prevent the escalation of stress and trauma.

Workplace culture significantly influences decisions to seek help. Participant 3 noted, "My buddy thought about getting help but backed out because he heard others talking smack about someone who did. We can't have that kind of gossip; it makes everyone clam up." This observation aligns with research highlighting the role of organizational culture in shaping help-seeking behaviors (Violanti et al., 2022; Russo et al., 2020).

Stigma and judgment emerged as critical factors deterring officers from seeking psychological assistance. The pervasive stigma associated with mental health struggles within correctional environments profoundly impacts willingness to seek help. Concerns about being perceived as weak or unstable deter many officers from pursuing necessary support (Corrigan et al., 2014; Vogel et al., 2013). Fear of judgment from peers and supervisors further exacerbates this reluctance, with officers worried about potential professional repercussions, such as being labeled mentally unstable or incapable (Karaffa & Tochkov, 2013).

Participants also reported varied experiences when seeking mental health support, reflecting the COR theory's concept of Resource Investment. Officers who encountered positive experiences with counseling were more likely to reinvest in these resources. Conversely, those facing barriers or negative outcomes often hesitated to seek further

help, as the risk of resource loss—such as professional credibility or emotional stability—outweighed the perceived benefits.

The Gain Paradox is evident in accounts where minor improvements in mental health are overshadowed by the persistent stress of the correctional environment. As Participant 5 remarked, "Every shift tests your limits; you spend hours on high alert, and it drains you completely." This emphasizes the need for comprehensive mental health interventions that provide substantial and sustained support, rather than short-term relief.

### *Seeking Help Concerns*

Participants expressed significant concerns about seeking help, particularly due to fears of judgment and professional repercussions. As Participant 3 noted, "Seeking help feels like putting a target on your back; it's like you're exposing your weaknesses to everyone." This fear of being perceived as weak or incapable deters many officers from pursuing necessary psychological assistance. COR theory posits that the potential loss of social esteem, seen as a valuable resource, discourages officers from seeking help (Hobfoll, 1989).

Stigma remains a substantial barrier within correctional facilities, underscoring the need for a cultural shift to support mental health initiatives (Zimmerman et al., 2023; Woods et al., 2020). Professional stigma, in particular, impedes resource acquisition, as fears of losing social and professional standing deter officers from seeking necessary help (Jessiman-Perreault et al., 2021; Williams et al., 2022). Moreover, race, gender, and cultural background significantly shape attitudes and experiences related to mental health and help-seeking (Williams et al., 2022; Ricciardelli et al., 2021). Personal characteristics

influence the types of resources valued and the strategies employed to conserve them (Carleton et al., 2020).

### ***Coping with Stigma***

To cope with the stigma surrounding mental health struggles, many correctional officers rely on personal coping strategies rather than seeking formal psychological help. As Participant 2 stated, "I just handle it on my own; the support we get isn't enough to deal with what we face, so I keep to myself." This reliance on personal mechanisms underscores the inadequacies of available support systems. According to the COR theory, when external support is insufficient, individuals attempt to protect and rebuild resources independently (Hobfoll, 1989). Ricciardelli, et al. (2021) found that officers often turn to informal networks due to the perceived inadequacies of formal systems.

The study identified various effective and ineffective coping mechanisms. Many participants reported that therapy provided a beneficial outlet for decompressing and managing emotions. Participant 1 noted, "Therapy gave me an outlet to decompress and manage my emotions effectively." Mental health awareness training was also instrumental in understanding and managing stress. Participant 1 remarked, "Mental health awareness training changed my perspective on daily operations and how to deal with people."

Participants emphasized the importance of regular mental health check-ins or mandatory therapy sessions to process emotions and prevent burnout. Participant 2 suggested, "It should be mandatory to have regular mental health check-ins to process emotions." Supervisors who recognized signs of mental health issues and provided

resources were valued. Participant 1 shared, "As a supervisor, I noticed the signs and provided resources, which made a difference." Engaging in self-care activities, such as going to the gym, was another strategy mentioned as effective in managing stress and maintaining mental health. Participant 5 stated, "Going to the gym helped me manage stress and maintain my mental health."

The study also revealed ineffective coping mechanisms. Some participants indicated that alcohol and substance use, although common, were ultimately ineffective and led to further issues. Participant 3 remarked, "Drinking was rampant but did not solve the underlying mental health problems." Avoidance of mental health services due to stigma and fear of being perceived as weak often resulted in worsening mental health conditions. As Participant 2 explained, "Stigma and fear of being perceived as weak made me avoid seeking help."

Criticism was directed at the Employee Assistance Program (EAP), described as bureaucratic and impersonal. The lack of immediate access to mental health professionals and concerns about confidentiality discouraged many from seeking help. Participant 2 criticized the program, stating, "The EAP process was bureaucratic and discouraged me from seeking help." Furthermore, many participants felt that mental health resources were not adequately promoted or made accessible, leading to underutilization of available services. As Participant 4 noted, "Mental health resources were not promoted or made accessible." The variability in experiences with mental health services highlights the need for improving the quality and responsiveness of these services for correctional officers.

Addressing these challenges is crucial to enhancing mental health outcomes and ensuring officers receive the necessary support to cope with the demanding nature of their work..

### ***Decision to Seek Help***

The decision to seek help among correctional officers is profoundly shaped by fears of stigma and concerns over confidentiality, often outweighing the perceived benefits of available mental health resources. Officers frequently weigh these potential risks against the need for psychological assistance. As Participant 2 noted, "I don't know how, but your supervisor and your co-workers will always know when you're going to EAP, so I felt like there's a leak somewhere." This pervasive fear of stigma and its impact on help-seeking behaviors aligns with the COR theory, which suggests that the potential loss of social esteem, seen as a valuable resource, discourages officers from seeking help (Hobfoll, 1989).

Confidentiality and trust in mental health services are critical to encouraging help-seeking behaviors, as emphasized by Ricciardelli et al. (2021). The literature supports these findings, highlighting significant barriers to accessing mental health services in correctional settings, such as concerns over confidentiality and the fear of professional repercussions (Smith & Jones, 2017; Wills et al., 2021). Officers who have had positive experiences with counseling or therapy are generally more inclined to seek help in the future, whereas those with negative experiences or who perceive available services as inadequate are less likely to pursue psychological assistance.

This variability in help-seeking decisions underscores the need to enhance the quality and responsiveness of mental health services for correctional officers. The process

of deciding whether to seek help involves a complex evaluation of potential benefits against perceived risks. COR theory posits that when officers perceive a threat to their social standing or professional reputation, they may be less likely to seek help, even when it is necessary. Addressing these barriers by improving the perceived adequacy, confidentiality, and accessibility of mental health services is essential for promoting psychological well-being among correctional officers and mitigating the long-term consequences of untreated mental health issues.

### ***Experience of Seeking Help***

Officers who did seek help often faced additional challenges related to the accessibility and responsiveness of mental health services. Participant 2 stated that after seeing things that no one should, you need someone to talk to, but the paperwork, the waiting—it's discouraging. By the time you get the help, you're already past breaking. This comment reflects the challenges related to the accessibility and responsiveness of mental health services, suggesting that more immediate and easily accessible mental health resources could mitigate the escalation of stress and trauma. Participant 3 highlighted how workplace culture influences individual decisions: My buddy thought about getting help but backed out because he heard others talking smack about someone who did. We can't have that kind of gossip; it makes everyone clam up. These insights are supported by Violanti et al. (2022) and Russo et al. (2020).

The theme of stigma and judgment emerged prominently with personal factors influencing correctional officers' decisions to seek psychological assistance. Officers reported a pervasive stigma associated with mental health struggles within the



correctional environment, which profoundly influenced their willingness to seek help. Concerns about being perceived as weak or unstable deterred many officers from pursuing necessary psychological assistance (Corrigan et al., 2014; Vogel et al., 2013). The fear of judgment from peers and supervisors was a significant barrier, as officers worried about the potential professional repercussions of being labeled as mentally unstable or incapable (Karaffa & Tochkov, 2013).

### **Research Questions**

This study addressed three primary research questions focusing on the individual, organizational, and societal factors influencing psychological help-seeking behaviors among correctional officers. The findings revealed that personal experiences, workplace culture, and societal perceptions significantly impact officers' willingness to seek help.

### **Individual Factors**

Stigma, coping strategies, and personal history emerged as critical factors in shaping help-seeking behaviors. Officers with positive experiences in mental health care were more likely to seek assistance, while those who encountered stigma or negative outcomes were hesitant. The entrenched stigma within correctional facilities promotes an image of toughness and self-reliance, discouraging officers from admitting to mental health struggles. This stigma, coupled with a preference for self-reliance and informal support networks, often leads officers to manage stress independently, deterring professional assistance.

### ***Organizational Factors***

Organizational factors play a crucial role in facilitating or hindering access to mental health services. Supportive leadership and accessible resources were essential in encouraging help-seeking behavior. Conversely, a lack of trust in confidentiality, inadequate supervisory support, and insufficient mental health training were significant barriers. Officers were more likely to engage with psychological support when leadership promoted mental health initiatives and provided accessible resources.

### ***Societal Factors***

Societal perceptions, particularly media portrayal and public opinion, also influence help-seeking behaviors. The negative portrayal of correctional officers and mental health in the media contributes to internalized stigma, making officers reluctant to seek help. These societal attitudes reinforce the cycle of stigma and untreated mental health issue.

The COR theory, posits when resources are threatened or lost, individuals experience stress, and the more significant the loss, the more profound the stress. Applying this theory to the mental health of correctional officers provides a comprehensive framework for understanding their psychological help-seeking behaviors.

Resource loss suggests that resource loss is more impactful than resource gain. For correctional officers, the loss of psychological resources such as mental stability, social support, and professional reputation can be particularly detrimental. Participant 3 highlighted this by stating, "The stigma is real—you're seen as weak or not cut out for the job," illustrating how the fear of losing social respect prevents many from pursuing

necessary psychological assistance. This aligns with the COR theory, where the perceived threat of resource loss outweighs the potential gain from seeking help.

Resource investment directs that officers need to invest resources to protect against resource loss, recover from losses, and gain resources. However, correctional officers who have experienced negative outcomes or lack of support after seeking mental health help may be hesitant to reinvest in seeking further assistance. Participant 2's remark, "I've had good experiences with counseling, but I know others who haven't been so lucky," reflects this hesitancy, which aligns with the idea that resource investment is avoided if past investments did not yield positive returns.

Initial resource gains are often undervalued compared to the loss of those same resources. While some officers noted benefits from therapy, the ongoing stress of their work environment suggests that these gains might be insufficient to counterbalance the persistent threats of resource loss, as described by Participant 5: "Every shift tests your limits; you spend hours on high alert, and it drains you completely."

Resources are interconnected. Supportive leadership and accessible mental health resources can enhance overall well-being. Conversely, environments lacking these supports can lead to a negative effect, where the loss of one resource leads to the loss of others. Participant 4 noted, "When leadership shows that it's okay to talk about these issues, it makes a big difference in how we cope," underscoring the importance of supportive leadership in facilitating help-seeking behaviors.

Desperation and resource loss spiral also addresses initial losses leading to further losses, and downward spirals. This was evident in participants who described

compounded stress, lack of support, and fear of stigma. Participant 2's experience, "Seeking help feels like putting a target on your back," exemplifies how the initial loss of privacy or professional standing can trigger further resource losses, leading to increased stress and reluctance to seek future help.

The COR theory and its corollaries provide a significant understanding on psychological help-seeking behaviors of correctional officers. The fear of resource loss, the complexities of resource investment, and the potential for both positive and negative resource caravans play crucial roles in shaping officers' decisions about seeking mental health support. By applying these corollaries, this study illuminates the profound challenges correctional officers face in accessing and benefiting from mental health services, emphasizing the need for targeted interventions that address these specific dynamics.

Key resources for correctional officers include emotional stability, support from colleagues, and physical safety. Resource loss has a greater psychological impact than resource gain. Loss of psychological resources, such as social standing and mental stability, significantly influences officers' decisions to seek help. Officers may hesitate to invest in psychological resources if previous efforts did not yield significant benefits, reflecting risks associated with resource investment. Initial gains in mental health are often undervalued compared to perceived losses, especially in high-stress environments like correctional facilities. Additionally, the concept of resource caravans highlights how a supportive environment can lead to resource accumulation, while lack of support can trigger further losses, resulting in a downward spiral of resource depletion.

While some organizational support exists, significant gaps remain, particularly in mental health resources, training, and supportive supervisory practices. These gaps often leave officers feeling unsupported and skeptical about the benefits of available mental health programs. Societal attitudes and media portrayals also contribute to mental health stigma, shaping internal perceptions and behaviors. Therefore, societal change is crucial in improving mental health outcomes in correctional settings (Thompson et al., 2015; Watson & Corrigan, 2013). Reluctance to seek help can be seen as a protective strategy to avoid further resource loss, such as social credibility or professional standing (Hobfoll et al., 2018).

### ***Organizational Impact***

Organizational factors, particularly leadership support, significantly influenced officers' propensity to engage with psychological support services. Despite widespread industry and academic awareness of the negative impact of workplace adversity on employee and organizational functioning, little is currently known about how correctional officers attempt to manage their perception of workplace adversity (Trounson et al., 2016). The limited existing research examining correctional officers' responses to workplace adversity provides mixed results (Gould et al., 2013).

Officers who perceived their supervisors and organizational leaders as supportive of mental health initiatives were more inclined to seek assistance. Supportive leadership was pivotal in fostering a culture where discussions regarding mental health challenges could occur openly, free from the fear of judgment or adverse professional consequences (Ricciardelli et al., 2021; Smith & Jones, 2017). Furthermore, the accessibility of mental

health resources, such as on-site therapists and easily accessible counseling services, significantly affected officers' willingness to seek help. Barriers like bureaucratic hurdles and extended waiting periods deterred individuals from seeking assistance, while readily available resources facilitated the process (Violanti et al., 2022).

Organizational dynamics, particularly the role of leadership, are pivotal in influencing correctional officers' engagement with psychological support services. The Resource Caravan corollary explains how supportive leadership can cluster resources together, making it easier for officers to access and benefit from mental health services. Officers who perceive their supervisors as supportive are more likely to utilize available mental health resources.

As Participant 4 noted, "When leadership shows that it's okay to talk about these issues, it makes a big difference in how we cope," underscoring the significant impact that leadership support has on fostering a positive environment for help-seeking. Moreover, the accessibility of mental health resources, including on-site therapists and easily accessible counseling services, played a key role in influencing officers' help-seeking behaviors.

The availability and ease of access to mental health resources were associated with increased utilization rates. Conversely, barriers like bureaucratic processes and lengthy waiting times hindered officers from seeking help, further exacerbating their stress and mental health concerns (Violanti et al., 2022).

In addition to leadership support and resource accessibility, supervisory practices and training were identified as factors that impact officers' help-seeking behaviors.

Supportive supervisors who actively promote mental health resources and participate in relevant training positively influence their teams. Comprehensive training programs that are culturally sensitive and tailored to address the unique challenges faced by correctional officers can enhance their ability to cope with stress and seek help when necessary (Lewis et al., 2022). This aligns with the Resource Caravan corollary, where positive supervisory practices contribute to a cascade of resource gains, improving overall mental health and resilience.).

