



## The Correctional Oasis

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DWCO 17 Years—2003-2020

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Research has repeatedly shown that corrections professionals, especially officers, are in the throes of a mental health crisis. The question is, what science-based measures are being taken to prevent damage to staff as much as possible? And what programs are in place to lessen negative consequences after staff become affected by the job? This article reviews issues related to setting up staff wellness initiatives.

[http://desertwaters.com/wp-content/uploads/2019/11/DWCO\\_6-Mistakes\\_Correctional-Staff-Wellness.pdf](http://desertwaters.com/wp-content/uploads/2019/11/DWCO_6-Mistakes_Correctional-Staff-Wellness.pdf)

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The Burden of Job Role Complexities  
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A prior version of this article appeared in the March 2018 issue of the Correctional Oasis.

Since the criminal justice pendulum in the United States has swung towards more rehabilitation and re-entry efforts and away from sheer containment, and since custody staff are the correctional employees that offenders interact with the most, custody staff's job description has expanded.

In addition to ensuring safety and securing offenders' adherence to rules, custody staff are now tasked with being part of the effort to help "reprogram" offenders' thinking toward becoming more prosocial and toward making more constructive choices.

This complex and demanding task requires the use of interpersonal skills beyond those needed in traditional custody work, such as good communication and de-escalation skills. Custody staff's expected involvement with offenders now may range from empathetic listening, to giving words of affirmation or encouragement, to engaging in the application of

motivational interviewing techniques or problem-solving strategies to defusing an interpersonal conflict. In short, custody staff are currently expected to operate as both cops and helpers, as both law enforcers and mentors, as both disciplinarians and lay counselors.

The intent for promoting such dual professional roles is good. It does make eminent sense that offenders should be given every opportunity to improve themselves, so there are positive outcomes to their incarceration experience, whether they return to the community or not.

And at the same time, the expansion of the custody staff's role increases the complexity of their work and its psychological burden on them. To understand that, the context in which custody staff operate needs to be considered.

There are two types of danger that shape corrections work, because the possibility that they may happen is ever-present: the danger of violence and the danger of being manipulated by offenders.

Custody staff's dual professional role is expected to be carried out in a context where the potential for violence and manipulation is never eliminated. Staff may be assaulted at work, witness violence against others, and might endure verbal assaults and verbal threats on a regular basis. And they may at times encounter offender manipulation "games," or see other staff be taken down through such "games."

Both the likelihood of violence and the likelihood of manipulation happening can lead staff to feel apprehensive around offenders. The natural reaction to the anticipation of something dangerous happening is to try to reduce the probability of that risk occurring. So, it is natural for custody staff to try to maintain their distance from offenders—both physically and psychologically—in order to decrease the probability of their becoming targets of violence or manipulation. Custody staff would rather be able to watch offenders from a safe distance while "standing" behind psychological walls, interacting with them only as needed, and intervening only when necessary.

However, this "behind the wall" stance runs counter to the requirements of the dual role relationship—being cop and helper—when managing offenders. Anticipation of the dangers of manipulation and violence interferes with what it takes to interact with offenders in a lay counselor/mentor role. This is because this role requires approaching and "connecting" with offenders, getting to know them as people by asking probing questions—and not avoiding them.

And this urge to stay away from danger is not just a thought that crosses staff's minds. Rather, it also exists at a "hard-wired," neurological level. With every negative work experience regarding offenders, the brains of custody staff store potentially life-saving information, equating with danger, and perceiving them to be the "enemy."

Offenders and their reminders become cues that now trigger in staff's brains and bodies cascades of biochemical events, resulting in the fight-or-flight response. These are automatic physiological realities that happen involuntarily and are usually followed by self-protective thoughts and actions. Such reactions can happen at any time, not only in the midst of critical incidents. Under such conditions, empathetic communication and motivational interviewing techniques take the back seat, if they are considered at all.

Studies have shown that about one-third of custody staff meet PTSD criteria on valid screening instruments. That means that about a third of the custody staff have significant offender-based traumatic triggers. Similarly, having been manipulated, having witnessed the outcomes of other staff being manipulated, or merely being concerned about that happening, can cause custody staff to experience anxiety and/or hostility when interacting with offenders.

Yet, the custody staff's expanded professional role now includes being supportive to those who trigger fight-or-flight alarms in their brain—to approach them instead of avoiding them.

