Psychological distress and work stress in correctional officers: a literature review

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> Abstract This article presents a review of literature based on a survey of national and international journals on psychological distress and stress in the work of correctional officers between 2000 and 2014. The databases used were the Biblioteca Virtual em Saúde, Web of Science, and Scopus, and the descriptors were psychological distress, stress and correctional officers. We analyzed 40 articles, mainly about stress. The concept of burnout appeared in several works. The United States is the country that most publishes on the subject. There is little interest about the subject in the journals of Public Health. In Latin America we found only four studies, all Brazilian. The number of publications has gradually intensified over the years, and there was methodological improvement in the development and assessment scales, mainly regarding stress and burnout. Work overload, lack of material and human resources, level of contact with the inmates, overcrowding, perceptions of fear or danger, and the paradox of punish / reeducate were some of the risk factors encountered, among others. The protective factors refer to social support within the prison environment, and the coping strategies are related to the improvement of officer training, stimulating social support, and offering psychological care.

> **Key words** Stress, Psychological distress, Burnout, Work conditions, Correctional officers

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Introduction

The aim of this article is to carry out an assessment of the production about psychological distress and stress in the work of correctional officers in national and international periodicals between the years 2000 and 2014. This is a complex theme that involves the relationship between work and mental health. According to Minayo et al.¹, "from the perspective of risks and safety, we understand that while the work process constitutes a privileged locus of human accomplishment, it also produces (in the particular range relevant to the conditions in which it is exercised) physical and mental strain".

Correctional officers have an important role in the functioning of prison institutions, working directly with the incarcerated population and being responsible for the custody of the convicted prisoner. This is a little studied professional group that works in total or closed institutions² that are difficult to access for investigations³. The complexity of their activities is manifested in the specificities of an institution of control and surveillance and in the stigma associated with its functions⁴.

They need to work in teams, demonstrate attention, self-control, a proactive attitude, initiative, and the capacity to negotiate adverse situations. These professionals maintain the environment of safety in the prisons and are frequently exposed to various situations that produce tension, such as threats and aggression. They work under constant pressure, subject to the risk of death⁵, and with little visibility and social recognition⁶.

The posture "always alert and constantly expecting" generates anxiety⁷, and this "necessary sensorial diligence"³ leads to great psychological distress. Studies^{5,8,9} have described how the stressful and dangerous nature of working inside a prison environment can have repercussions in the health of these professionals, in the form of physical diseases, stress, burnout, family problems, or incapacity to carry out their duties, in addition to compromising institutional safety.

For decades, the negative effects of the Taylorist/Fordist organization of labor have been discussed, emphasizing: the fragmentation of labor that separates conception and execution, associated with managerial control of the labor process, and the rigid hierarchy that leads to the demotivation and alienation of workers, as well as an imbalance in their work load¹⁰. In common with the Taylorist method of production management, the thinking and planning work of the penitentiary institution is restricted to a small

group, expecting the majority to execute the delegated activities, with a clear division between those who plan and those who execute.

Stress has been defined by Selye¹¹ as a non-specific organic response to situations that are stressful to the organism. Its presence in a moderated form signifies a normal adaptation to day-to-day demands. When it is excessive, it is a manifestation of psychological distress with physical and emotional reactions, and the symptoms vary depending on the phase in which it is found¹². In her research, Lipp¹³ reports physical symptoms that occur with great frequency: an increase in sweating, muscular tension, tachycardia, hypertension, tightening of the jaw, grinding of teeth, hyperactivity, nausea, and cold feet and hands. In psychological terms, symptoms such as anxiety, tension, anguish, insomnia, alienation, interpersonal difficulties, self-doubt, excessive worrying, inability to concentrate on other topics not related to suffering, difficulty relaxing, anger, and emotional hypersensitivity occur. In the event that the stress is not reduced, via the removal of factors that generate it or through the use of coping strategies, it can reach its final stage, when serious illnesses can occur in the most vulnerable organs, such as heart attack, ulcers, or psoriasis. Depression is also part of this framework of symptoms¹⁴.