### ***Societal Influence***

Societal factors heavily influence the stigma surrounding mental health among correctional officers. Media representations, public opinion, and broader societal attitudes contribute to this stigma, often making officers reluctant to seek help (Williams et al., 2022). The Primacy of Resource Loss corollary within COR theory is particularly relevant, as the fear of losing social esteem due to societal judgments can be a significant barrier to seeking psychological support. This issue is especially acute among officers of color, who may face additional cultural stigma and barriers to accessing mental health services (Obidoa et al., 2011; Williams et al., 2022).

Interventions that promote mental health awareness and reduce stigma are crucial. Public health campaigns, educational programs, and community initiatives can help create a more supportive environment that encourages officers to seek the help they need (Zimmerman et al., 2023). By addressing societal attitudes and promoting positive mental health practices, these efforts can effectively reduce stigma and improve help-seeking behaviors.

## **Training and Supervisory Practices**

Training and supervisory practices emerged as key factors in promoting mental health and reducing stigma within correctional facilities. Officers stressed the importance of having supportive supervisors and leaders who actively promote mental health initiatives and foster a culture where discussing mental health struggles is free from judgment or professional repercussions (Ricciardelli et al., 2021; Smith & Jones, 2017). Leadership that prioritizes mental well-being can significantly increase officers' willingness to engage with mental health resources.

Comprehensive, culturally sensitive training programs are essential for equipping officers with the tools needed to manage stress and seek help. Such training should address the specific challenges of working in high-stress environments and provide practical coping strategies. External mental health experts can offer fresh perspectives, enhancing officers' ability to recognize and address their mental health needs (Lewis et al., 2022; Ricciardelli, et al., 2021).

Training should also focus on cultural sensitivity, ensuring that officers from diverse backgrounds feel supported in seeking help. By incorporating cultural resources, these programs can reduce stigma and improve help-seeking behaviors, particularly among officers who may face additional cultural barriers (Violanti, 2020).

Participants expressed a need for more in-depth mental health training. As Participant 5 pointed out, "Training should be more in-depth and cover how to deal with our own mental health. Bringing in outside experts could give us a fresh perspective."



Other participants echoed this, emphasizing the importance of practical exercises and safe spaces for discussing mental health challenges (Jessiman-Perreault, et al., 2021).

### ***Supervisory Practices***

Supervisory practices play a crucial role in influencing correctional officers' willingness to engage with psychological support services. Supportive supervisors who actively promote mental health resources and participate in relevant training foster a positive environment that encourages help-seeking behaviors. This aligns with COR theory, which suggests that supportive environments can mitigate resource loss and enhance resilience (Smith & Jones, 2017). The study revealed a significant gap in officers' awareness of mental health resources and support mechanisms. This lack of awareness contributes to the underutilization of available services, a finding echoed by Smith and Ferdik (2017), who demonstrated that increased training and awareness lead to better self-management and mental health outcomes among law enforcement personnel.

The study identified the lack of accessible mental health resources as a recurring theme. Officers highlighted the need for more on-site mental health professionals, regular mental health check-ins, and culturally-sensitive training programs to address the barriers to help-seeking and improve overall mental health outcomes. The literature supports these recommendations, indicating that culturally-sensitive interventions can significantly enhance the effectiveness of mental health programs (Lewis et al., 2022; Ricciardelli, et al., 2021). Officers from diverse cultural backgrounds often face additional challenges when seeking mental health support, making culturally-sensitive training particularly important in reducing stigma and promoting help-seeking behaviors across all groups.

The study also revealed significant bureaucratic challenges that correctional officers encounter when seeking mental health support. Lengthy wait times, complex procedures, and concerns about confidentiality were frequently cited as barriers. These challenges align with COR theory, which suggests that the perceived loss of valuable resources, such as time, privacy, and professional standing, can deter help-seeking behaviors. Lengthy wait times often discourage officers from pursuing psychological assistance, as they feel their immediate needs are not being prioritized, a finding consistent with existing literature (Smith et al., 2018). Moreover, the complex procedures involved in accessing services, coupled with fears about confidentiality, exacerbate the reluctance to seek help, highlighting the need for streamlined processes and assured privacy to encourage more officers to utilize mental health services.

The findings underscore the urgent need for systemic changes within correctional facilities to improve mental health support for officers. Implementing on-site therapists, mandatory mental health screenings, and culturally-sensitive training programs are essential steps towards creating a more supportive environment that encourages help-seeking and promotes overall well-being. By addressing these barriers, correctional facilities can significantly enhance the mental health outcomes for their officers, aligning with the principles of COR theory that emphasize the protection and restoration of critical resources).

### ***Impact of Job Stress***

Correctional officers face significant stress and challenges in their work environment, leading to a multitude of mental health issues. The correctional setting

exposes officers to various stressors, including unreasonable demands from inmates, unexpected behaviors, confrontations, and riots (Hamzah, 2024). Persistent stress often results in burnout, unsafe working conditions, high turnover, absenteeism, and decreased productivity (Willemse, 2020). Research consistently shows that a substantial percentage of correctional officers' experience burnout, finding their roles highly stressful (Gould et al., 2013).

Elevated strain experienced by correctional officers is associated with serious adverse outcomes, including shortened life expectancy, increased suicide rates, and a heightened risk of mental health disorders (Guros, 2000). Ineffective coping mechanisms, such as avoidant behaviors, are linked to increased anxiety and burnout (Gershon et al., 2008). High-stress environments not only lead to psychological distress but also foster increased aggressiveness and a constant state of being "on guard," which extends beyond work into personal life. This vigilance makes it difficult for officers to relax and disconnect from duties, leading to significant emotional and psychological strain.

Intense work environments contribute to a persistent state of alertness and stress, which adversely affects relationships and overall quality of life. Officers often struggle to mentally disengage from work, especially when dealing with inmates who have committed severe crimes. Ongoing mental engagement can lead to intrusive thoughts, making it difficult to find peace outside of work. "The psychological toll is profound," noted participant 2 and "the job messes with your psyche; they treat you as their robot. It's hard to turn that off".

As discussed in Chapter 3 and confirmed by findings, despite high stress levels and the clear need for mental health support, correctional officers frequently encounter barriers to seeking help, including stigma, fear of judgment, and concerns about confidentiality. These barriers exacerbate mental health challenges, making it less likely that they will seek help. Stigma surrounding mental health within correctional environments is particularly debilitating. Participant 2 shared, officers often fear being perceived as weak or inadequate by peers and superiors, which significantly deters them from accessing mental health services.

The study underscores the critical need to address mental health and coping strategies of correctional officers to mitigate the negative impact of occupational stress and improve overall well-being. Intense job-related stress contributes to chronic fatigue, reducing officers' ability to recover from daily stressors. This lack of recovery often leads to burnout, characterized by emotional exhaustion and a diminished sense of personal accomplishment (Violanti et al., 2022). Frequent exposure to violence exacerbates stress levels, contributing to conditions such as PTSD, anxiety, and depression. Continuous stress depletes psychological and physical resources, leading to diminished job performance and heightened mental health risks (Hobfoll, 1989; Ricciardelli, Power, & Medeiros, 2021). The draining nature of the job is vividly captured in Participant 5 reflection: "Every shift tests your limits; you spend hours on high alert, and it just drains you completely" (Carleton et al., 2020).

Chronic job stress significantly impacts correctional officers' mental health, leading to increased anxiety, depression, and burnout. Despite these high stress levels,

many officers remain reluctant to seek help due to pervasive stigma and concerns about being perceived as weak. This stigma, coupled with the lack of accessible mental health resources, creates significant barriers to help-seeking behaviors. Officers often report feeling overwhelmed by constant demands, affecting both professional and personal lives (Violanti et al., 2022). Participant 5's experiences align with COR theory, which posits that continuous stress leads to resource depletion, escalating into burnout and further diminishing job performance (Hobfoll, 1989; Carleton et al., 2020).

Implementing mental health days can provide officers with the necessary time off to focus on mental health, reducing stress and preventing burnout. This proactive measure allows officers to manage mental health without fearing negative repercussions, thereby conserving emotional and psychological resources. On-site therapists offer immediate access to mental health professionals, ensuring timely support and reducing the stigma associated with seeking help externally. Regular mental health screenings facilitate early identification and intervention, preventing the escalation of mental health struggles and preserving officers' mental health resources. By integrating these findings with existing literature and applying COR theory, it becomes clear that addressing the fear of losing social standing and providing accessible mental health resources can significantly improve the mental well-being of correctional officers. This comprehensive approach aligns with the principles of COR theory, promoting better mental health outcomes in high-stress professions.

## **Coping Mechanisms and Support Systems**

Correctional officers often rely on personal coping mechanisms rather than formal psychological support, primarily due to the stigma associated with mental health issues and perceived inadequacies in available support systems. According to COR theory, individuals tend to protect and rebuild their resources independently when external support is insufficient (Hobfoll, 1989). This is evident among correctional officers, who rely on personal resources to maintain mental well-being when they perceive external support as lacking.

The study highlighted that organizational culture within correctional facilities significantly influences mental health help-seeking behaviors. A culture that normalizes mental health challenges and encourages seeking help is beneficial, resonating with COR theory's principle that a supportive environment can mitigate resource loss and foster resilience (Hobfoll, 1989). For example, Participant 4 noted, "When leadership shows that it's okay to talk about these issues, it makes a big difference in how we cope."

However, the research also uncovered a notable lack of mental health resources within correctional facilities. This aligns with COR theory's emphasis on the impact of resource depletion on stress and overall well-being. The shortage of resources, such as on-site therapists, mental health days, and regular mental health screenings, exacerbates work-related stress and hinders officers from seeking necessary support. Studies have highlighted the prevalence of mental health disorders and trauma symptoms among correctional workers, underscoring the critical need for psychological support (Ricciardelli et al., 2021; Fusco et al., 2021).

### **Application of the COR Theory**

One significant finding of this study is that stigma surrounding mental health impacts correctional officers' willingness to seek help. This finding is consistent with the research by Jessiman-Perreault et al. (2021), Ricciardelli et al. (2019), Denhof et al. (2014), and Violanti et al. (2017), and aligns with the COR theory, which posits that the fear of losing social standing or respect among peers, viewed as significant resources, deters many officers from pursuing necessary psychological assistance (Hobfoll, 1989). Reducing stigma through targeted educational programs and supportive policies can help mitigate this threat and promote resource conservation. For instance, the participants in the study expressed fear of being labeled as weak, reflecting the findings of Jessiman-Perreault et al. (2021), who noted that stigma within correctional facilities acts as a barrier to seeking mental health support.

Reducing stigma can involve regular mental health awareness workshops and training sessions in a correctional setting. These initiatives can educate staff on the importance of mental health and create an environment where seeking help is normalized and encouraged. For instance, to understand the experiences of new correctional officers, it is crucial to consider the challenges and factors influencing their transition into the correctional environment. Research indicates that new officers can be significantly influenced by the police subculture, which often promotes a traditional "crime fighter" image of policing Schaible & Gecas (2010). Moreover, new correctional recruits may face uncertainties and challenges in interpreting prisoner behavior and responding

appropriately, which can impact their adjustment to the job (Adorjan & Ricciardelli, 2022).

New Correctional officers might encounter emotional challenges, stigma, and bureaucratic obstacles when seeking mental health support within the correctional system. COR theory suggests that the potential loss of social standing can greatly affect decisions regarding help-seeking, underscoring the importance of addressing stigma and promoting mental health awareness among new officers (Tracy, 2004). Additionally, bureaucratic hurdles and lengthy wait times for accessing mental health assistance may deter new officers from seeking the necessary support (Jurik, 1988).

Understanding the motivations, needs, and challenges of new correctional officers is essential for developing effective support systems and interventions tailored to their specific experiences. By addressing emotional, cultural, and organizational factors influencing new officers, correctional facilities can establish a supportive environment that fosters well-being, resilience, and successful adaptation to the job demands. Furthermore, offering comprehensive mental health resources, training programs, and prompt access to support services can improve the mental health outcomes and overall job satisfaction of new correctional officers.

Research by Jessiman-Perreault et al. (2021) and Ricciardelli et al. (2019) highlights the effectiveness of educational programs in reducing mental health stigma. Furthermore, Denhof et al. (2014) and Violanti et al. (2017) emphasize that fostering an open dialogue about mental health can protect the social standing and respect of officers



who seek help, thereby conserving their valuable resources, as posited by the COR theory (Hobfoll, 1989).

### **Effective Coping Mechanisms**

Many participants reported therapy was beneficial. Having a neutral person to talk to provided an outlet for decompressing and managing emotions effectively. For instance, Participant 1 stated, "Therapy gave me an outlet to decompress and manage my emotions effectively."

Training sessions included mental health awareness were helpful for some participants in understanding and managing their stress. Participant 1 noted, "Mental health awareness training changed my perspective on daily operations and how to deal with people."

Participants suggested the need for regular mental health check-ins or mandatory therapy sessions to process emotions and prevent burnout. Participant 2 mentioned, "It should be mandatory to have regular mental health check-ins to process emotions."

Supervisors who paid attention to signs of mental health issues and provided resources were considered helpful by participants. Participant 1 shared, "As a supervisor, I noticed the signs and provided resources, which made a difference."

Engaging in self-care activities such as going to the gym was mentioned as a way to manage stress and maintain mental health. According to Participant 5, "Going to the gym helped me manage stress and maintain my mental health."

### **Ineffective Coping Mechanisms**

Some participants indicated that alcohol and substance use were common but ineffective coping mechanisms within the correctional setting, leading to further issues. Participant 3 remarked, "Drinking was rampant but did not solve the underlying mental health problems."

Avoiding mental health services due to stigma and fear of being perceived as weak often resulted in untreated mental health conditions worsening over time. Participant 2 explained, "Stigma and fear of being perceived as weak made me avoid seeking help."

The bureaucratic and impersonal nature of the EAP was criticized. The lack of immediate access to mental health professionals and perceived leak of confidentiality discouraged many from seeking help. Participant 2 criticized, "The EAP process was bureaucratic and discouraged me from seeking help."

Many participants felt that mental health resources were not adequately promoted or made accessible, leading to underutilization of available services. Participant 4 noted, "Mental health resources were not promoted or made accessible."

### **Support Systems and Organizational Impact**

Supportive leadership plays a pivotal role in fostering a culture where mental health can be openly discussed without fear of judgment or professional consequences. When organizational leaders promote mental health initiatives and support mental well-being, officers are more inclined to seek help.

The availability and accessibility of mental health resources, such as on-site therapists and easily accessible counseling services, significantly impact officers' willingness to seek help. Barriers like bureaucratic hurdles and extended waiting periods deter officers from seeking assistance, while readily available resources facilitate the process.

### ***Training and Awareness Programs***

Participant 5 expressed concerns about the general lack of awareness and training regarding mental health struggles: "Most of us aren't even aware of signs until things have gone too far." Correctional facilities should implement regular training sessions to educate officers about mental health, including recognizing symptoms and understanding available support mechanisms. This approach aligns with recommendations from Smith and Ferdik (2017), which found that increased training leads to better self-management and awareness among officers (Harari et al., 2020; Cooper et al., 2018; Halbesleben et al., 2014; Hobfoll et al., 2018; Hobfoll & Freedy, 2017; Carleton et al., 2020; Burhanullah et al., 2022). Addressing these unique stressors is critical for developing effective mental health interventions for correctional officers.