It is a highly demanding expectation to ask custody staff to set their physiological and psychological reactions aside, and instead to be impartially, objectively and even empathically available to offenders in a helping role. Such an expectation places a considerable psychological burden on custody staff, especially if self-regulation and interpersonal skills are not

their strong suit. That is, custody staff are asked to override their apprehensions, frustrations or grudges regarding offenders daily, and instead build rapport with them within an at times tumultuous professional relationship.

Being able to pull that off requires that custody staff exercise supreme self-control, superb management of their emotions and thoughts, and effective processing of high-stress events on an ongoing basis. This is what it would take if they are to be able to interact daily with offenders with a clean and receptive slate. It takes a tremendous amount of self-regulation skills to be able to be genuinely supportive to those perceived to be “the enemy.”

(By “professional rapport” with offenders in the context of corrections work I mean one-way relationships of staff with offenders wherein the staff manage and tend to offenders’ needs, while maintaining their own professional boundaries—not disclosing personal information to offenders, and not looking to them to meet their own personal needs or wants. This type of rapport is unlike the usual relationships in the “free world,” which are based on mutual disclosing, and a degree of mutual dependence and trust. Custody staff’s professional rapport with offenders must be more akin to the relationship of psychotherapists with clients. Therapists focus on client needs and show empathy, but self-disclose minimally, and do not seek to meet personal needs or wants through their clients. Maintaining such tight professional boundaries requires self-awareness and self-discipline, and adds to the psychological burden of the custody staff’s job.)

And to be effective as law enforcers in addition to mentors, custody staff must interact with offenders as helpers while also remaining vigilant, on guard, keeping “emergency preparedness plans” at the forefront of their mind at all times, in case violence does break out or in case they become the target of a “game.”

It is not suggested here that it is impossible for the dual mindset of self-preservation and supportiveness to co-exist. It IS possible, especially in correctional environments where violence is not a frequent occurrence. However, having these two mindsets, and switching from one to the other according to situational demands, is hard to do. As mentioned earlier, it takes above average skillfulness, motivation, flexibility, and tenacity to switch back and forth as needed, especially over time as more negative events and interactions with offenders take place.

One way to address these issues is to train staff on self-regulation skills, interpersonal skills, and on professional boundary maintenance in the context of complex interactions and long-term relationships (as in correctional institutions staff may interact with some offenders for years). Administrators can begin to address these matters at the hiring stage by selecting candidates that demonstrate a proclivity for skillful self-regulation and verbal communication, while also being able to hold their ground, and providing new hires with relevant training.

In addition, policies must be in place so that appropriate consequences are meted out to offenders for violence and for other rule violations. It is vital for staff to perceive that their safety and their welfare are valued by administrators. If instead staff perceive treatment and rehabilitation trends to be synonymous with offenders not being held accountable for their actions, they will resent these new trends, and may follow the letter but not the spirit of these reforms. Moreover, when such policies for consequences to rule violations are in place and enforced, staff are seen by offenders as merely carrying out the agency’s policies—not as taking matters of justice or revenge in their own hands. This helps preserve custody staff’s helper/mentor status with offenders.

If this dual-role complexity that custody staff are facing is not acknowledged by administrators, and if staff are not supported through policies and trained regarding their very demanding job roles, it is likely that some may deal with the “helper” job requirement by simply “going through the motions,” only paying lip service to the expectation that they function in a supportive role toward offenders. Other staff who experience negative interactions with offenders firsthand may pull back from the helper role, opting to operate along the containment part of their job only. And some may even choose to mete out their own justice to offenders.

Given the difficulties of what custody staff are tasked with, it is critical to validate custody staff’s dilemma (self-preservation vs. helpfulness), and to provide them with policy support, ongoing specialized training, and any other tools needed to assist them in fulfilling both of their key job requirements in today’s changing corrections world.