Psychological stress caused by the pressure and bustle of work life is a topic that is being researched heavily. According to the World Health Organization¹⁵, more than half of workers in general in countries considered industrialized judge their work to be "mentally taxing." Some factors have adverse psychological effects, such as work that is isolated, monotonous, that requires constant concentration, shift work, and work under threat of violence, as for example in the prison system. Psychological stress and overload have been associated with sleep disturbances, symptoms of burnout, and depression. There is also evidence of elevated risk of cardiovascular diseases, particularly coronary diseases and hypertension. For Paschoal and Tamayo¹⁶, the highlighting of the construct of occupational stress in recent years represents a more comprehensive focus that emphasizes both the organizational stress factors as well as their physiological, psychological, and behavioral responses. Such an approach accentuates the relational character of the concept that attributes importance to individual perceptions as mediators of the stress impact of the work environment.

According to Harvey¹⁷, studies that have doc-

umented the emotional reactions of the prison teams related to their work have used different terms to refer to the psychological difficulties confronted by these workers, such as work stress, stress, burnout, tedium, psychological distress, and trauma.

Psychological distress is an emotional difficulty associated with psychological and physical symptoms, and is considered a common mental disorder characterized by non-psychotic symptoms such as insomnia, fatigue, irritability, forgetfulness, difficulty concentrating, and somatic complaints like headaches, stomach pains, coughs, or weakness. These complaints are manifestations or responses to a type of psychological suffering and are not necessarily associated with the existence of a diagnosable organic pathology.

In the bibliographical research on psychological distress and stress, the concept of burnout appears in a variety of works, and will be analyzed with an emphasis on how it relates to stress, for its relevance to understanding the subject. Burnout is described as a tridimensional syndrome composed of emotional exhaustion, depersonalization, and the sensation of a lack of personal fulfillment, and is the result of a chronic process of stress20. It was initially identified among workers who deal with sick or hospitalized persons, however it is not a psychopathology of work, but of relation to others. In other words, burnout seems to emerge when people share stressful, chronic, or violent relationships with others, which is what occurs in the professional practice of the penitentiary agent.

The "psychodynamics of work" of Dejours²¹ concentrate on the health/illness dynamic and defines "suffering at work" as the field that separates illness from health. This theoretical perspective concentrates on the impact of the organization of work on the psychological functioning of the worker: "when all the possibilities of adaptation between the organization of work and the desire of individuals are blocked, suffering then emerges." Psychological distress at work arises as a strategy for not falling ill: a space of struggle against madness, and it is in this dynamic process between health and illness that workers create individual and collective defensive strategies to protect themselves²¹.

In order to learn about the existence of psychological distress and professional stress among correctional officers, a bibliographic survey on the theme was carried out, whose methodology and results will be presented below.

Material and method

The bibliographic research on which this study is based included articles from the databases: Virtual Health Library (BVS), Web of Science, and Scopus. The program Zotero was used to generate the references.

In the BVS, choosing the search fields of title, abstract, and subject, the following descriptors (including their feminine and plural forms) were used: inspetor (inspector), agente or guarda penitenciário (correctional officer or prison guard), prisional or prisão (prison or belonging to a prison). "Psychological stress," "mental suffering," "mental health," "psychological distress," or "occupational stress" were also used. In the Web of Science and Scopus databases (search fields: title, abstract, and keyword), the equivalent descriptors in English were used: "prison agent," "Prison worker," "prison staff," "correctional staff," "correctional staff," or "correctional officers," as well as "working conditions," "occupational health," "occupational safety," "stress," "mental health," or "psychological stress."

Initially, the research was open: the studies could be from any source, language, and year of publication, and the findings obtained 525 publications. After a reading of all the titles and abstracts, the following studies were excluded: those that were about prisoner health, other professionals that work in prisons who are not inspectors, disorders related to substance abuse, juvenile delinquency, and forensic psychiatry. 202 articles remained, from which were excluded repeated works (n = 51); works published in languages other than Portuguese, English, French, or Spanish; and those prior to the year 2000 (n = 31), since research on this theme significantly increased beginning in this period²².