The study revealed that chronic exposure to violence and traumatic events leads to significant resource depletion among correctional officers, resulting in burnout and mental health issues. This observation is supported by Johnston et al. (2022), Spinaris et al. (2012), Kellaway (2014), and Ricciardelli et al. (2019) and fits within the framework of COR theory, which emphasizes that continuous resource loss without adequate recovery leads to adverse outcomes (Hobfoll, 1989). Participants described feeling

constantly on edge, echoing Johnston et al. (2022), who found that ongoing exposure to high-stress conditions depletes resources and leads to significant mental health issues.

To mitigate resource loss, correctional facilities can implement stress reduction programs such as mindfulness training, regular debriefing sessions after critical incidents, and access to mental health professionals. Research by Spinaris et al. (2012) demonstrates the effectiveness of mindfulness training in reducing stress and promoting well-being among correctional officers. Additionally, Ricciardelli et al. (2019) found that regular debriefing sessions after critical incidents significantly reduce symptoms of trauma and burnout. Kellaway (2014) emphasizes the importance of access to mental health professionals, noting that such support can prevent resource depletion and enhance recovery. By integrating these practices into daily routines, facilities can help officers recover from stress and prevent resource depletion.

### **Organizational Support Systems**

The importance of organizational support systems in mitigating resource loss is well-documented. Adequate peer support and accessible mental health resources are critical for officers' resilience and well-being. Research by Vasileiou and Violanti (2022), Spinaris et al. (2012), and Kellaway (2014) supports this, which is also central to COR theory's proposition that providing adequate support helps conserve and restore critical resources. Participants highlighted the importance of having someone to talk to who understands, underscoring findings that emphasize the role of peer support in conserving and restoring resources.

To enhance mental health services for correctional officers, it's crucial to address existing gaps in mental health practices and theoretical approaches within correctional settings. Current mental health training programs often fail to engage officers and meet their specific needs, leading to underutilization despite their potential effectiveness (Alwi, 2024).

The heavy stigma associated with seeking mental health support in a public setting can further deter officers from accessing necessary care, as the fear of being perceived as weak or unstable may hinder help-seeking behaviors (Burns & Buchanan, 2020). COR theory suggests that potential loss of social standing, a valued resource, significantly influences decisions around seeking help (Krakauer et al., 2020).

One critical aspect needing attention is bureaucratic hurdles and lengthy timelines officers encounter when seeking mental health assistance. Simplifying the process and reducing the time required to access support can greatly enhance officers' willingness and ability to seek help when needed (Lane et al., 2021). Addressing these bureaucratic challenges can streamline the support system and make it more accessible for officers in distress.

In addition to addressing bureaucratic barriers, it is essential to provide comprehensive mental health support tailored to the unique needs of correctional officers. This can include initiatives such as mental health days, on-site therapists, mandatory screenings, and educational programs focused on stress management and well-being. By offering a range of support services within correctional facilities, officers can access help

in a timely and convenient manner, reducing stigma and barriers associated with seeking care (Karaffa & Koch, 2015).

Furthermore, it's crucial to consider the cultural stigma and pressure on officers of color to maintain an image of strength. Jessiman-Perreault et al. (2021) found that robust support systems, such as peer support programs and accessible mental health resources, are essential in mitigating adverse effects of resource loss among officers. Spinaris et al. (2012) also highlighted the importance of peer support programs in providing emotional and psychological assistance, which helps conserve resources. Additionally, Kellaway (2014) emphasized that regular mental health check-ins and access to on-site mental health professionals are crucial for ensuring officers have the necessary resources to manage stress and recover from challenging situations. These findings align with COR theory, which posits that providing adequate support helps conserve and restore critical resources.

### **Training Programs**

Vasileiou and Violanti (2022) stress the importance of training programs that equip officers with skills to manage stress and seek help effectively. These programs should focus on resilience-building and coping strategies, aligning with COR theory's emphasis on resource conservation. Ricciardelli et al. (2019) found resilience training significantly improves coping mechanisms among officers, reducing the risk of burnout. Denhof et al. (2014) also highlighted benefits of stress management workshops, which enhance officers' ability to handle job-related stress.

Moreover, Vasileiou and Violanti (2022) highlight the need for comprehensive training programs that equip officers with resilience-building and coping strategies. Programs such as Mental Health First Aid Training align with COR theory's emphasis on resource conservation by providing officers with tools to manage stress and prevent resource loss. Spinaris et al. (2012) found that mindfulness and stress management workshops significantly reduce stress and improve well-being among correctional officers. Ricciardelli et al. (2019) demonstrated that peer support programs effectively enhance coping mechanisms and reduce burnout, while Denhof et al. (2014) emphasized the benefits of resilience training courses in improving officers' ability to handle job-related stress.

### **Immediate Mental Health Support**

The research underscores the necessity for immediate mental health support, such as on-site therapists and mental health days, to address issues before they escalate. This recommendation is backed by findings from Jessiman-Perreault et al. (2021) and Johnston et al. (2022) and aligns with COR theory. Providing immediate mental health support, such as on-site therapists and mental health days, is crucial in preventing resource loss by addressing issues promptly. Ensuring accessible mental health resources allows officers to receive help when needed, thereby preserving their psychological resources. Research by Spinaris et al. (2012) demonstrated that access to on-site mental health professionals significantly reduces stress and burnout among officers. Additionally, Kellaway (2014) found that regular mental health check-ins contribute to better mental health outcomes and resource conservation, aligning with COR theory.

Providing culturally sensitive mental health services and creating a supportive environment that encourages open discussions about mental health can help overcome these barriers and promote help-seeking behaviors among all correctional officers (Newell et al., 2021). Implementing strategies such as self-care activities, mindfulness techniques, and building a strong support network can further contribute to maintaining good mental health among officers (Daniel & Treece, 2021). By implementing these recommendations and addressing the identified challenges, correctional facilities can enhance the quality and responsiveness of mental health services for officers. This holistic approach aims to create a supportive and stigma-free environment that prioritizes the mental well-being of correctional officers, ultimately leading to improved mental health outcomes and overall job satisfaction within the correctional system.

### **Supportive and Non-Judgmental Environment**

Creating a supportive and non-judgmental environment is essential to reduce stigma and encourage help-seeking behaviors. This approach, advocated by Jessiman-Perreault et al. (2021) and Johnston et al. (2022), is also supported by COR theory, which suggests that such an environment ensures officers can seek help without fear of resource loss, thereby promoting overall well-being and resilience. For instance, Jessiman-Perreault et al. (2021) and Johnston et al. (2022) recommend fostering a supportive and non-judgmental organizational culture. This strategy aligns with COR theory by ensuring officers can seek help without fearing resource loss, promoting overall well-being and resilience.



### **Application of COR Theory**

Applying COR theory to this study's findings provides a comprehensive understanding of the mental health challenges faced by correctional officers and factors influencing their help-seeking behaviors. This theoretical framework, as evidenced by research from Hobfoll (1989), Jessiman-Perreault et al. (2021), and Johnston et al. (2022), explains how the fear of resource loss, such as social standing and respect, deters officers from seeking necessary psychological assistance. These studies collectively highlight the relevance and applicability of COR theory in analyzing and addressing mental health issues prevalent in correctional settings.

Several participants highlighted the lack of sufficient mental health support within their facilities. For example, Participant 3 mentioned that it often feels like "we are left to manage on our own with little to no help," underscoring the necessity for more robust mental health services. Correctional facilities should increase mental health resources, including access to on-site counselors and regular mental health check-ups. This suggestion is supported by findings from recent studies that emphasize the importance of accessible mental health services for correctional officers (Smith & Ferdik, 2017; Carleton et al., 2020; Harari et al., 2020; Burhanullah et al., 2022).

### **Impact of Technological Interventions**

Enhancing mental health support within correctional facilities can benefit significantly from technological interventions. Research highlights how organizational support positively influences correctional workers' well-being (Johnston et al., 2022). The widespread adoption of mobile devices and advancements in technology present

opportunities to leverage mobile health (mHealth) applications for supporting officers' mental health needs (Nosheen et al., 2019).

Technological interventions, including mobile health applications and teletherapy, offer promising solutions to mental health challenges faced by correctional officers. These technologies can overcome barriers like stigma, accessibility, and confidentiality concerns, which often deter officers from seeking help. Edgelow et al. (2022) stress the significant impact of workplace culture on officers' mental health, suggesting that integrating mobile health solutions could enhance accessibility and streamline access to psychological support.

Virtual trauma-focused therapy is an innovative approach to addressing mental health struggles among public safety personnel, including correctional officers (Jones et al., 2020). The flexibility of digital platforms makes mental health services more accessible, allowing officers to receive support in a timely and private manner. This approach is particularly effective in overcoming stigma associated with seeking help.

Participant 5 expressed strong support for telehealth, stating, "So I am here for telehealth. It is a convenient part of my life. I hope they never take it back." This sentiment reflects the growing acceptance and reliance on telehealth services among officers, highlighting the importance of maintaining and expanding such services. Similarly, Participant 3 and others noted the convenience and accessibility of telehealth, emphasizing how it reduces barriers to seeking mental health support and allows for greater flexibility in receiving care.

Anti-stigma interventions facilitated through digital platforms can improve officers' attitudes and behaviors toward seeking help. Matejkowski (2021) underscores the importance of such interventions, noting how technology can bridge gaps between officers and mental health resources, fostering a supportive environment.

Incorporating technological interventions like mHealth applications, teletherapy, and virtual trauma-focused therapy can significantly enhance mental health support for officers. These tools provide immediate access to resources, reduce barriers to help-seeking, and promote a culture of openness within the correctional environment. The positive reception of telehealth by officers, as noted by participants, further reinforces the value of these digital solutions. Future research should evaluate the effectiveness of these interventions to ensure correctional officers receive targeted and efficient support, improving their mental health and overall well-being.

### **Limitations of the Study**

While this study provides valuable insights into correctional officers' mental health perceptions and help-seeking behaviors, several limitations must be acknowledged when interpreting the findings. One primary limitation is the potential for bias. Despite using NLP tools to mitigate the influence of the researcher's background as a former correctional Officer, the subjective nature of qualitative analysis may still reflect personal biases (Smith & Jones, 2017). Additionally, the purposive sampling technique limits the generalizability of the results. Participants were selected based on specific criteria, which may not represent the broader population of correctional officers.

Methodologically, the study relies on self-reported data, which can be susceptible to social desirability bias. Participants might have portrayed their experiences or perceptions in a socially acceptable manner rather than expressing their genuine feelings, potentially impacting the authenticity of the data and, consequently, the conclusions drawn from it (Brown & Campbell, 2020).

Another limitation pertains to the sample size and composition. The study involved a relatively small sample of correctional officers from Maryland, which may restrict the generalizability of the findings to other regions or populations within the correctional community. The experiences and perceptions of correctional officers in one state may not fully represent those in different geographic or institutional contexts (Smith et al., 2018).

Additionally, while NVivo and NLP tools are beneficial for managing and analyzing large data sets, they also pose limitations. These tools rely on algorithms that interpret text data as coded, potentially missing nuances that a human coder might capture. This reliance on technology for data analysis necessitates careful consideration of how these tools are used and the results they produce (Johnson & Thompson, 2021).

Given these limitations, the applicability of the findings and recommendations should be viewed with caution. While the study offers strategies to improve mental health support within correctional facilities, these recommendations are based on data that may not fully represent all settings or populations. Future research should address these limitations by incorporating a more diverse participant pool and utilizing additional methods to cross-validate the findings. By acknowledging these limitations, this study

maintains transparency and integrity, providing a realistic perspective on what the findings can reliably inform and where caution should be exercised in their application. Recognizing these limitations also emphasizes the need for continued research into correctional officers' mental health and well-being, which strengthens the credibility of the research and underscores the complexity of psychological health issues within correctional environments (Smith & Jones, 2017; Brown & Campbell, 2020).

### **Recommendations and Implications**

Implementing these measures can create a more supportive environment that encourages officers to seek help and manage their mental health effectively, which may lead to improved overall well-being and job performance (Kramer, Jenkins, & Katz, 2012; Smith, Lewis, & Johnson, 2018; Lewis, Thompson, & Jenkins, 2022). Enhancing mental well-being among correctional officers has the potential to reduce absenteeism, lower turnover rates, and contribute to a safer, more productive work environment. By proactively addressing mental health, correctional facilities can work towards fostering a workplace culture that prioritizes the well-being of its staff.

Promoting mental health within correctional settings could influence broader organizational practices and societal attitudes. As correctional facilities adopt more supportive mental health practices, they may set a precedent for other high-stress professions, encouraging a cultural shift towards prioritizing mental health across various sectors.

The findings suggest a need for policy reforms that advocate for mental health support in high-stress professions such as corrections. Policymakers could consider

implementing mandatory mental health training, regular screenings, and confidential support services as part of the standard operating procedures in correctional facilities. To enhance the understanding and impact of these interventions, future research should focus on evaluating the long-term effectiveness of these measures within Maryland's correctional facilities. This approach will help tailor interventions to meet the unique needs of correctional officers, fostering a healthier and more supportive work environment (Carter & Forsyth, 2018; Thompson et al., 2022).

Longitudinal studies tracking the mental health of Correctional officers over time would provide valuable insights into how mental health challenges develop and evolve throughout officers' careers. Additionally, these studies could assess the long-term impact of specific interventions, offering evidence on their effectiveness in promoting mental well-being.

Comparing mental health practices, challenges, and outcomes among correctional officers across different states or countries would help identify best practices and contextual factors influencing the effectiveness of mental health interventions, guiding the development of tailored strategies that account for regional or cultural variations in correctional environments.

Evaluating the effectiveness of specific mental health interventions, such as mindfulness programs, peer support groups, or mobile health applications, in improving the mental well-being of correctional officers could provide evidence-based recommendations for policy and practice, ensuring interventions are adjusted based on their demonstrated impact.

Investigating how cultural, racial, and gender differences impact mental health perceptions and help-seeking behaviors among correctional officers would allow for the development of more tailored and culturally competent interventions, ensuring that all officers receive support in a manner that resonates with their backgrounds and experiences.

Exploring how variations in organizational culture within different correctional facilities influence officers' mental health and willingness to seek help would provide insights into how organizational culture contributes to or mitigates mental health challenges.

Given the increasing integration of technology in healthcare, exploring the use of technology, such as virtual reality training, teletherapy, and mental health apps, in delivering mental health support to correctional officers could offer innovative solutions for overcoming barriers to accessing care, especially where traditional face-to-face therapy may be less feasible.

Understanding the specific psychosocial stressors unique to the correctional environment and how officers develop resilience could lead to more effective resilience-building programs tailored to the challenges officers face in their day-to-day work.

Conducting an in-depth analysis of the barriers correctional officers face in accessing mental health services, including stigma, fear of repercussions, and logistical challenges, would be beneficial. This research could inform the design of interventions that directly address these obstacles, making mental health support more accessible and acceptable to officers.

Evaluating the effectiveness of peer support and mentorship programs in fostering a supportive environment and reducing mental health stigma among correctional officers could demonstrate how peer-led initiatives can complement formal mental health services, providing additional layers of support.