<sup>1</sup> [http://desertwaters.com/wp-content/uploads/2013/09/PTSD\\_Prev\\_in\\_Corrections\\_09-03-131.pdf](http://desertwaters.com/wp-content/uploads/2013/09/PTSD_Prev_in_Corrections_09-03-131.pdf)

<sup>2</sup> [http://desertwaters.com/wp-content/uploads/2016/07/MCO-Paper\\_FINAL.pdf](http://desertwaters.com/wp-content/uploads/2016/07/MCO-Paper_FINAL.pdf)

<sup>3</sup> [https://www.michigan.gov/documents/corrections/MDOC\\_Staff\\_Well-being\\_Report\\_660565\\_7.pdf](https://www.michigan.gov/documents/corrections/MDOC_Staff_Well-being_Report_660565_7.pdf)

Thoughtful comments and suggestions by Brent Parker were incorporated in the article's final version.

## Reach Out and Someone Will Reach Back! I Promise!

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When we ask someone how they are doing or if they are all right, do we really want the truth or are we just speaking in generalities? We are so conditioned to ask a question that we already know the answer to. Ask yourself, "what if?" What if you ask someone if they are all right and they say "No?" Now what? Where do we go from here? We need to be open and ready to hear an honest response, but more importantly we need to be prepared HOW to respond to a response of, "No, I'm not all right."

But the thing about correctional staff is WE LIE. We lie A LOT. Before we can expect others to know something is wrong, we must be honest with them when they ask. Most importantly, we must be honest with ourselves. Some of us are not okay. Some of us are in crisis.

I know the hardest thing for us to do is ask for help, but why is that? Is it ego, pride, embarrassment, feeling inadequate? I would say yes to all of these, and more. If I am in a dangerous situation and I use my radio to call for assistance, staff will come running from places we didn't even know staff were. That's one amazing thing about us. Even if we have our differences, when that call for assistance comes, we come running as fast as we can. We don't hesitate to get on that radio or activate our personal alarm if our lives are in danger, but when it comes to our mental health, we freeze. Even though our mental health is a life and death situation. I know for a fact that staff suicides in our Department of Corrections are at epidemic levels. I can only guess other states are dealing with the same issue.

So why don't we call for help when it's our mental health? Is it because weak people need help? People that have lost control need help? Incompetent people need help? Ignorant people need help? The fact is that this couldn't be farther from the truth. It takes real strength to ask for help. It takes someone that doesn't want to lose control to ask for help. It takes competence to realize that you are in crisis and need help. And it's not ignorance, but knowledge to know you need help, accepting the fact you need help and seeking that help.

Asking for help can be one of the scariest things you ever do, but it can save your life, your marriage, your relationship with your children and family, and your relationships with your friends. It can also be a testimony for someone else that needs the courage to step up and ask for help. You asking for help may save someone else's life. The life you save may be that of a family member.

This career affects us in so many ways. Ways that we don't even realize until years later. If you are feeling the effects of this job, so is your family. "I leave work at work. I don't take work home with me." You absolutely do take this job home with you! That's just another lie we tell ourselves.

I was that guy that was an expert at leaving work at work and home at home. I never took the job home with me. I never went home after a hard day and told "war stories." I wanted to protect my wife and children from the evil world I know. Instead of protecting them, I was isolating them.

I THOUGHT I left work at work UNTIL I realized my oldest son won't sit in a restaurant unless his back is facing a wall so he can see all the people and all the doors. UNTIL my oldest daughter started to isolate herself from family and friends like her dad was so good at doing. UNTIL my youngest daughter was using profanity worse than me, and was fighting every weekend or getting kicked out of school. UNTIL I realized my youngest son has a sense of humor that is so sick and twisted, it's bothersome.

UNTIL my wife, my confidant and best friend in the entire world, told me, "I don't even like talking to you. I never know who you are going to be. Everything I say and do makes you mad. I can't seem to do anything right for you."

UNTIL I realized and accepted that I was unhappy with myself. I was miserable. UNTIL I admitted I was depressed, my anxiety was out of control, I was paranoid and angry. I have isolated myself from family and friends. Rarely are we invited out with friends anymore because I always found a reason not to go, even though I really wanted to go. My nightmares became more violent and more frequent. I trusted no one, and I mean no one. I have become unsympathetic to others because if I can deal with all the tragedy I have experienced in my life, why should I feel bad for you? No one can relate to or care about what I've been through.

I'm paranoid because the world is such an ugly, violent and cruel place. I continuously worry about my loved one's safety. Is the world this evil place I picture it to be? Or is MY world, OUR world, OUR reality an evil place? I carry my handgun anytime I leave the house. I know people that carry their gun even while they are in their own homes.