Among the 40 articles selected, five were not freely available in their entirety on the specified sites, and for this reason were analyzed using their abstracts²³⁻²⁷. All of the remaining 35 articles were read and analyzed in their entirety. The collected material was classified with the aim of showing the following: the state of knowledge in relation to the topic, the risk factors and protection discussed, the coping strategies proposed for the potential harm to the mental health of workers, and, finally, the gaps in the knowledge and the aspects that can be further explored in future research.

Findings

General characteristics of the articles

The review of the literature shows that, internationally, studies with a focus on the mental health of these professionals have been attracting much academic interest, principally in the United States and in the journals on criminal justice in that country. In Brazil, there are currently few studies on the theme, which are concentrated in journals of psychology.

More than half of the texts (n = 21) are of North American origin: 16 from the United States and five from Canada. Europe is also interested in the theme (n = 11), with three articles exploring the French situation, three about Spain, and the remaining articles about the context in Italy, the United Kingdom, Portugal, Poland, and the Netherlands. The academic production in Latin America is limited to Brazil, with four Brazilian articles^{19,28-30}: two from research on the São Paulo Penitentiary System, one from Rio Grande do Sul, and one from Bahia/Salvador. Two further works were found that had been conducted in Australia, one in Turkey, and another in South Africa.

The academic productions gradually intensified over the years: eight between 2000 and 2004, 15 between 2005 and 2009, and 17 between 2010 and 2014. Monitoring the whole process, the relevance of journals on Criminal Justice is noted: five of them presented 11 articles. The field of Psychology/Psychiatry has academic production beginning in 2005: nine journals published 11 articles. Some journals on the specific theme of prisons have published various studies: Prison Journal (n = 05) and Journal of Correctional Health Care (n = 01). Journals on Public Health presented only four works, and journals on Occupational Health published three articles. Periodicals about human behavior presented two articles, and journals about work and ergology presented two more productions. A specific journal about stress (Stress and Health) presented one work.

The majority of articles touch on the theme of stress (n = 22), followed by burnout (n = 12), and psychological distress (n = 08). Among the 40 publications, we have 34 research reports, the majority of which have a quantitative approach (n = 25), utilizing scales of stress and burnout, among others. Two studies 31,32 combined quantitative instruments (questionnaires based on psychometric scales) and qualitative instruments (semi-structured interviews and space on the

questionnaires freed up for written expression). Only three Brazilian studies²⁸⁻³⁰ exclusively used the qualitative method in their research, by way of semi-structured interviews.

Four articles are literature reviews, and two were dedicated to the evaluation of the psychometric properties of the scales on stress: the Scale of Work Stress for Correctional officers -WSSCO³³ and the Scale of Occupational Stress - JDCS³⁴. Among the systematic literature reviews, in the Netherlands in 2000, Schaufeli and Peeters³⁵ analyzed the production on occupational stress and burnout in correctional institutions. Subsequently two more reviews were carried out in Canada: in 2004, Dowden and Telier³⁶ analyzed the predictive factors for work stress in correctional officers and developed a meta-analysis about the theme. Recently, in 2013, Finney et al.³⁷ reviewed the literature on stress and burnout in these professionals, identifying the areas in which interventions might apply to reduce the problems. Another review³⁸ investigated the stress of shift changes among correctional officers.

The trend of the utilization of scales among studies that touch upon stress is noteworthy (Chart 1). Some of the scales specifically measure the stress of work, and other more general scales measure the stress of life. Three different instruments assess psychological distress in the evaluated texts.

Additional measures not presented in Chart 1 emerged in the bibliographic survey, and were used in the following ways: (a) to evaluate physiological stress, via the measurement of cortisol, cholesterol, triglycerides, and heart rate and blood pressure, among others³⁹; (b) to measure burnout, according to the Maslach Burnout Inventory⁴⁰, the only instrument used for this purpose.