Finally, investigating the impact of recent or proposed policy changes on the mental health of correctional officers could provide data on the effectiveness of policy interventions, guiding future legislative efforts to improve mental health support within correctional facilities. These recommendations aim to address the gaps identified in the current study and contribute to ongoing efforts to enhance mental health support for correctional officers. Pursuing these research avenues can help develop more comprehensive and effective strategies to promote the well-being of those working in the challenging environment of correctional facilities.

### **Social Change Implications**

The outcomes of this study underscore the urgent need for improved mental health support systems within correctional facilities, specifically addressing the mental health needs of correctional officers. The stigma associated with seeking psychological help remains a significant barrier, necessitating a cultural shift within these environments. Leadership must foster an atmosphere where mental health struggles are normalized and seeking help is actively encouraged. Research supports that institutional changes prioritizing mental health care can lead to better employee well-being and reduced absenteeism rates (Kramer, Jenkins, & Katz, 2012).



The current lack of mental health resources within correctional settings represents a form of resource depletion. Increasing the availability of mental health professionals, enhancing training programs, and ensuring accessible services are essential steps to address this issue (Smith, Lewis, & Johnson, 2018; Lewis, Thompson, & Jenkins, 2022). The high levels of job-related stress experienced by correctional officers underscore the need for structured mental health programs tailored to their specific needs. Approaches such as CBT and TF-CBT have been shown to improve mental health outcomes (Morgan, Ross, & Reavley, 2018).

Implementing regular mental health days and providing on-site therapists offer immediate support, helping to manage stress and prevent burnout, which aligns with the principles of the COR theory (Violanti et al., 2022). Enhanced training programs that incorporate mental health awareness and cultural sensitivity can play a critical role in reducing stigma and improving help-seeking behaviors, leading to more inclusive and effective interventions (Lewis et al., 2022).

Addressing these challenges through enhanced support systems, comprehensive training, and targeted policy changes can create a more supportive environment, encouraging officers to seek help and effectively manage their mental health. Institutional reforms are crucial for transforming the mental health landscape within correctional facilities. Initiative-taking wellness checks and mental health training for leadership can significantly improve workplace mental health and employee resilience (Anderson, Rayens, & Wiggins, 2020).

A cultural shift within correctional facilities is necessary to foster an environment where mental health is openly discussed, and stigma is actively combated. Regular mental health training sessions can significantly alter perceptions and promote a supportive approach to mental health issues (Thompson, Smith, & Bybee, 2021). Additionally, policy advocacy is essential for enacting substantial changes in how mental health is managed, including mandating mental health screenings, and ensuring comprehensive coverage of mental health services (Wallace & Walthall, 2019).

Improving mental health support for correctional officers not only enhances their well-being but also contributes to creating a more supportive and healthy work environment within correctional facilities. Future research should focus on longitudinal studies and comparative analyses to assess the long-term impact of specific interventions tailored to Correctional officers' unique needs. Exploring the influence of leadership styles, demographic factors, and technological innovations can further our understanding and development of effective mental health interventions for correctional officers.

### **Conclusion**

This study underscores the urgent need for comprehensive mental health support for correctional officers, emphasizing institutional reforms and targeted interventions. Addressing these issues contributes significantly to the academic discourse on occupational health and provides practical strategies to enhance the mental health and overall well-being of correctional officers (Carleton et al., 2020; Johnson & Huerta, 2016). The qualitative investigation explored the dimensions influencing psychological help-seeking behaviors among correctional officers in Maryland. Through thematic

analysis of in-depth interviews, pivotal themes were identified, including concerns about seeking help, perceptions of mental health, willingness to seek help, coping with stigma, and the overall experience (Cunningham et al., 2019; Finney et al., 2013).

Participants expressed significant apprehensions about seeking psychological help due to fears of professional repercussions and social stigma. Operational challenges, such as staffing shortages, further impede mental health support by prioritizing operational needs over individual well-being (Lambert et al., 2018). The study also emphasized the role of personal characteristics and coping strategies in navigating the stigma associated with mental health in law enforcement. For instance, Participant 4 shared, "I keep it to myself mostly because you don't want to be seen as the weak link, but at some point, it becomes too much, and that's when I sought help." Such insights underscore the necessity for accessible, effective, and confidential mental health services (Creswell & Poth, 2018).

The research proposes actionable recommendations to improve mental health support systems for correctional officers, including implementing mental health days, on-site therapists, and mandatory mental health screenings. These measures could provide officers with the necessary resources to manage stress and seek help without fear of stigma or repercussion (Smith & Jones, 2017). Moreover, the study sheds light on how correctional officers perceive, experience, and decide to engage with mental health services, adding depth to our understanding of the psychological impacts of correctional work (Lee & Kim, 2019).

This qualitative study significantly advanced our understanding of the psychological help-seeking behaviors among correctional officers in Maryland, grounded in the theoretical framework of the COR theory. The research examines how correctional officers strive to acquire, maintain, and protect their valued resources, and how the loss or lack of these resources can drive help-seeking behaviors (Hobfoll, 1989). The thematic analysis provided a nuanced exploration of participant experiences and perceptions, revealing the profound impact of personal characteristics, workplace environment, and systemic barriers on the help-seeking process.

Furthermore, the study's findings align with previous research, such as that by Violanti and colleagues, which has documented the significant impact of occupational stress on mental health in law enforcement. Their work underscores the necessity for comprehensive mental health support within high-stress professions like corrections, reinforcing the need for systemic changes to de-stigmatize help-seeking behaviors and implement robust support mechanisms aligned with the unique stresses of correctional work (Violanti et al., 2017).

This research contributes to the existing literature by addressing the pervasive mental health challenges among correctional officers and the particularities of stigma and inadequate support systems within correctional facilities (Ricciardelli et al., 2021). It emphasizes the need for a more supportive and understanding workplace culture that prioritizes the mental well-being of its workforce. By addressing the systemic issues highlighted in this research, correctional facilities can foster a more supportive culture

that encourages help-seeking and prioritizes mental health on par with physical health, ultimately contributing to a healthier, more resilient workforce (Zimmerman, 2019).

In conclusion, this study has made significant strides in understanding the mental health challenges faced by correctional officers, particularly in the context of Maryland's correctional facilities. The research highlights the intricate interplay between personal characteristics, operational demands, and systemic barriers that influence help-seeking behaviors. By integrating the theoretical framework of COR theory with empirical findings, this study provides a comprehensive perspective on the factors that impact the mental health of correctional officers.

The implications of this research are far-reaching, offering valuable insights for policymakers, correctional administrators, and mental health professionals. Implementing the recommendations proposed in this study could lead to a transformative shift in how mental health is addressed within correctional settings. By fostering a culture of support and reducing the stigma associated with mental health, correctional facilities can create an environment where officers feel empowered to seek help, thereby enhancing their overall well-being and effectiveness in their roles. Continued research in this area is essential to refine and expand upon the findings of this study. Future studies should explore the long-term impact of the recommended interventions, investigate the role of organizational culture, and assess the effectiveness of emerging mental health technologies. By building on the foundation laid by this research, we can work towards creating correctional environments that prioritize the mental health and well-being of those who serve within them.

## References

- Abraham, M., & Heath, K. (2016). Brotherhood in blue: The law enforcement culture and its impact on officer relationships. *Journal of Law Enforcement*, 5(2), 45-60.
- Adorjan, M. and Ricciardelli, R. (2022). Anticipating prison face work: Dramaturgical risks anticipated by correctional officer recruits. *Howard Journal of Crime and Justice*, 62(2), 183-203. <https://doi.org/10.1111/hojo.12497>
- Adu, P. (2019). *A step-by-step guide to qualitative data coding*. Routledge.
- Agrawal, R., & Mahajan, R. (2021). Enhancing well-being and reducing burnout among correctional officers: The role of work hours, professional development, and organizational support. *Journal of Occupational Health Psychology*, 26(3), 190-202. <https://doi.org/10.1037/ocp0000298>
- Alexandre, J. (2012). The impact of PTSD on police officer performance and safety. *Journal of Police and Criminal Psychology*, 27(2), 118-127. <https://doi.org/10.1007/s11896-012-9103-1>
- Allan, G. (2020). The importance of research relationships in qualitative inquiry. *Qualitative Research Journal*, 20(2), 123-135. <https://doi.org/10.1108/QRJ-04-2019-0034>
- Alwi, P. (2024). Determinants of mental health literacy among correctional officers. *Jurnal Promkes*, 12(SI 1), 12-19. <https://doi.org/10.20473/jpk.v12.isi1.2024.12-19>

- Anderson, C., Rayens, M. K., & Wiggins, A. T. (2020). The role of proactive wellness checks in enhancing mental health resilience among correctional officers. *Journal of Occupational Health Psychology, 25*(2), 107-118.  
<https://doi.org/10.1037/ocp0000270>
- Anderson, T. (2020). Societal views and mental health stigma in correctional facilities. *Journal of Social Health, 37*(1), 45-60.
- Anney, V. N. (2014). Ensuring the quality of the findings of qualitative research: Looking at trustworthiness criteria. *Journal of Emerging Trends in Educational Research and Policy Studies, 5*(2), 272-281. <http://hdl.handle.net/123456789/256>
- Appelbaum, K. L., Hickey, J. M., & Packer, I. K. (2001). The role of correctional officers in multidisciplinary mental health care in prisons. *Psychiatric Services, 52*(10), 1343-1347. <https://doi.org/10.1176/appi.ps.52.10.1343>
- Armstrong, G. S., & Griffin, M. L. (2004). Does the job matter? Comparing correlates of stress among treatment and correctional staff in prisons. *Journal of Criminal Justice, 32*(6), 577-592. <https://doi.org/10.1016/j.jcrimjus.2004.08.007>
- Armstrong, G. S., Atkin-Plunk, C. A., & Wells, J. (2015). The relationship between Work-family conflict, correctional officer job stress, and job satisfaction. *Criminal Justice and Behaviour, 42*(10), 1066-1082.
- Aronson, J. (1995). A Pragmatic View of Thematic Analysis. *The Qualitative Report, 2*(1), 1-3. <https://doi.org/10.46743/2160-3715/1995.2069>
- Bandura, A. (1997). *Self-efficacy: The exercise of control*. Freeman.
- Belkic, K., & Savic, C. (2013). *Job stressors and mental health: A proactive clinical*

*perspective*. <https://ebookcentral.proquest.com>

- Benaquisto, L., & Given, L. (2008). *The SAGE encyclopedia of qualitative research methods*. Sage Publications.
- Benetti, R. (2018). The role of job congruence in predicting burnout among law enforcement officers. *International Journal of Occupational Safety and Ergonomics*, 24(3), 351-359. <https://doi.org/10.1080/10803548.2018.1448704>
- Berk, L. E. (2010). *Development through the lifespan* (5th ed.). Allyn & Bacon.
- Bezerra, G. L., Carvalho, F. M., & Santos, K. O. B. (2022). Sleep disorders in Correctional officers: Cross-sectional study. *Sleep Science*, 15(01), 34-40. <https://doi.org/10.5935/1984-0063.20210027>
- Blair, E. (2015). A reflexive exploration of two qualitative data coding techniques. *Journal of Methods and Measurement in the Social Sciences*, 6(1), 14-29.
- Blevins, K. R., Cullen, F. T., & Sundt, J. L. (2014). The correctional orientation of “child savers”: Support for rehabilitation among the founders of the juvenile court. *Journal of Criminal Justice*, 42(2), 125-134.
- Blum, J. (2000). The impact of overconfidence in correctional officers: Risks and consequences. *Corrections Journal*, 22(2), 123-134.



- Boothroyd, R. A., Green, S., & Dougherty, A. (2019). Evaluation of Operation Restore: A brief intervention for first responders exposed to traumatic events. *Traumatology*, 25(3), 162–171. <https://doi.org/10.1037/trm0000168>
- Borum, R., & Philpot, C. (1993). Therapy with law enforcement couples: Clinical management of the “high-risk lifestyle.” *American Journal of Family Therapy*, 21(2), 122–135. <https://doi.org/10.1080/01926189308250911>
- Boulanger, G. (2018). The impact of working with trauma: Understanding secondary traumatic stress in Correctional officers. *Trauma and Stress Journal*, 30(2), 150-165.
- Boulanger, G. (2018). The effects of trauma on the mental health of correctional officers. *Journal of Correctional Health Care*, 24(3), 249-262. <https://doi.org/10.1177/1078345818776612>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Brew, L., & Kottler, J. A. (2008). *Applied helping skills: Transforming lives*. Thousand Oaks, Calif: Sage Publications.
- Brower, J. (2013). *Correctional officer wellness and safety literature review*. Office of Justice Programs Diagnostic Center. <https://www.ncjrs.gov/App/Publications/abstract.aspx?ID=266912>
- Brown, A., & Campbell, J. (2020). Leadership and mental health in correctional settings. *Journal of Occupational Health Psychology*, 25(2), 178-192.

- Burhanullah, M., Rollings-Mazza, P., Galecki, J., Wert, M., Weber, T., & Malik, M. (2022). Mental health of staff at correctional facilities in the United States during the COVID-19 pandemic. *Frontiers in Psychiatry*, 12. <https://doi.org/10.3389/fpsy.2021.767385>
- Burns, C., & Buchanan, M. (2020). Factors that influence the decision to seek help in a police population. *International Journal of Environmental Research and Public Health*, 17(18), 6891.
- Caelli, K., Ray, L., & Mill, J. (2003). 'Clear as mud': Toward greater clarity in generic qualitative research. *International Journal of Qualitative Methods*, 2(2), 1-13. <https://doi.org/10.1177/160940690300200201>
- Carleton, R. N., Ricciardelli, R., Taillieu, T., Mitchell, M. M., Andres, E., & Afifi, T. O. (2020). Provincial correctional service workers: The prevalence of mental disorders. *International Journal of Environmental Research and Public Health*, 17(7), 2203. <https://doi.org/10.3390/ijerph17072203>
- Carleton, R. N., Afifi, T. O., Turner, S., Taillieu, T., LeBouthillier, D. M., Duranceau, S., & Ricciardelli, R. (2020). Mental disorder symptoms among public safety personnel in Canada. *The Canadian Journal of Psychiatry*, 63(1), 54-64. <https://doi.org/10.1177/0706743717723825>
- Carpendale, S., Hinrichs, U., Knudsen, S., Thudt, A., & Tory, M. (2017). *Analyzing qualitative data*. In Proceedings of the 2017 International Conference on Interactive Surfaces and Spaces (pp. 477-481). Retrieved from <https://dl.acm.org/citation.cfm?id=3132272&picked=prox>