It is okay to not be okay! Read that again. Now read that again. It is okay to not be okay. The anger, depression, anxiety, etc., are normal feelings. The important thing is that we don't stay there. We feel what we feel. We acknowledge it and move on. If we can't then it is imperative that we ask for help. We must drop the pride and ego and ask for help. Help is out there. We feel alone, but we aren't. We must start somewhere with changing our culture's macho image. We must stop suffering in silence. There are so many resources available to us. Change starts with us. If you can relate to anything I have said, please start making changes. Please don't be a statistic. Please don't put your loved ones through the trauma of losing you. Reach out and someone will reach back!

I have been doing this job for 24 years. I am glad I have learned that I really don't leave work at work. I acknowledge it. I accept it, and now is the time to correct it!

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"By far the best training I have been through." C.S., Lt.

"This course will have a profound impact on all correctional staff both at home and at work." V.S., Sgt.

"This course really helped me evaluate myself and gave me the tools to help myself and my family." I.L., CO

"Besides CF2F, this is one of the most needed classes. It teaches us how to counteract the negative effects that our careers bring. It can improve our home life and extend our life expectancy." J.M., Lt.

"This course has already made me a better person. I can't wait to teach this class to our staff and make a difference in someone's life." A.L., Sgt.

"Eight and The Gate" Does Not Work Anymore  
By Anonymous Correctional Officer

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I am diagnosed with PTSD. When I reached out to the state's mental health emergency hotline and the Department

during my extended breakdown, they were dismissive of me once I said that I was not feeling suicidal. As far as I am concerned, the Department of Corrections did nothing for me.

My mental health struggles started around the 5th year of my DOC career. That's when I admitted to myself (but no one else) that I was not as tough as I thought, and I realized being a prison guard was affecting my personal life and changed the way I think and feel. I became more cynical, withdrawn and aggressive. At times I felt non-human, and was emotionless! I could not stop the intrusive thoughts, which made me feel like I had no control.

I have experienced serious threats to my family and myself. Inmates have injured me. I have witnessed an inmate dying or encountered a recently dead inmate. I have dealt with inmates who have been recently beaten and/or sexually assaulted. Exposure to these kinds of stressors became a risk factor for my mental illness. We as prison guards face a constant threat of exposure to inmate criminality, mental illness, gang membership, and drug use, making acts of violence difficult to predict and even more difficult to control. We also work under an almost constant state of threat to our own personal safety—at any moment we could be trapped in a life-threatening situation. I feel the DOC does a great job at minimizing traumatic events, such as labeling everything that happens an “isolated incident” or simply saying, “Well, that's part of the job.”

Most of the people minimizing these events usually were not involved with them. In some cases, they may never have worked inside a prison. In addition, many times it comes from a supervisor who has become out of touch with what really goes on within the front lines of the DOC.

To myself and many other corrections officers that have witnessed and been involved in such traumatic happenings, it may not be such a small experience. In fact, it may be an experience that you might live with for a very long time or for the rest of your life.

Although the DOC offers training on stress management, it is not enough. A typical class reviews the bodily processes of stress and some tips on how to relax, along with tips on nutrition and exercise. That's great and should continue, but it can become just a block to be checked off and considered done.

The education effort must be more than a box checked. It should be more intimate and integrated into correctional officer training throughout the organization. Policies should be in place that provide ongoing care and evaluation that will help officers disclose at their own pace, and learn skills to increase their awareness of PTSD.

I know that just admitting to yourself and others that you have PTSD can cause a lot of anxiety, but it is actually the first step to create any type of healing.

I found that a good way to cope with PTSD is education, self-awareness, daily self-care, talking with peers for mutual support, and ultimately seeking professional help.

Instead of waiting until you are no longer in control, you should seek help at the onset of troubling thoughts and behaviors.

There should be a mental health-training program for corrections officers just like there is one for the inmate population. After all, how can we care for other people suffering if we don't care for ourselves first! Just like Corrections is changing for the inmate population, it needs to change for the staff that is taking care of those inmates.

The old saying used to be “Eight and the gate.” It does not work anymore. It taught you to deal with trauma by not dealing with it at all. It is time that we recognize the trauma and deal with it accordingly. I would like to make an example of myself to raise awareness of PTSD within the DOC. “I didn't feel in control, and I knew that that's not a good thing.” We keep our distressing memories and nightmares to ourselves, and then turn up to work the following day. There is no time to rest! No time to heal! Which creates the inability to let go of our trauma when we return to our families.