Among the twelve articles that touched on the theme of burnout 20,23,25,35,37,41-47, nine used the Maslach Burnout Inventory Survey35, which encompasses three scales: (a) emotional exhaustion, which measures the feelings of being overwhelmed and exhausted by work; (b) depersonalization, which measures insensitive and impersonal responses in relation to the people with whom one works; (c) personal fulfillment, which evaluates feelings of competence and successful completion in an activity. The other three articles pertain to reviews of this literature.

The last general aspect noted relates to differentiation by gender. Seven articles touch on this theme^{22,30,41-43,48,49}, in different ways according to the focus of the text: (a) the predominantly mas-

Chart 1. Instruments to assess stress and psychological distress in correctional officers.

Articles	Instruments utilized	Theme of the instrument
Atkin-lunk; Armstrong, 2013 ⁵⁰	Items previously used in the study of Armstrong and Griffin (2004)	Work stress
Hartley et al., 2013 ⁵¹	Items adapted from the study of Cullen et al. (1985) and Lindquist and Whitehead (1986)	Work stress
Misis et al., 2013 ⁵² ; Cheeseman; Downey, 2012 ⁴⁹ ; Dial et al., 2010 ²²	Items adapted from the study of Cullen et al. (1985)	Work stress
Moon; Maxwell, 2004 ⁸	Items adapted from the study of Cullen et al. (1985)	Work stress
Griffin, 2006 ⁴⁸	Items previously used by Crank, Regoli, Hewitt, and Culbertson (1995)	Work stress
Brough; Williams, 2007 ³⁴	Job Content Questionnaire (KARASEK, 1985) Demand-control-support model	Work stress
Bourbonnais et al., 2005 ⁵³	Job Content Questionnaire (KARASEK, 1985) Demand-control-support model	Work stress
Bourbonnais et al., 2007 ⁵⁴	Job Content Questionnaire (KARASEK, 1985) Demand-control-support model	Work stress
Botha; Pienaar, 2006 ⁵⁵	The Correctional Officer Stress Inventory. (COSI) (BOTHA; PIENAAR, 2006)	Stress in correctional officers' work
Şenol-Durak; Durak, 2006³³	The Workstress scale for correctional officers (WSSCO) (ŞENOL-DURAK; DURAK, 2006)	Stress in correctional officers' work
Fernandes et al., 2002 ¹⁹	Inventory of Stress Symptoms of Lipp (ISSL) (LIPP; GUEVARA, 1994)	Life stress
Owen, 2006 ³²	The Perceived Stress Scale (PSS) (COHEN; KAMARCK; MERMELSTEIN, 1983)	Life stress
Gonçalo et al., 2010 ⁴⁴	Global Stress Level (NGS) (KYRIACOU; SUTCLIFFE, 1978)	Life stress
McCraty et al., 2009 ³⁹	Jenkins Activity Survey Brief Symptom Inventory (JAS; The Highlands, ChapelHill, NC)	Life stress
	The Brief Symptom Inventory (BSI; National Computer Systems, Minneapolis, MN) Personal and Organizational Quality	Life stress
	Assessment (POQA; Institute of HeartMath, Boulder Creek, CA)	Life stress
Harvey, 2014 ¹⁷	The General Health Questionnaire (GHQ-12) (Goldberg & Williams, 1988)	Psychological distress
Bourbonnais et al., 2005 ⁵³ ; Bourbonnais et al., 2007 ⁵⁴	Psychiatric Symptom Index, (PSI) (Ilfeld, 1976)	Psychological distress
Fernandes et al., 2002 ¹⁹	Self Report Questionnaire - SRQ (Harding et al., 1980)	Psychological distress

culine prison environment causes women to face specific challenges in their work in these institutions; (b) men and women have different styles of interacting with and relating to the prisoners, for example women are less likely than men to respond to inmates in an impersonal way or with lack of attention or interest; (c) characteristics socially accepted as feminine (compassion, family orientation) may be devalued in the prison environment where notions of "strength" and physical force are greatly respected; (d) the differences between the genders can cause women to feel pressured to agree with the way the job is performed by their male colleagues.