- Carter, K. W. (2005). Doing Prison Work: The public and private lives of prison officers. *Qualitative Research, 5*(3), 385–388. <https://doi-org.ezp.waldenulibrary.org/10.1177/1468794105054461>
- Carter, M., & Forsyth, C. J. (2018). Longitudinal studies assessing mental health strategies' outcomes. *Social Science & Medicine, 207*, 114-123. <https://doi.org/10.1016/j.socscimed.2018.03.045>
- Charmaz, K. (2014). *Constructing grounded theory* (2nd ed.). Sage Publications.
- Chen, Y. C., Tsai, S. C., & Chen, C. Y. (2015). The effectiveness of peer support and counseling services for improving psychological well-being among correctional officers. *Journal of Correctional Health Care, 21*(4), 374-386. <https://doi.org/10.1177/1078345815600152>
- Clarke, V. and Braun, V. (2018). Using thematic analysis in counselling and psychotherapy research: A critical reflection. *Counselling and Psychotherapy Research, 18*(2), 107-110. <https://doi.org/10.1002/capr.12165>
- Conner, M., & In Norman, P. (2015). *Predicting and changing health behaviour: Research and practice with social cognition models* (6th ed.). Berkshire, England: McGraw-Hill Publications
- Cooper, A., Blum, S., Hemmings, S., & Johnson, R. (2018). Trauma-informed care in correctional facilities: Enhancing mental health services for correctional officers. *Journal of Correctional Health Care, 24*(3), 123-135. <https://doi.org/10.1177/1078345818786592>
- Cooper, C., Booth, A., Varley-Campbell, J., Britten, N., & Garside, R. (2018). Defining

- the process to literature searching in systematic reviews: A literature review of guidance and supporting studies. *BMC Medical Research Methodology*, *18*, 1-14.
- Corey, G., Corey, G., & Corey, G. (2013). *Student manual for theory and practice of counseling and psychotherapy*. Belmont, CA: Brooks/Cole.
- Corey, G., Corey, M. S., & Callahan, P. (2010). *Issues and ethics in the helping professions*. Belmont, CA: Brooks/Cole.
- Corrigan, P.W., Druss, B.G., and Perlick, D.A. (2014) The impact of mental illness stigma on seeking and participating in mental health care. *Psychological Science in the Public Interest*, *15*, 37-70.  
<https://doi.org/10.1177/1529100614531398>
- Corrigan, P. W., Kosyluk, K. A., & Rüsch, N. (2013). Reducing self-stigma by coming out proud. *American Journal of Public Health*, *103*, 794–800.  
DOI:10.2105/AJPH.2012.301037
- Corrigan, P. W., Watson, A. C., & Barr, L. (2006). The self-stigma of mental illness: implications for self-esteem and self-efficacy. *Journal of Social & Clinical Psychology*, *25*(8), 875-884.
- Corrigan, P. (2003). How stigma interferes with mental health care. *American Psychologist*, *59*(7), 614-625.
- Corrigan, P. W., Watson, A. C., & Ottati, V. (2003). From whence comes mental illness stigma? *International Journal of Social Psychiatry*, *49*(2), 142-157.
- Corrigan, P. W., & Watson, A. C. (2002). Understanding the impact of stigma on people with mental illness. *World Psychiatry*, *1*(1), 16-20.

- Covington, S. S., & Bloom, B. E. (2014). *Gender responsive treatment and services in correctional settings*. In *Inside and Out* (pp. 9-33). Routledge.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches* (4th ed.). SAGE Publications.
- Creswell, J. W. (2013). *Qualitative inquiry and research design: Choosing among five approaches* (3rd ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Creswell, J. W., & Plano-Clark, V. L. (2011). *Designing and conducting mixed-method research*. (2nd ed.). Sage Publication, Los Angeles.
- Creswell, J. W. (2009). *Research Design: Qualitative, quantitative, and mixed methods approach* (3rd ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Crowe, A., Paige, A., Glass, S. J., Dotson-Blake P.K., Grissom, E.S., Ficken, K.D., Holland, H.V., and Holmes, A.J. (2016). Mental health stigma: Personal and cultural impacts on attitudes. *Journal of Counselor Practice*, 7(2):97–119. DOI: 10.22229/spc801925
- Cunningham, R. M., Finney, J. W., & Johnson, D. L. (2019). Correctional officers' perceptions of mental health services: A qualitative study. *Journal of Correctional Health Care*, 25(1), 25-40.  
<https://doi.org/10.1177/1078345818825220>
- Daniel, A. and Treece, K. (2021). Law enforcement pathways to mental health: secondary traumatic stress, social support, and social pressure. *Journal of Police and Criminal Psychology*, 37(1), 132-140. <https://doi.org/10.1007/s11896-021-09476-5>

- Davydov, M. Dmitry., Stewart, Robert., Ritchie, Karen., & Chaudieu, Isabelle. (2010). Resilience and mental health. *Clinical Psychology Review, 30* (2010) 479–495.
- Davison, C. M., Brown, M., & Moffitt, P. (2006). Negotiating consent in Northern Aboriginal communities. *Ethics in Action, 9*(2), 149-170.
- Denhof, M. D., Spinaris, C. G. (2016). *Occupational stressors in corrections organizations: Types, effects, and solutions*. Washington, DC: National Institute of Corrections. Google Scholar [http://desertwaters.com/wp-content/uploads/2016/07/MCO-Paper\\_FINAL.pdf](http://desertwaters.com/wp-content/uploads/2016/07/MCO-Paper_FINAL.pdf)
- Der Pan, P. J., Shih-Hua Chang, & Karen Jye-Ru Jiang. (2008). Effects of a competency-based counseling training program for Correctional officers. *International Journal of Offender Therapy & Comparative Criminology, 52*(6), 722–735. <https://doi-org.ezp.waldenulibrary.org/10.1177/0306624X07309368>
- Dowden, C., & Tellier, C. (2004). Predicting work-related stress in correctional officers: A meta-analysis. *Journal of Criminal Justice, 32*(1), 31-47. <https://doi.org/10.1016/j.jcrimjus.2003.10.003>
- Duwe, G. (2017). *The use and impact of correctional programming for inmates on pre- and post-release outcomes (Vol. 48)*. US Department of Justice, Office of Justice Programs, National Institute of Justice.
- Easterbrook, B., Ricciardelli, R., Sanger, B., Mitchell, M., McKinnon, M., & Carleton, R. (2022). Longitudinal study of canadian correctional workers' wellbeing, organizations, roles and knowledge (ccwork): Baseline demographics and

prevalence of mental health disorders. *Frontiers in Psychiatry*, 13.

<https://doi.org/10.3389/fpsy.2022.874997>

Edgelow, M., Murdoch, D., & Livingstone, K. (2022). Leveraging technology to support mental health in correctional settings: Opportunities and challenges. *Mental Health Technology Review*, 34(2), 42-58.

<https://doi.org/10.1016/j.mhtech.2022.03.005>

Edgelow, M., Scholefield, E., McPherson, M., Legassick, K., & Novacosky, J. (2022). Organizational factors and their impact on mental health in public safety organizations. *International Journal of Environmental Research and Public Health*, 19(21), 13993. <https://doi.org/10.3390/ijerph192113993>

<https://doi.org/10.3390/ijerph192113993>

Ellison, J. M. and Jaegers, L. (2021). Suffering in silence. *Journal of Occupational & Environmental Medicine*, 64(1), e28-e35.

<https://doi.org/10.1097/jom.0000000000002432>

Elliot, A. J., & Dweck, C. S. (Eds.). (2013). *Handbook of competence and motivation*. New York: Guilford.

Elliot, S., Johnson, W., & Rozzell, J. (2015). The role of correctional officers in reducing inmate recidivism. *Corrections Today*, 77(4), 28-32.

Elliot, Kuehl, Ghazin, and Charniack (2015)

[http://www.aca.org/aca\\_prod\\_imis/ACA\\_Member/Publications/CT\\_Magazine/2015/July\\_2015/July\\_2015\\_Highlights/Stress\\_and\\_Corrections.aspx](http://www.aca.org/aca_prod_imis/ACA_Member/Publications/CT_Magazine/2015/July_2015/July_2015_Highlights/Stress_and_Corrections.aspx)

- Erika, I, Musa, S. A., & Alkassim, R. S. (2016). Comparison of convenience sampling and purposive sampling. *American Journal of Theoretical and Applied Statistics*, 5(1), 1-4. DOI: 10.11648/j.ajtas.20160501.11
- Errasti-Ibarrondo, B., Antonio Jordán, J., Díez-Del-Corral, M. P., & Arantzamendi, M. (2018). Conducting phenomenological research: Rationalizing the methods and rigour of the phenomenology of practice. *Journal of Advanced Nursing*, 74(7), 1723–1734. <https://doi-org.ezp.waldenulibrary.org/10.1111/jan.13569>
- Etikan, I., Musa, S. A., & Alkassim, R. S. (2016). Comparison of convenience sampling and purposive sampling. *American Journal of Theoretical and Applied Statistics*, 5(1), 1-4. <https://doi.org/10.11648/j.ajtas.20160501.11>
- Fallon, P. (2023). Peer support programs to reduce organizational stress and trauma for public safety workers: A scoping review. *Workplace Health & Safety*, 71(11), 523-535. <https://doi.org/10.1177/21650799231194623>
- Fazel, S., Hayes, A. J., Bartellas, K., Clerici, M., & Trestman, R. (2016). Mental health of prisoners: prevalence, adverse outcomes, and interventions. *The Lancet Psychiatry*, 3(9), 871-881.
- Feldman, M. S., & Shaw, M. (2018). The ethics of collaboration: Institutional ethics, ethnography, and the construction of human subjects protection. *Qualitative Inquiry*, 24(4), 287-298. <https://doi.org/10.1177/1077800417745981>
- Ferdik, F. V. (2016). An investigation into the risk perceptions held by maximum security correctional officers. *Psychology, Crime & Law*, 22(9), 832–857. <https://doi-org.ezp.waldenulibrary.org/10.1080/1068316X.2016.1194985>



- Ferdik, F. V., & Smith, H. P. (2015). Correctional officer safety and wellness literature review. *Criminal Justice Review, 40*(2), 143-160.  
<https://doi.org/10.1177/0734016815576111>
- Ferdik, F. V., Smith, H. P., & Applegate, B. (2014). The role of emotional dissonance and job desirability in predicting correctional officer turnover intentions. *Criminal Justice Studies, 27, 4, 323-343*.
- Finlay, L. (2009). Exploring lived experience: Principles and practice of phenomenological research. *International Journal of Therapy & Rehabilitation, 16*(9), 474-481. <https://doi-org.ezp.waldenulibrary.org/10.12968/ijtr.2009.16.9.43765>
- Finney, J. W., & Johnson, D. L. (2013). Addressing the mental health needs of correctional officers: Challenges and solutions. *Journal of Correctional Health Care, 19*(4), 285-295. <https://doi.org/10.1177/1078345813486259>
- Fischer, E. H., & Farina, A. (1995). Attitudes toward seeking professional psychological help: A shortened form and considerations for research. *Journal of College Student Development, 36* (4), 368-373.
- Fix, C. (2001). Critical Incident Stress Management Program: Responding to the needs of correctional staff in Pennsylvania. *Corrections Today, 63*(6), 94. Retrieved from <https://search-ebscohost-com.ezp.waldenulibrary.org/login.aspx?direct=true&db=a9h&AN=10333893&site=ehost-live&scope=site>
- Folkman, S., Lazarus, R.S., Dunkel-Schetter, C., DeLongis A., and Gruen, J. R. (1986).

Dynamics of a stressful encounter: Cognitive appraisal, coping, and encounter outcomes. *Journal of Personality and Social Psychology*. Vol. 50. No. 5, 992-1003.

Frankfort-Nachmias, C., & Nachmias, D. (2015). *Research methods in the social sciences (8th ed.)*. New York: Worth.

Fusco, N., Ricciardelli, R., Jamshidi, L., Carleton, R. N., Hilton, Z., & Groll, D. (2021).

When our work hits home: Trauma and mental disorders in correctional officers and other correctional workers. *Frontiers in Psychiatry*, 11, 493391.

<https://doi.org/10.3389/fpsy.2020.493391>

Garner, J., & Thorne, P. (2020). *Correctional officer safety and wellness literature synthesis*. National Institute of Justice, Office of Justice Programs, U.S.

Department of Justice. <https://www.nij.ojp.gov>

Galiotta, M. (2018). *Adapting Dialectical Behaviour Therapy for use in correctional settings*. New Frontiers in Offender Treatment: The Translation of Evidence-Based Practices to Correctional Settings, 147-169.

Gendreau, P., Smith, P., & French, S. A. (2017). The theory of effective correctional intervention: Empirical status and future directions. *Taking Stock*, 419-446.

Gershon, R., Barocas, B., Canton, A., Li, X., & Vlahov, D. (2008). Mental, physical, and behavioral outcomes associated with perceived work stress in police officers.

*Criminal Justice and Behavior*, 36(3), 275-289.

<https://doi.org/10.1177/0093854808330015>

Gillespie, W. (2016). The impact of occupational stress and stigma on mental health in

- law enforcement and military personnel. *Journal of Police and Criminal Psychology*, 31(3), 182-194. <https://doi.org/10.1007/s11896-015-9164-7>
- Giorgi, A., & Giorgi, B. (2003). Phenomenology. In J. A. Smith (Ed.), *Qualitative psychology: A practical guide to research methods* (p. 25–50). Sage Publications, Inc.
- Glaser, B. G., & Strauss, A. L. (1967). *The discovery of grounded theory: Strategies for qualitative research*. Aldine Publishing.
- Gould, D. D., Watson, S. L., Price, S. R., Valliant, P. M. (2013). The relationship between burnout and coping in adult and young offender center correctional officers: An exploratory investigation. *Psychological Services*, 10, 37–47.  
DOI:10.1037/a0029655 Google Scholar
- Green, J. (2017). Mental health policies in correctional settings: A comprehensive review. *Journal of Correctional Health Care*, 23(2), 99-114.
- Grossi, G., Perski, A., Osika, W., & Savić, I. (2015). *Stress-related exhaustion disorder – clinical manifestation of burnout? a review of assessment methods, sleep impairments, cognitive disturbances, and neuro-biological and physiological changes in clinical burnout*. *Scandinavian Journal of Psychology*, 56(6), 626-636.  
<https://doi.org/10.1111/sjop.12251>
- Grupe, D. (2023). Mental health stigma and help-seeking intentions in police employees. *Journal of Community Safety and Well-Being*, 8(Suppl\_1), S32-S39.  
<https://doi.org/10.35502/jcswb.290>

- Guros, F. (2000). *Emotion regulation and strain in corrections officers: Examining the role of recovery experiences and coping mechanisms*.  
<https://doi.org/10.15760/etd.1121>
- Haas, K. M. (2015). *Exploring police officer experiences and help-seeking behaviours* (Doctoral dissertation). Alliant International University, ProQuest Dissertations Publishing. (UMI No. 3700623).
- Haecker, V. M. (2017). *Factors affecting mental health seeking behaviours of law enforcement Officers* (Doctoral dissertation, Brandman University).
- Haecker, S. (2017). Organizational policies and peer support in law enforcement: Encouraging help-seeking behaviors. *Journal of Law Enforcement Leadership*, 5(2), 132-145.
- Halbesleben, J. R., Neveu, J. P., Paustian-Underdahl, S. C., & Westman, M. (2014). Getting to the “COR” understanding the role of resources in conservation of resources theory. *Journal of management*, 40(5), 1334-1364.
- Halbesleben, J. R., & Buckley, M. R. (2004). Burnout in organizational life. *Journal of Management*, 30(6), 859-879. <https://doi.org/10.1016/j.jm.2004.06.004>
- Harari, M. B., Parola, H. R., Hartwell, C. J., & Riegelman, A. (2020). Literature searches in systematic reviews and meta-analyses: A review, evaluation, and recommendations. *Journal of Vocational Behaviour*, 118, 103377.
- Hamzah, I. (2024). Mental health conditions among correctional officers in nusakambangan, Indonesia. *Malahayati International Journal of Nursing and Health Science*, 7(2), 196-205. <https://doi.org/10.33024/minh.v7i2.140>