## Cries from the Trenches

The following are excerpts from emails that were sent to our website from across the nation. They give a chilling and alarming look into the world of corrections staff. And we are left with two questions: "What is being done for people like them all across the country?" and "How are safety and security of operations affected by such drastic declines of staff's health and functioning?"

I've been a correctional officer since 200\_. I'm having a hard time at my job. My performance is down. My attendance has gotten terrible. I'm starting to feel anxiety about going to or being at work. Someone suggested I may need to contact someone for help.

I need to get some information about getting help with correction fatigue and stress. I find myself getting quick to anger and it is causing problem in my home life. Thank you.

Do you help people from other states? I've been in corrections 13 years and recently I feel broken. I'm very down and withdrawn. I'm exhausted. I don't sleep and my mind races. I don't know what to do with myself anymore.

Hello! My dad has really bad PTSD from work. I have saved his life twice. I'm scared there won't be a next time. My family needs help! Please call my mom at \_\_\_\_\_. He recently got let go from the prison with no pay due to his illness. We need help, we want to fight for my dad. Thank you.

Do you offer any counseling for marriage and or family? We are in great need. My husband has been a CO for 23 years and I am his 3rd marriage. I read about correctional fatigue, and a lot of it makes sense.

I was the subject in an assault by an inmate on \_\_\_ at \_\_\_. I came back to work, in the same unit, and I'm filled with anger, anxiety and I'm having flashbacks of the incident. I haven't had a decent night's sleep. I'm usually calm, cool and collected, but this has changed me.

Who can I talk to about PTSD in corrections? I am retiring in 2020 or 2021. I've been divorced two times, and I'm going through another one now. I've been a CO since 199\_. I was planning to work in corrections for another 5 years. I don't know now.

I retired from \_\_\_ Department of Corrections last year. I'm struggling with PTSD. I'm dealing with Workers Comp for a claim. I've seen and experienced so much pain and suffering in \_\_\_ years with Corrections. I have a lot of resentment towards the job, and it has caused me problems with relationships and family. It also cost me a divorce. I have so much hate for people, and I want to just be by myself in my safe zone. Any information available to help? I went to a counselor for \_\_\_ months. I'm on medication for anxiety.

How do we fix this without having the staff attend class or without having the attention span to read the books? Our mid-line ranked staff is essentially broken.

### The Impact of Fear and Shame on Trauma and Suicide By Robert Michaels

Reprinted with permission from lawofficer.com.

"There comes a point when we need to stop just pulling people out of the river.  
We need to go upstream and find out why they're falling in."  
~ Desmond Tutu

Emotional wellness is the new buzz in many public safety circles. President Trump ordered the DOJ to work on Officer

suicide, and two working groups have been formed. In recent years a few organizations began numbering suicides in some public safety ranks such as police, fire, and corrections. The truth is, no one really knows the real number of suicides for any of these professions, but we do know that corrections suicides are double the suicide rate of police. Often accurate numbers are unavailable because of under or non-reporting by agencies. This is especially true for retired personnel because they can easily fall through the cracks.

The question that remains is, Why? What is behind public safety suicide? Several answers arise—legal or administrative issues, grief, domestic issues, illness, post-traumatic stress untreated—all leading to hopelessness and despair.

I have taken those calls from a first responder – or a first responder spouse – who is suicidal. Right then, wanting to die. Fortunately, they were all persuaded to choose life.

Recently I have been analyzing public safety suicides, in particular, first responder suicides. Are there any common traits? A more in-depth study of police suicide is being conducted by Dr. Olivia Johnson, an educator who served both in the military and law enforcement. Rather than just counting numbers, Dr. Johnson is digging deep to glean any information that will help form a solution. Her “1IsTooMany.net” provides a vehicle to capture reporting data as a starting point to the hard work of her 50+ point analysis and investigation. (<https://www.1istoomany.net/>)

Likewise, Jeff Dill, founder of the Firefighter Behavioral Health Alliance studies firefighter and rescue suicides. His data covers many specifics to help understand this crucial topic.