For Cheeseman et al.⁴⁹ and Dial et al.²², gender is a more significant factor for work stress than any other demographic variable, even while Griffin's research⁴⁸ found few differences between both sexes. Carlson et al.⁴³ tested the relationship between gender and burnout in a maximum security prison in the United States. In contrast to previous studies, female correctional officers demonstrated a greater sensation of personal fulfillment and satisfaction related to work than their male colleagues. They were also more likely to use coping techniques to deal with stressful situations⁴⁶.

The Brazilian scientific productions

The four Brazilian articles found were included in health publications: *Psicologia Ciência e Profissão* (n = 2), and *Estudos Psicológicos*, and *Cadernos de Saúde Pública*. Three of these used the theoretical approach of Dejours'²¹ psychodynamics of work, and a qualitative methodology. The other publication used two scales to measure stress and psychological distress.

Two works on the psychological distress of correctional officers^{28,29} originated from research carried out in a closed-regime prison facility in São Paulo. The first uses interviews to identify different anxiogenic situations²¹, such as: constant risk of exposure to physical violence; fear regarding the safety of their families; exposure to illnesses such as tuberculosis, hepatitis C, and HIV; perception of the degeneration of their mental health; monotonous work; and others. Based on these discoveries, a mental health service was proposed and organized in the researched facility, offering the professionals individual meetings with supervised trainees in psychology during work hours.

The second article²⁹, which also had a qualitative approach, originated in the previous research

and had as its subject the professional experiences and psychological distress reported during the sessions. The findings demonstrated that various manifestations of violence created conditions for psychological distress to emerge among the workers. The presence of psychosomatic symptoms, sleep disturbances, and an impact on relationships outside of work were also found.

In Rio Grande do Sul, Tschiedel and Monteiro³⁰ researched female correctional officers using semi-structured interviews. The authors concluded that the experience of psychological distress is related to the context of the organization, conditions, and relations of work. They suffer because of the precarious material and human conditions of work, a lack of institutional recognition, and the practice of the "strip search," a moment in which the visitor is searched and required to be naked and squatting in front of the correctional officer. The officers also report pleasurable experiences related to their salary, their "flexible" work schedules (shifts), and job stability. The defensive strategies presented were denial and rationalization.

The fourth Brazilian article¹⁹ originated in an epidemiological study on psychological distress and stress among correctional officers in Salvador, Bahia. Two scales were utilized: the Self-Reported Questionnaire - SRW2018, which measures psychological distress or minor mental disorders, and the Inventory of Stress Symptoms for Adults (ISSL)¹³, which evaluates the existence of symptoms, type of predominant stress (physical or psychological), and the phase in which the subject is found (alert, resistant, nearly exhausted, and exhausted). Among the results, complaints of falling ill were presented by 91.6% of the workers; persistent stress manifested in 15.1% of those interviewed; and the prevalence of minor psychological disorders was found in 30.7% in the correctional officers, a higher rate than that found in teachers, metalworkers, IT workers, and hospital workers.

Perspectives on psychological distress and its risk factors

Psychological distress at work was a theme touched on in eight articles^{17,19,26,28-30,50,51}, among them four Brazilian works that analyze different anxiogenic situations linked to the precariousness of correctional officers' work conditions: the sense of meaningless of work, a sensation of being enclosed and restricted in some functions,

and pejorative social representation of their activity^{29,30}. Among other risk factors for suffering at work, the everyday exposure to physical violence, fear regarding the safety of one's family, and fear of exposure to illnesses like tuberculosis, hepatitis C, and HIV are noted²⁸.

Fernandes et al.19 verified minor (non-psychotic) psychological disorders among these workers and noted that they face a psychologically inadequate environment, insufficient infrastructure, long workdays, lack of time for leisure, and inadequate work organization. In France²⁶ and in Canada³⁶, the "paradoxical missions," "dual task," or "conflict of roles" of correctional officers were cited as causes of suffering, or in other words the work of custody and surveillance concomitant with that of resocialization or rehabilitation. Other research in Canada⁵¹ noted that these professionals are more exposed to adverse psychosocial factors at work, and report more health problems (such as psychological distress, regular or poor health, and use of social or health services) than is found in a comparable sample of other workers. The factors associated with the increase in psychological distress were the low level of social support at work and conflicts with colleagues and superiors, among others.