- Hart, D. (2019). Health risks of practicing correctional medicine. *The Americana Journal of Ethics*, 21(6), E540-545. <https://doi.org/10.1001/amajethics.2019.540>
- Hobfoll, S. E., Halbesleben, J., Neveu, J.-P., & Westman, M. (2018). Conservation of resources in the organizational context: The reality of resources and their consequences. *Annual Review of Organizational Psychology and Organizational Behaviour*, 5, 103-128.
- Hobfoll, S. E., & Freedy, J. (2017). Conservation of resources: A general stress theory applied to burnout. In *Professional Burnout* (pp. 115-129). Routledge.
- Hobfoll, S. E., & Schumm, J. A. (2009). Conservation of resources theory: Application to public health promotion. In R. DiClemente, R. A. Crosby, & M. C. Kegler (Eds.), *Emerging theories in health promotion practice and research* (2nd ed., pp. 131-156). Jossey-Bass.
- Hobfoll, S. E., Dunahoo, C. A., Ben-Porath, Y., & Monnier, J. (1990). Gender and coping: The dual-axis model of coping. *American Journal of Community Psychology*, 18(1), 89-118. <https://doi.org/10.1007/BF00922665>
- Hobföll, S. E. (1988). *The ecology of stress*. Washington, DC: Hemisphere.
- Hoppen, T. H., Morina, N., & Karl, A. (2017). Burnout: How it impacts cognitive performance in professionals. *Journal of Occupational Health Psychology*, 22(4), 398-409. <https://doi.org/10.1037/ocp0000074>
- Hyattsville. (2021). *Mental health resources*. Retrieved from <https://www.hyattsville.org/mentalhealth>

- Hyattsville. (2021). *Mental Health 24/7*. Retrieved from  
<https://www.hyattsville.org/1003/Mental-Health-247>
- Hyattsville. (2021). Press Release: *Hyattsville Police Announce Joint Mental Health Programs with Brentwood PD and Mount Rainier PD*. Retrieved from  
<https://www.hyattsville.org/DocumentCenter/View/6414/Press-Release--Hyattsville-Police-Announce-Joint-Mental-Health-Programs-with-Brentwood-PD-and-Mount-Rainier-PD?bidId=>
- Jané-Llopis, E., Anderson, P., Stewart-Brown, S., Weare, K., Wahlbeck, K., McDaid, D., & Litchfield, P. (2011). Reducing the silent burden of impaired mental health. *Journal of Health Communication, 16*(sup2), 59-74.  
<https://doi.org/10.1080/10810730.2011.601153>
- Janesick, V. J. (2011). *"Stretching" exercises for qualitative researchers* (3rd ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Jennings, W. G. (2015). *The socialization of police officers: How law enforcement culture influences officer attitudes and behaviors*. *Policing: An International Journal of Police Strategies & Management, 38*(3), 505-523.  
<https://doi.org/10.1108/PIJPSM-04-2015-0049>
- Jessiman-Perreault, G., et al. (2021). Workplace support and social programs' impact on mental health. *Journal of Occupational Health, 63*(3), 273-284.  
<https://doi.org/10.1002/johe.2217>
- Johnston, M., Ricciardelli, R., & McKendy, L. (2022). Improving the mental health of

- correctional workers: Perspectives from the field. *Criminal Justice and Behavior*, 49(7), 951-970. <https://doi.org/10.1177/00938548221081468>
- Johnston, R., Barrett, C., & Richards, H. (2022). Correctional workers' mental health: A systematic review of the literature. *Occupational Health Review*, 24(1), 17-30. <https://doi.org/10.1093/occmed/kqaa112>
- Johnson, S., & Huerta, C. (2016). Occupational stress and health in corrections: A review of research and practice. *International Journal of Prisoner Health*, 12(2), 93-104. <https://doi.org/10.1108/IJPH-05-2015-0015>
- Jones, C., Miguel-Cruz, A., Smith-MacDonald, L., Cruikshank, E., Baghoori, D., Chohan, A. K., & Brémault-Phillips, S. (2020). *Virtual trauma-focused therapy for military members, veterans, and public safety personnel with posttraumatic stress injury: Systematic scoping review (preprint)*. <https://doi.org/10.2196/preprints.22079>
- Jones, R. N., & Gillis, L. A. (2020). Virtual trauma-focused therapy for law enforcement officers: Bridging the gap with technology. *Journal of Trauma & Dissociation*, 21(5), 595-609. <https://doi.org/10.1080/15299732.2020.1760172>
- Jurik, N. (1988). Striking a balance: Female correctional officers, gender role stereotypes, and male prisons. *Sociological Inquiry*, 58(3), 291-305. <https://doi.org/10.1111/j.1475-682x.1988.tb01063.x>
- Jyoshna, M. (2023). Masculinity, stigma, and help - seeking behaviour among Indian men. *PIJR*, 25-28. <https://doi.org/10.36106/paripex/8704002>
- Karaffa, K. M., & Koch, J. M. (2016). Stigma, pluralistic ignorance, and attitudes

toward seeking mental health services among police officers. *Criminal Justice and Behaviour*, 43(6), 759-777.

Karaffa, K. M., & Tochkov, K. (2013). Attitudes towards seeking mental health treatment among law enforcement officers. *Applied Psychology In Criminal Justice*, 9(2), 75-99.

Kelly, V. (2018). *The anatomy of burnout: Understanding the complexities of chronic stress*. Routledge. Justice, 9(2), 75-99.

Klinoff, A. V. (2016). *The assessment of burnout and resilience in correctional officers* (Doctoral dissertation, Nova Southeastern University). ProQuest Dissertations Publishing. <https://doi-org.ezp.waldenulibrary.org/10.1177/0093854818778719>

Khammissa, R. A. G., Nemitandani, S., Feller, G., & Lemmer, J. (2022). Burnout phenomenon: Neurophysiological factors, clinical features, and aspects of management. *Journal of International Medical Research*, 50(9). 030006052211064. <https://doi.org/10.1177/03000605221106428>

Kitaeff, J. (2019). *Handbook of correctional mental health*. Oxford University Press. <https://doi.org/10.1093/med/9780199360576.001.0001>

Konda, S., Reichard, A. A., & Tiesman, H. M. (2012). Occupational injuries among U.S. correctional officers, 1999-2008. *Journal of Safety Research*, 43(3), 181-186.

Konda, S., Tiesman, H., Reichard, A., & Hartley, D. (2013). U.S. correctional officers killed or injured on the job. *Corrections Today*, 75(5), 122-123.

Konyk, K., Ricciardelli, R., Taillieu, T., Afifi, T. O., Groll, D., & Carleton, R. N. (2021). Assessing relative stressors and mental disorders among canadian provincial



- correctional workers. *International Journal of Environmental Research and Public Health*, 18(19), 10018. <https://doi.org/10.3390/ijerph181910018>
- Korstjens, I., & Moser, A. (2018). Practical guidance to qualitative research. Part 4: Trustworthiness and publishing, *European Journal of General Practice*, 24(1), 120-124. DOI: 10.1080/13814788.2017.1375092
- Krakauer, R., Stelnicki, A., & Carleton, R. (2020). Examining mental health knowledge, stigma, and service use intentions among public safety personnel. *Frontiers in Psychology*, 11. <https://doi.org/10.3389/fpsyg.2020.00949>
- Kramar, M. (2018). Organizational support and mental health interventions. *Journal of Occupational Psychology*, 29(4), 312-326.
- Kramer, R., Jenkins, H., & Katz, R. (2012). Mental health interventions for correctional officers: Strategies for success. *Journal of Correctional Health Care*, 18(3), 252-264. <https://doi.org/10.1177/1078345821103498>
- Labra, Ó., Castro, C., Wright, R., & Chamblas, I. (2020). Thematic analysis in social work: A case study. *Global Social Work - Cutting Edge Issues and Critical Reflections*. <https://doi.org/10.5772/intechopen.89464>
- Lachman, R., & Diamont, A. (2007). Turnover intentions and job disengagement: An analysis of contributing factors. *Journal of Occupational Psychology*, 21(3), 256-272.
- Lambert, E. G., Barton-Bellessa, S. M., & Hogan, N. L. (2015). The consequences of emotional burnout among correctional staff. *SAGE Open*, 5(2), 1-15. DOI: 10.1177/2158244015590444

- Lambert, E. G., Hogan, N. L., & Barton, S. M. (2002). The impact of job satisfaction on turnover intent: A test of a structural measurement model using a national sample of workers. *The Social Science Journal, 39*(2), 233-250.
- Lambert, E. G., Hogan, N. L., Barton, S. M., & Jiang, S. (2010). Examining the relationship between supervisor and management trust and job burnout among correctional staff. *Criminal Justice and Behavior, 37*(4), 381-397.  
<https://doi.org/10.1177/0093854810362264>
- Lane, J., Le, M., Martin, K., Bickle, K., Campbell, E., & Ricciardelli, R. (2021). Police attitudes toward seeking professional mental health treatment. *Journal of Police and Criminal Psychology, 37*(1), 123-131. <https://doi.org/10.1007/s11896-021-09467-6>
- Lannin, D. G., Vogel, D. L., Brenner, R. E., Abraham, W. T., & Heath, P. J. (2015). Does self-stigma reduce the probability of seeking mental health information. *Journal of Counseling Psychology, Vol 63*(3),351-358.
- Lannin, D. G., Guyll, M., Vogel, D. L., & Madon, S. (2016). Reducing the stigma associated with seeking psychological help among police officers. *Journal of Police and Criminal Psychology, 31*(2), 102-111. <https://doi.org/10.1007/s11896-015-9163-8>
- Larsen, H. G., & Adu, P. (2021). *The theoretical framework in phenomenological research: Development and application*. Routledge.
- Lazzaretto-Green, M., Smith, P., & Wilson, T. (2011). Reflections on the impact of

- researcher background on qualitative data interpretation. *Journal of Correctional Health Care*, 17(4), 333-345. <https://doi.org/10.1177/1078345811414668>
- Lee, S., & Kim, H. (2019). Mental health training programs' effectiveness. *Journal of Counseling Psychology*, 66(3), 293-305. <https://doi.org/10.1037/cou0000339>
- Leedy, P. D., & Ormrod, J. E. (2010). *Practical research: Planning and design*. Upper Saddle River, NJ: Merrill.
- Lerman, A. E. and Harney, J. (2019). Feedback effects and the criminal justice bureaucracy: officer attitudes and the future of correctional reform. *The ANNALS of the American Academy of Political and Social Science*, 685(1), 227-249. <https://doi.org/10.1177/0002716219869907>
- Lewis, H., Thompson, J., & Jenkins, H. (2022). Organizational strategies to support correctional officers' mental health. *Journal of Occupational Health Psychology*, 27(3), 234-250. <https://doi.org/10.1037/ocp0000273>
- Lincoln, Y., & Guba, E. G. (1985). *Naturalistic inquiry*. Newbury Park, CA: Sage.
- Linneberg, M. S., & Korsgaard, S. (2019). Coding qualitative data: A synthesis guiding the novice. *Qualitative Research Journal*, 19(3), 259-270.
- Louis, S. (2023). Occupational hazards in corrections: the impact of violence and suicide exposures on officers' emotional and psychological health. *Criminal Justice and Behavior*, 50(9), 1361-1379. <https://doi.org/10.1177/00938548231177710>
- Maier, S. L., Moloney, J. L., & Brown, R. (2013). Law enforcement culture and the domestic violence cop: The relationships between job stress, family life, and

domestic violence. *Criminal Justice Studies*, 26(3), 241-255.

<https://doi.org/10.1080/1478601X.2013.822258>

Maggio, M. J., & Buddress, L. A. N. (1998). When an employee dies: Managing the aftermath of a critical incident. *Federal Probation*, 62(2), 20. Retrieved from <https://search-ebSCOhost-com.ezp.waldenulibrary.org/login.aspx?direct=true&db=a9h&AN=1741701&site=ehost-live&scope=site>

Maharaj, N. (2016). Using field notes to facilitate critical reflection. *Reflective Practice*, 17(2), 114–124. <https://doi-org.ezp.waldenulibrary.org/10.1080/14623943.2015.1134472>

Maier, J. A., Gentile, D. A., Vogel, D. L., & Kaplan, S. A. (2014). Media influences on self-stigma of seeking psychological services: The importance of media portrayals and person perception. *Journal of Psychology of Popular Media Culture*, 3(4), 239–256.

Martin, R., Lichtenstein, B., Jenkot, R., & Forde, D. R. (2012). They can take us over any time they want: Correctional officers' responses to prison crowding. *The Prison Journal*, 92(1), 88-105. <https://doi.org/10.1177/0032885511429256>

Martin, B. D., & Zimmerman, S. E. (2012). The impact of prison overcrowding on correctional officers' job stress and safety. *Journal of Correctional Health Care*, 18(4), 349-361. <https://doi.org/10.1177/1078345812456452>

- Marylene Cloitre (2015) The “one size fits all” approach to trauma treatment: Should we be satisfied?. *European Journal of Psychotraumatology*, 6:1. DOI: 10.3402/ejpt.v6.27344
- Maslach, C., & Leiter, M. P. (2016). *Burnout: A brief history and how to improve your life*. Harvard Business Review Press.
- Masuda, A., Anderson, P. L., & Edmonds, J. (2012). Help-Seeking Attitudes, Mental Health Stigma, and Self-Concealment Among African American College Students. *Journal of Black Studies*, 43(7), 773–786. <https://doi.org/10.1177/0021934712445806>
- Maslach, C., & Jackson, S. E. (1981). *Maslach Burnout Inventory--ES Form*. doi:10.1037/t05190-000
- Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology*, 52(1), 397-422. <https://doi.org/10.1146/annurev.psych.52.1.397>
- Matejkowski, J. (2021). Importance of anti-stigma interventions involving contact with individuals with mental illness. *Psychiatric Services*, 72(5), 546-553. <https://doi.org/10.1176/appi.ps.202000345>
- Miller, L. (2007). Police families: Stresses, syndromes, and solutions. *American Journal of Family Therapy*, 35(1), 21–40. <https://doi-org.ezp.waldenulibrary.org/10.1080/01926180600698541>
- Mobley, W. H., Horner, S. O., & Hollingsworth, A. T. (1979). An evaluation of precursors of hospital employee turnover. *Journal of Applied Psychology*, 63(4), 408-414. <https://doi.org/10.1037/0021-9010.63.4.408>

- Mohr, D. C., Hart, S. L., Howard, I., Julian, L., Vella, L., Catledge, C., & Feldman, M. D. (2006). Barriers to psychotherapy in depressed and non-depressed primary care patients. *Annals of Behavioural Medicine, 32* (3), 254-258.
- Moon, K., T. D. Brewer, S. R. Januchowski-Hartley, V. M. Adams, and D. A. Blackman. 2016. A guideline to improve qualitative social science publishing in ecology and conservation journals. *Ecology and Society 21*(3):17.  
<http://dx.doi.org/10.5751/ES-08663-210317>
- Morgan, A. J., Ross, A., & Reavley, N. J. (2018). Systematic review and meta-analysis of Mental Health First Aid training: Effects on knowledge, stigma, and helping behaviour. *PloS one, 13*(5), e0197102.
- Morgan-Mullane, A. (2023). Trauma-Focused Cognitive Behavioural Therapy. *In: An Integrative Approach to Clinical Social Work Practice with Children of Incarcerated Parents: A Clinician's Guide* (pp. 57-67). Cham: Springer International Publishing.
- Morse, J. M. (2015). Critical analysis of strategies for determining rigor in qualitative inquiry. *Qualitative Health Research, 25*(9), 1212–1222.  
<https://doi.org/10.1177/1049732315588501>
- Nam S. K, Chu H. J, Lee M. K, Lee J. H, Kim N, & Lee S. M. (2010). A meta-analysis of gender differences in attitudes toward seeking professional psychological help. *Journal of American College Health, 59*(2), 110–116. <https://doi-org.ezp.waldenulibrary.org/10.1080/07448481.2010.483714>
- Nemutandani, S., Feller, G., Lemmer, J., & Khammissa, R. (2022). Burnout

phenomenon: neurophysiological factors, clinical features, and aspects of management. *Journal of International Medical Research*, 50(9), 030006052211064. <https://doi.org/10.1177/03000605221106428>

Newell, C. J., Ricciardelli, R., Czarnuch, S. M., & Martin, K. (2022). Police staff and mental health: barriers and recommendations for improving help-seeking. *Police Practice and Research*, 23(1), 111-124.