I am proud for Serve & Protect to be associated with both of these. I trust both of their methods and motives. My purpose here is not diving into the weeds, rather, taking a look at three basic issues I believe critical to understanding this crisis. First is fear, then shame, and the other, domestic issues.

Having served in both the military as a MP, and in law enforcement both in uniform and as a detective, I have reflected on the training process – designed to hone skills and create natural responses to threats and circumstances. Skills must be second nature.

**Fear**  
This is not fear of doing the job; rather it is fear of asking for help. The fear of stigma. Consider this. NYPD has had 12 suicides in 2019. Compare that to 3 line of duty deaths for the entire state. A headline in the New York Post on 9/10, was “NYPD will let cops seeking mental-health treatment keep their badges.” (<https://nypost.com/2019/09/10/nypd-will-let-cops-seeking-mental-health-treatment-keep-badges/>) The article stated, “The department said Tuesday it had revised its fitness-for-duty policy so officers can hold onto their shield — even if they are forced to turn over their firearms while they seek mental-health treatment . . . Officers have historically been hesitant to make their mental health struggles known in the department — out of fear it would affect their career.” (<https://nypost.com/2019/08/16/suicide-cops-sister-says-nypd-officers-stay-mum-on-mental-health-out-of-demotion-fears/>)

The abject fear of asking for help can be emotionally paralyzing. This development by NYPD is a long overdue step in addressing trauma and the perceived stigma in asking for help. If first responders work in a department where this fear exists, where such a policy is not the rule, they will NOT likely ask for help. Rather, too often, they self-medicate. They hide behind a mask. They fear being stripped of the job they love, of being shamed in front of peers and family. Yet fear and intimidation is a staple of training in military and public safety. I went through basic training in the Viet Nam era. Without hesitation, I can say the drill sergeants did not approach a recruit who screwed up and say, “Son, there is a better way to do that.” No, they humiliate the recruit and scream at them that their error will cost lives. Why? Because in combat, whether in our homeland as an officer or in country fighting a war, there are no second chances to get it right. Lives may well hang in the balance.

Yet that very training can instill in officers a reticence to ask for help. The fear of being shamed is strong, and can be emotionally debilitating. So asking for help is too often a non-starter because the fear of losing one’s badge takes priority over help.

## Shame

Dr. Brene' Brown says "We live in a world where most people still subscribe to the belief that shame is a good tool for keeping people in line. Not only is this wrong, but it's dangerous." Of course, this flies in the face of training for combat and survival. But she is right. Therein lies the challenge.

For Dr. Brown, a word too far removed from public safety may be a key – vulnerability. For those on the front line, that word conjures up weakness. Dr. Brown says, "Our willingness to own and engage with our vulnerability determines the depth of our courage and the clarity of our purpose; the level to which we protect ourselves from being vulnerable is a measure of our fear and disconnection."

Fear? Of what? Well, asking for help when raw emotions are eating away at our being, fear of someone shaming us for asking for help. Shame just like in training. The stigma.

I never experienced a drill Sergeant saying to a recruit privately: "Son, there is a better way to do that." No, the recruit is called out in the midst of his or her peers and ridiculed. The idea is that perhaps in that way they will learn quickly, to enhance their chance of survival.

It is my contention that the shame and intimidation experienced or witnessed in training carries over – and that fear of being shamed in front of peers because of emotional wounds evokes frightening memories.

"Fitting in and belonging are not the same thing. In fact, fitting in is one of the greatest barriers to belonging. Fitting in is about assessing a situation and becoming who you need to be in order to be accepted. Belonging, on the other hand, doesn't require us to change who we are; it requires us to be who we are."

Belonging. That is a driving force in both military and professions like police, firefighters, and corrections. Concealing emotional struggles behind a mask of strength is a defense mechanism to preserve the belonging.

Moreover – there is the fear of being shamed within their personal family. After all, these professions are made of heroes, tough guys and gals, not vulnerable crybabies. No one wants to seem weak to a spouse or their kids. Moreover, from the first day on the job, emotional experiences mount cumulatively.

Carnage, sights of the worst humans can do to themselves or others. I call what happens the forming of a "cast iron shield," our protection from what we see, emotional desensitization to protect us from the harsh reality of the body being someone's child.