Perspectives on stress and its risk factors

The majority of articles encountered are about the theme of stress. Stress and burnout are two related but distinct constructs. Stress under normal conditions can be an adaptive response to difficult situations, while burnout is a behavioral response to stress that is debilitating, costly, and problematic⁴³.

The work of Finney et al.³⁷ determined that stress at work and burnout affect between 19-30% of workers in general. Both derive from a combination of individual risk factors and organizational stressors, and their effects are more pronounced in correctional officers than in the general population^{20,37}, due to the tense, high-risk environment and the job's demands⁵²⁻⁵⁴, which can lead them to be more susceptible to physical health problems^{8,17}. Stress and burnout experienced by correctional officers can leave the work environment even more insecure, lead to high rates of turnover among workers, high absenteeism, and low productivity³⁵.

Literature reviews³⁵⁻³⁷ indicate the factors that most contribute to stress in prison work: relationship problems (with colleagues, supervi-

sors, or prisoners); overburdened workload; low social status of the profession; and lack of social support. "Conflicting roles" and few opportunities for promotion were also cited, which when interacting with individual factors like personality and family conflicts can cause mental and physical health problems. A conflict of roles is defined as any situation of conflicting demands at work, such as ambiguity of roles. According to Misis et al.53, there are correctional officers in charge of custody who openly defend strategies of punishment for dealing with prisoners, and who do not support rehabilitation as a correctional philosophy. On the other hand, there are professionals who believe in rehabilitation as the primary correction goal and, as such, direct their work towards counseling. The findings indicate that officers who view their work as more oriented towards the treatment of the prisoner have more elevated stress levels. In the United States, correctional officers who have the most negative perceptions of the personal characteristics of the prisoners (as hostile, anti-social, or cold) present more elevated stress levels, which coincides with the investigation about conflict of roles: when there is more conflict, there is more stress.

Some divergence in the research in relation to the impact of individual characteristics (gender, ethnicity, age, educational level, experiences in the prison) on the level of work-related stress can be perceived. In some of the texts, significant statistical relationships were not found^{22,32}, or they had little explanatory power regarding their impact on occupational stress, indicating that other more latent or less explicit characteristics may have greater impact on work effort, such as satisfaction at work or the characteristics of their own activity (type of prison, for example)⁴⁷. The variable "satisfaction at work" is intimately linked to stress^{49,54}, being a stronger predictor than any other variable.

The risk factors for stress indicated in the research are various. Generally, they are principally related to work overload: lack of material and human resources^{14,24}; perception of work as dangerous^{31,53,55}; fear of contracting illnesses like HIV/AIDS, hepatitis, and tuberculosis⁵⁵; degree of contact with prisoners^{56,57} and conflict of roles^{8,53}. Rejection by society or the perception of a negative public image was also cited as a risk factor for stress^{8,56}, as well as the overcrowding of the prisons³¹, concluding that the officers in the most crowded prisons have more fear of the inmates and are more stressed.

Emphasizing the theme of burnout, a study in Spain⁴⁷ shows that 43.6% of the officers suffer

from severe burnout, and that the younger officers present more negative attitudes in relation to their jobs (depersonalization) than older ones. For Morgan et al.⁴¹, the less experienced officers also demonstrated an increase in the levels of depersonalization and emotional exhaustion, and a decrease in the levels of personal fulfillment. For their part, the oldest and most trained officers related higher levels of personal fulfillment.

Factors that can protect against stress and psychological distress

The social support received inside the prison (from colleagues and supervisors) mitigates the effects of work tension on health. It is a relevant and protective factor, as shown in the studies on stress (including burnout) and psychological distress. Good quality leadership⁵² is analyzed as a protective factor against work stress, just as low quality leadership is related in a significant way with it³⁷. Officers who perceive support from their supervisors or bosses relate less stress and much higher satisfaction levels^{53,55}. The support of colleagues is also valued as an effective factor against this health problem⁵³.