Newell, C., Ricciardelli, R., Czarnuch, S., & Martin, K. (2021). Police staff and mental health: barriers and recommendations for improving help-seeking. *Police Practice and Research*, 23(1), 111-124. <https://doi.org/10.1080/15614263.2021.1979398>

Nohr, L., Ruíz, A., Ferrer, J., & Buhlmann, U. (2021). Mental health stigma and professional help-seeking attitudes a comparison between Cuba and Germany. *Plos One*, 16(2), e0246501. <https://doi.org/10.1371/journal.pone.0246501>

Nosheen, M., Sayed, Z., Malik, M., & Fahiem, M. A. (2019). *An evaluation model for measuring the usability of mobile office applications through user interface design metrics*. July 2019, 38(3), 641-654. <https://doi.org/10.22581/muet1982.1903.10>

Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). Thematic analysis: Striving to meet the trustworthiness criteria. *International Journal of Qualitative Methods*, 16, 1–13. DOI: 10.1177/1609406917733847.

Obidoa, C., Reeves, D., Warren, N., Reisine, S., & Cherniack, M. (2011). Depression and work-family conflict among corrections officers. *Journal of Occupational and Environmental Medicine*, 53(11), 1294-1301.

- O'Flaherty, R. (2017). *Factors affecting psychological help-seeking in men* (Doctoral dissertation). University of Warwick, ProQuest Dissertations Publishing
- Or, S. E. B., Hasson-Ohayon, I., Feingold, D., Vahab, K., Amiaz, R., Weiser, M., & Lysaker, P. H. (2013). Meaning in life, insight, and self-stigma among people with severe mental illness. *Comprehensive Psychiatry, 54*(2), 195-200.
- Øye, C., Sørensen, N., & Glasdam, S. (2015). Trustworthiness criteria in qualitative research. *International Journal of Qualitative Methods, 14*(1), 160940691561618. <https://doi.org/10.1177/1609406915616183>
- Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. (2015). Purposeful sampling for qualitative data collection and analysis in mixed method implementation research. *Administration and Policy in Mental Health and Mental Health Services Research, 42*(5), 533–544. doi-  
[org.ezp.waldenulibrary.org/10.1007/s10488-013-0528-y](https://doi.org/10.1007/s10488-013-0528-y).
- Park, H. I., Jacob, A. C., Wagner, S. H., & Baiden, M. (2014). *Job control and burnout: A meta-analytic test of the conservation of resources model. Applied Psychology, 63*(4), 607-642.
- Parker, G. H. (2009). Impact of a mental health training course for correctional officers on a special housing unit. *Psychiatric Services, 60*(5). <https://doi.org/10.1176/appi.ps.60.5.640>
- Parsons, D. M. (2015). *The relationship between perceived stress in relation to coping*



*strategies and the knowledge of personal risk factors in correctional officers*

(Doctoral dissertation, Alliant International University). Retrieved from google scholar

Patton, M. Q. (2002). *Qualitative research and evaluation methods* (3rd ed.). Thousand Oaks, CA: Sage Publications, Inc.

Pence, R., Owens-Solari, M., & Goodyer, I. (2016). Help-seeking in emerging adults with and without a history of mental health referral: A qualitative study. *BMC Research Notes*, *9*(1), 415. <http://doi.org/10.1186/s13104-016-2227-8>

Penz, M., Seifried-Dübon, T., Harth, V., Angerer, P., & Lück, F. (2017). Association of burnout and depressive symptoms with absenteeism and presenteeism among German employees. *Journal of Occupational and Environmental Medicine*, *59*(5), 502-509.

Percy, W. H., Kostere, K., & Kostere, S. (2015). Generic pragmatic qualitative research approach. *The Qualitative Report*, *20*(2), 76-85. <https://doi.org/10.46743/2160-3715/2015.2102>

Pfohl, A. H. (2010). *Factors influencing psychological help-seeking attitudes and behaviour in counseling trainees* (Doctoral dissertation). Ohio State University, ProQuest Dissertations Publishing.

Phelps, M. S. (2011). Rehabilitation in the punitive era: The gap between rhetoric and reality in U.S. prison programs. *Law & Society Review*, *45*(1), 33-68.

- Phelps, M. S. (2012). The place of punishment: Variation in the provision of inmate services staff across the punitive turn. *Journal of Criminal Justice, 40*(5), 348-357.
- Ponterotto, J. G. (2010). Qualitative research in multicultural psychology: Philosophical underpinnings, popular approaches, and ethical considerations. *Cultural Diversity and Ethnic Minority Psychology, 16*(4), 581-589.  
<https://doi.org/10.1037/a0012051>
- Priester, M. A., Browne, T., Iachini, A., Clone, S., DeHart, D., & Seay, K. D. (2016). Treatment access barriers and disparities among individuals with co-occurring mental health and substance use disorders: An integrative literature review. *Journal of Substance Abuse Treatment, 61*, 47-59.
- Purba, A., & Demou, E. (2019). The relationship between organizational stressors and mental well-being within police officers: A systematic review. *BMC Public Health, 19*: 1286. <https://doi.org/10.1186/s12889-019-7609-0>
- QSR International Pty Ltd. (2020). *NVivo support site*. Retrieved from <https://www.qsrinternational.com/nvivo-qualitative-data-analysis-software/home>
- QSR International Pty Ltd. (2020). *Academic research with NVivo*. Retrieved from <https://www.qsrinternational.com/nvivo-qualitative-data-analysis-software/about/nvivo/who-its-for/academia>
- R, H., Thomas, T., & George, S. (2022). The impact of perceived social support on mental health stigma and professional help-seeking behavior among college teachers in Kerala, India. *Preprints*. <https://doi.org/10.21203/rs.3.rs-2053256/v1>

- Ramesh, T. (2022). *Exploring masculinity, experience of distress and help-seeking within a UK male prison* (Doctoral dissertation). UCL (University College London), ProQuest Dissertations Publishing.
- Regehr, C., Carey, M. G., Wagner, S. L., Alden, L. E., Buys, N. J., Corneil, W., ... & White, N. (2019). Prevalence of PTSD, depression and anxiety disorders in correctional officers: A systematic review. *Corrections, 6*(3), 229-241.  
<https://doi.org/10.1080/23774657.2019.1641765>
- Ricciardelli, R., Idzikowski, M., & Pratt, K. (2020). Lives saved: correctional officers' experiences in the prevention of prisoner death by suicide. *Incarceration, 1*(2), 263266632095785. <https://doi.org/10.1177/2632666320957855>
- Ricciardelli, R., Power, N. G., Medeiros, D. S., & Memarpour, P. (2020). Correctional officers' perceptions of and concerns about mental health services: The role of peer and supervisory support. *Journal of Correctional Health Care, 26*(3), 233-245. <https://doi.org/10.1177/1078345820940552>
- Ricciardelli, R., & Power, N. G. (2020). The challenges of correctional work: The role of peer support, trust, and confidentiality. *Journal of Criminal Justice, 66*, 101635. <https://doi.org/10.1016/j.jcrimjus.2020.101635>
- Ricciardelli, R., Power, N. G., & Medeiros, D. S. (2019). Correctional officers' experiences of stress and coping strategies. *International Journal of Offender Therapy and Comparative Criminology, 63*(4), 457-473.  
<https://doi.org/10.1177/0306624X18822324>

- Ricciardelli, R., Carleton, R. N., Groll, D., & Cramm, H. (2018). Qualitatively unpacking correctional officer well-being: The role of officer risk and protective factors. *Justice Quarterly, 35*(7), 1145-1171.  
<https://doi.org/10.1080/07418825.2018.1428513>
- Ritchie, J., Lewis, J., McNaughton Nicholls, C., & Ormston, R. (Eds.). (2018). *Qualitative research practice: A guide for social science students and researchers*. National Centre for Social Research.
- Saunders, B., Sim, J., Kingstone, T., Baker, S., Waterfield, J., Bartlam, B... Jinks, C. (2018). Saturation in qualitative research: exploring its conceptualization and operationalization. *Quality & Quantity, 52*(4), 1893–1907. DOI:10.1007/s11135-017-0574-8
- Schaible, L. M., & Gecas, V. (2010). The impact of police culture on police officers' attitudes toward police work. *Journal of Police Science and Administration, 17*(2), 10-22. <https://doi.org/10.1111/j.1559-1816.2010.tb03043.x>
- Seedat, S. (2019). PTSD prevalence in correctional officers and targeted support needs. *Journal of Trauma Studies, 12*(2), 189-202.
- Shapiro, G. K., Cusi, A., Kirst, M., O'Campo, P., Nakhost, A., & Stergiopoulos, V. (2015). Co-responding police-mental health programs: A review. *Administration and Policy in Mental Health and Mental Health Services Research, 42*, 606-620.
- Shirom, A. and Melamed, S. (2006). A comparison of the construct validity of two burnout measures in two groups of professionals. *International Journal of Stress Management, 13*(2), 176-200. <https://doi.org/10.1037/1072-5245.13.2.176>

- Slate, R. N., & Vogel, R. E. (1997). Participative management and correctional personnel: A study of the perceived atmosphere for participation in correctional decision making and its impact on employee stress and thoughts about quitting. *Journal of Criminal Justice, 25*(5), 397-408. [https://doi.org/10.1016/S0047-2352\(97\)00029-6](https://doi.org/10.1016/S0047-2352(97)00029-6)
- Smid, G. E., der Meer, C. A. I., Olf, M., Nijdam, M. J., & van der Meer, C. A. I. (2018). Predictors of outcome and residual symptoms following trauma-focused psychotherapy in police Officers with post-traumatic stress disorder. *Journal of Traumatic Stress, 31*(5), 764–774. <https://doi-org.ezp.waldenulibrary.org/10.1002/jts.22328>
- Smith, H. P., Lewis, H., & Johnson, P. (2018). Promoting mental health in correctional environments: Key strategies and challenges. *Journal of Correctional Health Care, 24*(2), 123-139. <https://doi.org/10.1177/1078345821103757>
- Smith, J. A. (2017). Interpretative phenomenological analysis: Getting at lived experience. *Journal of Positive Psychology, 12*(3), 303–304. <https://doi-org.ezp.waldenulibrary.org/10.1080/17439760.2016.1262622>
- Smith, J. A., & Osborn, M. (2015). Interpretative phenomenological analysis. In J. A. Smith (Ed.), *Qualitative psychology: A practical guide to methods* (3rd ed., pp. 53–80). Sage Publications.
- Soomro, S., & Yanos, P. T. (2019). Predictors of mental health stigma among police officers: The role of trauma and PTSD. *Journal of Police and Criminal Psychology, 34*, 175-183.

- Spinaris, C. G., Denhof, M. D., & Kellaway, J. A. (2012). *Posttraumatic stress disorder in United States corrections professionals: Prevalence and impact on health and functioning*. Desert Waters Correctional Outreach. <https://www.desertwaters.com>
- Steinkopf, B. L. (2015). The blue wall of silence: A case study of police culture and officer relationships. *Journal of Organizational Culture, Communications and Conflict, 19*(2), 159-174.
- Steinkopf, B. L., Hakala, K. A., & Van Hasselt, V. B. (2015). Motivational interviewing: Improving the delivery of psychological services to law enforcement. *Professional Psychology: Research and Practice, 46*(5), 348-354. <http://dx.doi.org/10.1037/pro0000042>
- Stello, S., & Roodenburg, J. (2015). Acquiescence response bias: Yea saying and higher education. *The Educational and Developmental Psychologist, 32*(2), 105-119.
- Stoyanova, R. G., & Harizanova, S. N. (2016). Assessment of the personal losses suffered by correctional officers due to burnout syndrome. *International Journal of Occupational & Environmental Medicine, 7*(1), 33-41. <https://doi-org.ezp.waldenulibrary.org/10.15171/ijoem.2016.680Sage>. [Google Scholar]
- Tanigoshi, H., Kontos, A. P., & Remley Jr., T. P. (2008). The effectiveness of individual wellness counseling on the wellness of law enforcement officers. *Journal of Counseling & Development, 86*(1), 64-74. <https://doi->
- Terry, G., Hayfield, N., Clarke, V., & Braun, V. (2017). Thematic analysis. *The Sage Handbook of Qualitative Research in Psychology, 17-36*. <https://doi.org/10.4135/9781526405555.n2>

- Thoits, P. A. (2011). Resisting the stigma of mental illness. *Social Psychology Quarterly*, *74*(1), 6-28. <https://doi.org/10.1177/0190272511398019>
- Thoits, A. P. (1995). Stress, coping, and social support processes: Where are we? What next? *Journal of Health and Social Behaviour (Extra Issues)*: 53-79.
- Thompson, M., Rayens, M. K., & Wiggins, A. T. (2022). Evaluating long-term mental health interventions in correctional facilities: A case study in Maryland. *Journal of Correctional Health Care*, *28*(3), 200-215. <https://doi.org/10.1177/10783458221100145>
- Thompson, M., Smith, H. P., & Bybee, D. (2021). Cultural shifts in correctional facilities: The impact of mental health training on perceptions and stigma. *Journal of Correctional Health Care*, *27*(4), 280-295. <https://doi.org/10.1177/10783458211030095>
- Thompson, N. L., et al. (2022). Variance in mental health experiences across different regions. *International Journal of Mental Health Systems*, *16*, 45. <https://doi.org/10.1186/s13033-022-00457-8>
- Topkaya, N. (2014). Gender, Self-Stigma, and Public Stigma in Predicting Attitudes toward Psychological Help-Seeking. *Educational Sciences: Theory and Practice*, *14*(2), 480-487.
- Tanigoshi, H., Kontos, A. P., & Remley, T. P. (2008). The effectiveness of individual wellness counseling on the wellness of law enforcement officers. *Journal of Counseling & Development*, *86*(1), 64-74. <https://doi.org/10.1002/j.1556-6678.2008.tb00628.x>

- Torchalla, I., & Strehlau, V. (2018). The Evidence Base for Interventions Targeting Individuals With Work-Related PTSD: A systematic review and recommendations. *Behaviour Modification, 42*(2), 273–303. <https://doi-org.ezp.waldenulibrary.org/10.1177/0145445517725048>  
[org.ezp.waldenulibrary.org/10.1002/j.1556-6678.2008.tb00627.x](https://doi-org.ezp.waldenulibrary.org/10.1002/j.1556-6678.2008.tb00627.x)
- Tracy, S. (2004). The construction of correctional officers: layers of emotionality behind bars. *Qualitative Inquiry, 10*(4), 509-533.  
<https://doi.org/10.1177/1077800403259716>
- Trochim, W. M. K. (2006). *Survey research*. Retrieved from <http://www.socialresearchmethods.net/kb/survey.php>
- Trounson, J. S. and Pfeifer, J. E. (2017). Correctional officers and workplace adversity. *Journal of Correctional Health Care, 23*(4), 437-448.  
<https://doi.org/10.1177/1078345817720923>
- Tulyakul, P., & Meepring, R. (2020). Impact of educational programs on mental health perceptions. *Journal of Psychiatric and Mental Health Nursing, 27*(2), 139-148.  
<https://doi.org/10.1111/jpm.12566>
- Turecki, G., Brent, D. A., Gunnell, D., O'Connor, R. C., Oquendo, M. A., Pirkis, J., & Stanley, B. H. (2019). Suicide and suicide risk. *Nature Reviews Disease Primers, 5*(1), 1-22. <https://doi.org/10.1038/s41572-019-0121-0>
- U.S. Department of Health and Human Services. (2020). *The Surgeon General's call to action to implement the National Strategy for Suicide Prevention*. U.S. Public



Health Service. <https://www.hhs.gov/surgeongeneral/reports-and-publications/suicide-prevention/index.html>

Van Manen, M. (2007). Phenomenology of practice. In: D. Jardine (Ed.), *Pedagogy left in peace: Cultivating free spaces in teaching and learning* (pp. 49-72). Routledge

van Manen, M. (1990). Beyond assumptions: Shifting the limits of action research.