That protection of emotional numbing, combined with a fear of shame, creates emotional isolation. It creates a barrier for real emotional connection within the family, with friends, and yes, with peers. Those in these professions do not talk to family about what they see or experience, wanting to protect them from the trauma and reality of the world.

Complicating this, departments rarely prepare spouses, partners, or family members for the real change that WILL happen in their loved one. Being uninformed, family members can easily interpret the refusal to share, to open up, as a personal matter. Why? Because no one told them it would happen.

In grad school I studied communications, and one aspect was "inoculation theory." It posited that when someone was to face a challenge or new experience, if educated on what they might experience, they will be better prepared when they encounter the situation or information. The experience is approached with an informed view.

## Domestic Dysfunction

The same can happen in a marriage. If the spouse does not understand why the public safety professional does not share their experiences of the day when they come home and is not talkative – or is abrupt, it can be taken personally. Because they did not know this can be normal, assumptions can be made. Part of the job or inadequate preparation for

families? Both. Families must be given insight.

Conversely, the informed family gives that officer or firefighter space and understands a time of decompression may be needed. The informed family provides a place of understanding, of emotional support. The fear of shame may well subside.

The divorce rates among police, fire, and corrections professionals are far beyond the average citizen. Some reports say 75% of police officers are divorced at least once – and firefighters as high as 87%. Corrections is reported to be 20% above the national average, putting them in the same range.

It is my contention that a dysfunctional relationship can contribute to and perhaps exacerbate trauma and suicidal ideation among anyone, but is especially dangerous for public safety professionals. This is the motivation behind launching the Serve & Protect Spouse Advocate helpline, staffed by first responder spouses, and our “Home Is Where Healing Begins” focus.

The stress and trauma of the job can be overwhelming. We know that. But my concern is when the first responder leaves for work to face the trauma of the job after just leaving turmoil in the home, bad things can happen. It is like the surface tension in a glass of water – where just one more drop caused the liquid to flow over the edge. An argument with a spouse or child can set the stage whereby the first responder is already stressed when they arrive for shift.

Moreover, stress in the home can lead to the first responder looking for ways to avoid returning home to more conflict. Too often this can lead to seeking affirmation elsewhere or seeking means of numbing emotions. Neither are healthy responses.

Part of the problem is that far too few departments have training for spouses when the first responder starts their career.

So What?

First, public safety departments and their administrators need to follow the lead of NYPD. Understand that seeking psychological help should not cost a career. Serve & Protect gets calls for help from first responders in departments who might terminate them for asking for help. So the caller wants to forego using insurance, rather, paying cash. Having to get help on the QT adds to the feeling of shame and can impede progress in healing.

Allow the mental health process to play out. Let the first responder get real help and heal. It is far better to have a healed employee than one hiding their emotional wounds. Departments who encourage healing are far more equipped to care for the emotional wellness of their staff than those who cause fear and stress.

Moreover, properly educated in emotional wellness, departments can reduce the impact of shame and fear. Regular emotional wellness checkups should be no more shameful than a physical checkup. The Rudermann Report stated that less than 5% of departments have suicide prevention education. That is shameful and unacceptable.

Education is the key – from the top down and bottom up. Teach officers about post-traumatic stress and the potential that unresolved trauma can lead to suicide. Make every effort to remove stigma from asking for help.

Lastly, departments must educate families. Teach spouses about the challenges of the job, teach couples better ways to express their needs and ways to communicate when it has been a bad day. One therapist married to an officer went on a ride-along. After shift, she was stunned at all that went on that night. It was an eye opener.

Teach families emotional wellness strategies and equip them with tools for survival. Help them develop realistic expectations and embrace emotional wellness as a couple, a family.

This is especially true for those retired. Who are they? If their identity is their job, considerable depression may ensue

after retirement. Tracking retired suicides is difficult at best.

Emotional wellness is more than a program, it is a way of life. It is more than the new buzz word. It is as vital to public safety as their vest. We must provide emotional tools for survival with no fear of shame. Emotional armor. We must prepare and preserve public safety families. Lives depend on it. Families deserve it.