In Owen's research³² in the United States, three variables were shown to be protective factors in relation to stress: high levels of job satisfaction and social support, as well as the perception of being in control of situations related to their profession.

Coping strategies for stress and psychological distress

Based on the findings of research on distress at work for correctional officers, some studies propose coping strategies, with an emphasis on those related to professional training, social support, and the offering of safe spaces for reflection, reorganization, and emotional reorientation.

During their training, these professionals traditionally learn that the offenders are "the enemy," and that their job is to guarantee that they remain under the control of the penitentiary⁵⁵. Authors suggest a different approach during training that allows for greater reflection on the life conditions of prisoners. Along these lines, Moon and Maxwell⁸ point to the need to reexamine the way that the officers interact with the prisoners, and the procedures used in their correction and treatment. Hartley et al.⁵⁵ suggest including updated and in-depth information on infectious diseas-

es in the officers' training, with the goal of preventing contamination and stress. Gould et al.⁴⁶ propose yearly training with a specific focus on the symptoms of stress and burnout, along with instruction in the use of effective techniques for coping with and managing them.

It is vital to maintain a focus on the quality of support from the boss or from supervisors⁵¹, and to consider the use of a more participatory and flexible style of leadership and management⁵², so that the individual needs and values of the correctional officers may be considered. The social support of peers may be useful in preventing and coping with burnout41,46: Gould et al.46 suggest the organization of discussion groups among the officers, with an emphasis on sharing their grievances in relation to work. Intervention strategies to reduce the risk of stress and burnout should be to improve the organizational structure and the ambient of the prison institution³⁷. Another suggestion would be to increase the number of collaborative meetings between the managements and prison officials in order to improve communication between them^{15,36}.

In the United States, a new program for reducing stress and health risks among correctional officers was explored, based on emotional self-regulation, which incorporates a series of techniques of restructuring and reorientation³⁹. There was marked improvement of the experimental group in terms of cholesterol level, glycaemia, heart rate, blood pressure, and in relation to positive outlooks. There were also improvements in the reduction of general psychological distress, and significant increases in productivity, motivation, clarity about goals, and perceived support. In three Brazilian works²⁸⁻³⁰, the formation of a "psychological assistance service" was proposed with the goal of caring for the psychological distress of the officers, along with public policies of occupational appreciation and qualification.

Dysfunctional strategies such as denial and substance abuse must be discouraged, as they elevate the levels of burnout in their three dimensions⁴⁶.

Discussion

Psychological distress, stress, and burnout are interrelated constructs, and although not identical, their triggering factors are very similar. They can be considered theories born in the context of the explosion of production and consumption under capitalism, and which relate to the development

of negative feelings in connection to the activity of work⁵⁸.

Beginning with these three major themes, other subjects are highlighted in the approach to the problem, such as concepts of work satisfaction, social support, psychosocial risks, organizational commitment, psychological well-being, and violence. The themes are also broadened in light of the risk and protection factors revealed in the research, such as: overwork, lack of material and human resources, degree of contact and perceptions about the prisoners, overcrowding, perceptions of fear or danger, the paradox of punishment/reeducation, and the stress of shift changes, among others.

The diversification of the thematic areas of the periodicals that touch on the theme is a positive factor, as it increases the possibility of obtaining new knowledge and generating constructive findings. However, it can be noted that the field of public health has not been putting emphasis on discussions about psychological distress in this occupational category, and that the academic production has come to be concentrated in journals devoted to studies on mental health and in the area of criminology²².

Some characteristics related to work and the health of correctional officers have been shown to be general, such as the violence in the prison environments discussed in various articles, and also found by Santos⁵⁹ who shows the imminent risks of violent attacks between the incarcerated and officers in the phenomenon of overcrowding. There is also a general need for control with the aim of maintaining security, which is a major preoccupation of the officers, even in detriment to their own health60. The malaise of privation of freedom is another peculiarity faced by these workers, which for Moraes3 is a malaise in the air," referring to the negative or oppressive energy that circulates in a correctional facility. These characteristics flatten out the professional experience of these subjects who are presented in the studies as having relatively little physical health and possessing psychological problems associated with physical problems17.