*Theory Into Practice*, 29(3), 152. [https://doi-](https://doi-org.ezp.waldenulibrary.org/10.1080/00405849009543448)

[org.ezp.waldenulibrary.org/10.1080/00405849009543448](https://doi-org.ezp.waldenulibrary.org/10.1080/00405849009543448)

Vasileiou, K., Barnett, J., Thorpe, S., & Young, T. (2018). Characterizing and justifying sample size sufficiency in interview-based studies: Systematic analysis of

qualitative health research over a 15-year period. *BMC Medical Research*

*Methodology*, 18(1), 1-18. [doi-org.ezp.waldenulibrary.org/10.1186/s12874-018-](https://doi-org.ezp.waldenulibrary.org/10.1186/s12874-018-0594-7)

[0594-7](https://doi-org.ezp.waldenulibrary.org/10.1186/s12874-018-0594-7).

Violanti, J. M., Charles, L. E., McCanlies, E., Hartley, T. A., Baughman, P., Andrew, M.

E., Fekedulegn, D., Ma, C. C., Mnatsakanova, A., & Burchfiel, C. M. (2017).

Police stressors and health: A state-of-the-art review. *Policing* (Bradford,

England), 40(4), 642–656. <https://doi.org/10.1108/PIJPSM-06-2016-0097>

Vogel, D. L., Heimerdinger-Edwards, S. R., Hammer, J. H., & Hubbard, A. (2011).

“Boys don’t cry”: Examination of the links between endorsement of masculine norms, self-stigma, and help-seeking attitudes for men from diverse backgrounds.

*Journal of Counseling Psychology*, 3, 368.

Vogel, D. L., Wade, N. G., & Hackler, A. H. (2007). Perceived public stigma and the

willingness to seek counseling: The mediating roles of self-stigma and attitudes

- toward counseling. *Journal of Counseling Psychology*, 54(1), 40-50.
- Vogel, D. L., Wester, S. R., & Larson, L. M. (2007). Avoidance of counseling: Psychological factors that inhibit seeking help. *Journal of Counseling & Development*, 85(4), 410-422
- Vogel, D. L., Wade, N. G., & Haake, S. (2006). Measuring the self-stigma associated with seeking psychological help. *Journal of Counseling Psychology*, 53(3), 325-337.
- Vogel, D. L., & Wester, S. R. (2003). To seek help or not to seek help: The risks of self-disclosure. *Journal of Counseling Psychology*, 50(3), 351-361.
- Wade, N. G., Vogel, D. L., Armistead-Jehle, P., Meit, S. S., Heath, P. J., & Strass, H. A. (2015). Modeling stigma, help-seeking attitudes, and intentions to seek behavioural healthcare in a clinical military sample. *Psychiatric Rehabilitation Journal*, 38(2), 135-141. <http://dx.doi.org/10.1037/prj0000131>
- Wade, K. M., Baker, P. M., & McVicar, C. (2015). Occupational stress and correctional officer job satisfaction: The impact of emotional intelligence. *Journal of Criminal Justice*, 43(5), 478-486. <https://doi.org/10.1016/j.jcrimjus.2015.07.002>
- Wallace, A. E., & Walthall, H. (2019). Policy advocacy for mental health reform in correctional settings: Mandating mental health screenings and comprehensive coverage. *Journal of Health Politics, Policy and Law*, 44(5), 757-780. <https://doi.org/10.1215/03616878-7772295>
- Weiss, D. S., Brunet, A., Best, S. R., Metzler, T. J., Liberman, A., Pole, N., & Marmar, C. R. (2010). Frequency and severity approaches to indexing exposure to trauma:

- The Critical Incident History Questionnaire for police officers. *Journal of Traumatic Stress*, 23(6), 734–743. <https://doi.org/10.1002/jts.20576>
- Willemse, R. (2020). An investigation into the South African correctional officers' experiences of their work and the employee assistance programme. *South African Journal of Psychology*, 51(4), 547-559.  
<https://doi.org/10.1177/0081246320980312>
- Williams, M. T., Metzger, I. W., Leins, C., & DeLapp, C. (2022). The role of stigma in mental health help-seeking among correctional officers. *Journal of Correctional Health Care*, 28(2), 100-114. <https://doi.org/10.1177/10783458221076422>
- Wills, C., Bates, K., Frost, N. A., & Monteiro, C. E. (2021). Barriers to help-seeking among correction officers: Examining the influence of institutional culture and structure. *Criminal Justice Studies*, 34(4), 423-440.
- Wolf, E. (2013). *Stress and trauma in correctional officers: Assessing resilience and promoting wellness*. Correctional Education Association.
- Worley, R. M., Lambert, E. G., & Worley, V. B. (2022). Can't shake the prison guard blues: Examining the effects of work stress, job satisfaction, boundary violations, and the mistreatment of inmates on the depressive symptomatology of correctional officers. *Criminal Justice Review*, 48(4), 474-494.  
<https://doi.org/10.1177/07340168221123229>
- Woods, D., Leavey, G., Meek, R., & Breslin, G. (2020). Developing mental health awareness and help seeking in prison: A feasibility study of the State of Mind Sport programme. *International Journal of Prisoner Health*, 16(4), 403-416.

- Wright, T. A., Cropanzano, R., & Bonett, D. G. (2020). The impact of resource depletion on well-being and job performance: An examination of the Conservation of Resources model. *Journal of Occupational Health Psychology, 25*(2), 175-189.  
<https://doi.org/10.1037/ocp0000173>
- Yob, I., & Brewer, P. (2015). *Understanding and practicing social change in higher education*. Manuscript submitted for publication. Walden University.
- Zimmerman, G. M., Fridel, E. E., & Frost, N. A. (2023). Examining differences in the individual and contextual risk factors for police officer, correctional officer, and non-protective service suicides. *Justice Quarterly, 41*(3):1-28  
<https://doi.org/10.1080/07418825.2023.2188063>

## Appendix A: Recruitment Flyer

**!!!Audio Recorded Interview Study Seeking Participants!!!**

Let's work to reduce the stigma around seeking psychological help among Correctional Officers.

**Would you like to share your mental health therapy experience?**

This research is part of the doctoral study for a Ph.D. student at Walden University.

A new study on psychological help-seeking among frontline correctional officers invites you to share your counseling experiences. It could help mental health providers (psychiatrists, psychologists, counselors) better understand and help patients like you. For this study, you are invited to describe your mental health experiences.

**Volunteers must meet these requirements:**

- 21 years or older
- Current or former US Correctional Officer
- 8 or more therapy sessions

**About the study:**

- 40-50 minutes audio interview (in-person, via phone or Microsoft teams, Google or zoom) **in the next 3 weeks.**
- Ensures privacy and confidentiality by removing all identifying information.

**To Confidentially Volunteer:  
Please Email:  
Phone#:**

Dear Potential Participant,

I am a doctoral student researching psychological help-seeking among frontline correctional officers in Maryland. You may know me as officer but this study is separate from that role. This study will partially fulfill the requirements for a Ph.D. in Psychology. 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 seeks 5-10 volunteers who are:

- 21 years or older
- Current or former pretrial correctional officer in the state of Maryland
- 8 or more past therapy sessions
- Worked in direct contact with detainees/inmates?

**Study Purpose:**

Corrections Officers are expected to have considerable tolerance for working and living with violence and danger and anxiety, substance abuse, suicide, obesity, post-traumatic disorders, and other risks for premature death among correctional officers are common occurrences.

This study aims to look at correctional officers' perceptions about mental health care and the use of mental health services. This study could help providers like psychiatrists, psychologists, and counselors better understand and help their patients and promote proactive mental health care among correctional officers.

**Procedures:**

This study will involve you completing the following steps:

- Completing an initial demographic questionnaire (2 minutes)
- Taking part in an audio-recorded interview that will be done in-person, via phone, or Google or Zoom (insert 40-50 minutes)

Here are some sample questions:

- In your in-service training, how is mental health awareness addressed? And how, if any, does it help you?
- What kinds of things make it easy for you to seek psychological help from a mental health professional?
- Could you mention the factors that prevent or have prevented you from receiving psychological help from a mental health professional?

**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. If you decide to join the study now, you can change your mind later. You may stop at any time.

**Risks:**

There are no physical risks associated with this study. The interview on seeking psychological help/treatment may elicit temporary and mild negative feelings of distress in some participants. However, the likelihood of the participants experiencing prolonged or substantial distress is relatively low.

**Benefits:**

The study may help mental health providers understand correctional officers' perceptions and attitudes about receiving psychological care and possibly identify strategies to improve mental health care seeking among correctional officers.

**Payment:**

There is no payment for participating in this study.

**Confidentiality**

Any information you provide during the research process will be kept confidential. However, as a Certified Psychological Associate and Licensed Graduate Professional Counselor (LGPC), mandated reporting obligations legally require reporting any suspicion of child/elder maltreatment, abuse, or neglect to the relevant authorities. Your personal information will not be used for any purposes outside of this research project. In addition, your name or any information that could identify you in the study reports will be removed or changed. Please note that if your information is shared with another researcher in the future, the data set would contain no identifiers, so this would not involve another round of obtaining informed consent. Your information will be kept secure on an encrypted electronic storage device in a password-protected safe to keep your identity confidential and privacy. Data will be kept for at least five years, as required by Walden University.

**Contacts and Questions:**

You may ask questions by contacting the researcher via phone at 410-881-7590 or email to discuss your rights as a participant in this study, you may call Walden University's Research Participant Advocate or email. Walden University's approval number for this study is **05-11-22-0183206** and it expires on **May 10, 2023**.

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

**Obtaining your Consent:**

If you understand the study and wish to volunteer, please reply to this email with the words 'I Consent' and include your responses to the included questionnaire.

**Title:** Mental Health Care and Psychological Help-Seeking in Corrections Officers

**Researcher:** Doctoral Candidate Natasha Charles McQueen

**Affiliation:** Walden University

**Abstract:** This generic qualitative interview protocol outlines the study to explore the perceptions of mental health and attitudes towards seeking psychological assistance among frontline correctional officers. To the best of the researcher's knowledge, no published studies exclusively explore these perceptions. This research approach enables the collection, organization, and presentation of participants' perspectives on mental health care and their willingness to seek assistance, utilizing their own words. The study includes carefully selected quotations that illustrate the concrete themes and voices of the respondents, aimed at filling a substantial gap in empirical knowledge regarding mental health care perceptions and psychological help-seeking behaviors of correctional officers.

**Introduction:** The primary objectives of this study are to examine the perceptions of mental health care and psychological assistance-seeking behaviors among correctional officers, with a specific focus on those working on the frontlines. This research will hopefully facilitate an opportunity for respondents to articulate how individual, organizational, and societal factors influence their willingness to seek psychological support.

**Research Questions:**

1. **Individual Factors:** How do stigma, coping strategies, and personal history influence Correctional officers' active pursuit of psychological assistance?
2. **Organizational Factors:** What impact do leadership support, accessibility of mental health resources, supervisory practices, and training have on correctional officers' willingness to seek psychological support?
3. **Societal Factors:** How do media portrayal, public opinion, and intervention approaches affect the stigmatization of mental health difficulties encountered by correctional officers?

**Methodology:** The target population for this study includes frontline correctional officers in a state in the Mid-Atlantic region, specifically in major urban and surrounding county locations. Participants must meet criteria including being 18 years or older, currently or formerly employed as a frontline correctional officer, and attending at least eight therapy sessions. Participants will be recruited through various online and social



media platforms, utilizing non-probability convenience sampling methods due to their availability, accessibility, and ease of use.

**Ethical Considerations:** All participants will be fully informed about the study, their rights, and their ability to withdraw at any time. Their participation is entirely voluntary, and no personal identifying information will be collected. This study has been approved by Walden University's Institutional Review Board (IRB Number: [05-11-22-0183206]).

**Data Collection:** Qualitative interviews will be conducted either via an online communication platform with high-quality audio/video capabilities or in-person with audio recording. The interviews, expected to last between 40-50 minutes, will follow a semi-structured format, allowing for an in-depth exploration of the participants' perceptions and experiences.

**Findings:** The study has revealed a strong consensus on the necessity for mandatory mental health check-ins and enhanced training for recognizing signs of mental health distress. Participants also reported considerable relief from the mental health care received, which equipped them with the necessary coping techniques and skills to navigate challenges such as lack of support and isolation.

**Conclusion:** The research findings emphasize the critical need for structured mental health support within correctional facilities and highlight the positive impacts of such support on correctional officers' well-being and job performance.

**Data Management and Privacy:** Recordings will be transcribed and securely stored, with all data being anonymized to protect participant confidentiality. Data will be retained for three years following Walden University IRB and US government guidelines, with secure erasure methods employed to prevent unauthorized data recovery.

**Dissemination of Findings:** The findings will be reported and disseminated through visual slides, presentations at academic conferences, and publications in relevant journals. A user-friendly version of the findings will also be released on social media, the researcher's blog, or through a non-profit foundation to ensure broader outreach.

**Contact Information:** You may ask questions by contacting the researcher via phone or email. If you want to discuss your rights as a participant in this study, you may call Walden University's Research Participant Advocate or email. Walden University's approval number for this study is 05-11-22-0183206 and it expires on May 10, 2023.