Robert Michaels is the founder and CEO of Serve & Protect (<https://serveprotect.org/>)(Crisis Line 615-373-8000), a unique non-profit facilitating broad-based trauma services and conducting seminars for public safety and their families on the topic of trauma and suicide. Since 2011 Serve & Protect has placed almost 6,000 public safety professionals in trauma treatment. Michaels served as a MP with the Virginia National Guard and as a Detective with Norfolk VA Police. He is a graduate of Columbia International University '81 and Wheaton College Graduate School '84. He is State Chaplain for the Tennessee Fraternal Order of Police, for the FBI Memphis Division, and for Brentwood Fire Department. Robert is the 2017 recipient of the FBI Director's Community Leadership Award for the Memphis Division, and a member of the American Academy of Experts in Traumatic Stress and ILEETA.

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"In my 17 years in corrections never has something impacted me the way this training has. I feel cleansed from the madness corrections brings into our lives. From this day forward I will make changes within myself and make a difference in someone else's life. Thank you!" J.V., CO

"I truly believe that if I would have had this course 10 years ago it would have saved my marriage, resulting in my children living happier lives with less issues. This training is amazing and will save lives, rekindle relationships and build families." T.G., Lt.

Change  
By CO Ron Mason

I am an aging relic from the last century. I came up surrounded by cops that were taught by the guards that came up in the 70's and 80's. The war years. Warehouse them and forget them. They were from the era of indeterminate sentencing. If an inmate wanted out from a world they saw no way out of, they relied on their gut reactions, without having a role model. Staff fell into a sense of "us versus them" and focused on how to survive the violence that surrounded them, be it inmate on inmate due to bad debts, or inmate perceived disrespect, or maintaining their criminal enterprise. We were taught to enforce all rules at all cost, and if not, chaos would ensue, and our management of the inmates would fail. We would be responsible for a failure of maintaining the Safety and Security of the prison we swore to protect.

I landed at a new prison that was being activated and it had a whole bunch of ideas about incarceration. I was torn apart by the old guards that I looked up to and our Department wanting to pivot away from just warehousing inmates.

I caught a lot of habits from the old guards and put them into my playbook, while I was also learning the new way. I wanted to be one of the cool kids for once, and I embraced the old guard way. Yeah, it worked for awhile, but I slowly

realized I was defeating myself in a job that could be so much easier if I was less confrontational. I have nothing to prove to the incarcerated or to other staff, and I can just listen for a minute and see if we can establish a civil dialogue. If I have to explain where I am coming from and why I have to do what I am doing, it costs me no currency, but I may reap rewards from the interaction, like reduced violence.

That idea works, really works, and it works equally with inmates, staff and family.

Each day may be hard to face, and we have our own life problems, and our partners also face their own.

Remember we are on the same side and all want to go home safe.

I offer these words that I speak to you as I have one foot out from this adventure, and you are halfway in your journey ahead of you. The lessons that I have learned have come the hard way due to my mule-headedness, and what I was taught by those that came before me and expected of me.

Change sucks, it really sucks. Take a deep breath, accept that change sucks, and look around you to find those that can help you learn about adapting to change.

Shedding the past and learning the new .... Well, it could make a difference that pays off in dividends you could never have imagined.

We must be mindful to listen to others as it may help us learn that we are not the only ones feeling what we feel. Our brothers and sisters struggle the same as we do in this path we walk.

I wish you safety in the journey ahead of you, and hope that you continue to learn from what is before you.

Remember we are on the same side, and we all want to go home safe.

Desert Waters Correctional Outreach, Inc., is a non-profit corporation which helps correctional agencies counter Corrections Fatigue in their staff by cultivating a healthier workplace climate and a more engaged workforce through targeted skill-based training and research.

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What Does Tomorrow Bring?

By Ron Mason

We ignore that we have endured a traumatic event, but once we walk out of the gate we begin to feel the aches and pain. We drive home and try to process the event. "What could I have done differently? Was I just really fighting for my

life? I survived. Now what? Will I have more nightmares? Do I go back there? Yes, I am strong. I will deal with it later. I hope I can sleep tonight. I am a correctional officer.”

#### Quote of the Month

“It’s habits that can imprison you, and it’s habits that can free you.” ~ Ann Voskamp

#### IN MEMORIAM

Correctional Sgt. Cesar Fuentes  
EOW 12 Jan 2020  
San Joaquin County Sheriff’s Office, CA

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#### DWCO Mission

To promote the occupational, personal and family well-being of the corrections workforce through the provision of evidence-informed resources, solutions, and support.

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