Specific questions related to the reality of each territory are evident. In the United States, the country that incarcerates more people than anywhere in the world, there were 2,228,000 prisoners in 2012⁶¹. It also has the most academic production about the mental health of prison workers, albeit from a predominantly criminological approach and not from one based around health

(only one psychological publication touches on it), which indicates an interest more oriented toward the prison industry than toward the health of the professionals who work there. As shown in the work of Dial et al.²², the themes dealt with are concerned with managerial and administrative preoccupations, with a focus on the importance of internal social support (supervision/leadership), training, problems caused by overcrowding, and how to increase motivation and productivity.

While research on burnout has a long tradition in North America and Europe⁶², this bibliographic survey shows that, as it involves prison professionals, the theme is more investigated in Europe and indicates higher rates of incidence.

In spite of there being only four, the Brazilian articles comprise 10% of the total academic production, and are the only ones in Latin America. The framework derived from Dejours combined with the qualitative method demonstrates a broad and complex vision of the problem with a focus on the well-being of the worker.

In terms of the quantitative methodology, which is the most used in the analyzed articles, we note the development of two new instruments for verification of stress in correctional officers^{33,63} and the adaptation of others previously utilized (Chart 1).

In spite of increasing numbers of female officers, they work in an environment designed for the custody and work of men. They work as much in male facilities as in female ones, although their functions differ in each of them, as well as the type of suffering and stress experienced. In this sense, female officers adapt to the environment much more than the environment adapts to them⁴¹.

The coping strategies suggested in the articles encountered (training, social support, and psychological care) are also found in other works3,64,65. They are considered important and viable, however they rely more on the initiative of the workers themselves to be qualified, give support to their peers, and "treat" themselves, rather than place responsibility with the companies or governments for their negligence in the working conditions offered and their impact on the health of correctional officers. In the view of Constantino et al.66, if the studies identified how stress factors are related both to individual issues as well as organizational aspects of work, they would be more efficient at preventing and minimizing the effects of this problem, involving strategies at both of these levels.

Final considerations

This literature review has demonstrated the gradual increase in scientific production about stress and psychological distress in the correctional officer, an invisible and devalued worker, but one who is indispensable to the social structure. The investigations are few in comparison to the constant increase in the number of prison units in all countries.

When correctional officers do not have the necessary resources to carry out their work in an optimized way (for example, lack of personnel, lack of or inadequate equipment), nearly half experience high levels of stress²⁷. During the last three decades, much research has examined the factors that contribute to work stress, perceiving the importance of critically analyzing organizational stressors, with the goal of contributing to the creation of healthier environments and workers²⁰. Individual characteristics may moderate the effects of work stress, but nonetheless they are seldom useful against persisting or overwhelming organizational stressors³⁷.

It is important to invest not only at the individual level, but also in the context of the organizational framework, using a psychosocial perspective to understand the difficulties and to propose strategies for change that aim to improve work conditions. It is worth emphasizing that, in the world of the prison, the vision of the correctional officer regarding the dynamics of the prison environment is only one of the possible perceptions among the different actors involved in everyday life of the prison. Other perspectives may be considered in the elaboration of projects, programs, or public policies.

A subject as complex as mental health, researched in a violent and insalubrious environment where professionals are exposed daily to the suffering stemming from the deprivation of freedom, with a dangerous job and few symbolic rewards, should also be investigated in a more complex way. Research that uses qualitative approaches in order to better understand their subject is very rare, especially in terms of the analysis of the multiple interlocking relationships in a prison facility. As was shown earlier, the most emphasized protective factor against suffering at work in the analyzed research was "social support," which entails an analysis of these relationships. Listening to these workers, both men and women, may give more meaning to the findings encountered.

It is important to note that the preventative care and attention to mental health of correctional officers benefit not only the prison professionals, but also their families, the prisoners, the families of the prisoner, and society as a whole.

Collaborations

CM Bezerra, SG Assis and P Constantino participated equally in the stages of the development of this article.

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