22. Staff health and well-being in prisons: leadership and training

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Key points

- A successful prison ensures safe custody and good order within an environment of respect and decency.
- Prison management has a key role to ensure that staff and prisoners alike feel safe and have opportunities to maintain and improve their health.
- Prisons have duties to care for both staff and prisoners and offer an opportunity to maintain and improve public health, encourage good health for the individual and offer a rewarding and fulfilling career for staff.
- Prisons can, by reputation and experience, be hazardous and stressful places for staff. It need not be this way. Leadership and staff training are fundamental to ensure that employees can work productively, act as role models for prisoners, be healthy and be confident of support in the event of illness or injury.
- Prisons should aim to be healthy workplaces. They should apply the same safe systems of work, good health and safety practices and systems of employee support as other front-line public services.
- All staff in prisons should recognize the importance of balancing the need for safe custody and control on the one hand, and care and rehabilitation on the other. The needs for custody and order should not infringe human rights.
- All prison staff should have basic training in the laws and duties of care for prisoners, the right to health and access to health care in prison as in the community, the ethical duties of staff and health professionals working in prisons, and the ability to deal with health emergencies and administer first aid.
- To provide a consistent level of service and understanding, it is proposed that all prison systems have a core curriculum for health for all staff working in prisons, with added elements to support further development and updates for managers and leaders.

Introduction

Successful prison systems ensure safe custody and good order for detainees, but also opportunities for rehabilitation and reintegration on release back into the community. Effective prisons provide health care to a standard equivalent to that available in the community, which can only be achieved when prison management and staff all understand and promote health and health care within a “healthy prisons” approach (1). Good health in prisons cannot flourish without an environment of safe custody and good order and without prisoners and staff feeling safe. Only then can all staff working together produce the kind of setting that protects and promotes health. In many countries, prison authorities have not appreciated their potential for benefit to the community, as leading employers of staff and rehabilitation settings for prisoners.

There is a significant opportunity for staff to create a healthy prison that benefits prisoners, staff and the wider community because “good prison health is essential to good public health” (2). Leadership is key to creating an ethos in prisons of upholding human rights and a full acceptance of the dignity, respect and self-efficacy of individuals. An effective, efficient and healthy prison requires adequate levels of staffing, with proper training, a mix of disciplines and specific expertise in key important areas. Policies and practices should be in place to prevent violence, threats and stress and to provide effective plans and interventions to cope when things go wrong.

This chapter describes the challenges for prisons as healthy settings for their staff, frameworks and examples for good practice, and the essential and core requirements for staff training and prison leadership in health.

Health and the prison

Prison is a place where detainees live and staff work. Often, each group perceives that they lead separate lives, but prisoners and staff have many aspects in common – often similar social backgrounds and, in small communities, possibly similar social networks. In prisons, staff and prisoners share the same space, air for breathing and water for washing or drinking, and face the same physical hazards of the prison environment. Above all, they have a common humanity.

The prison is a special setting – both an institution where people may live for long or short periods and a workplace. Prison staff have several roles, with a focus on control and security within a high-risk environment balanced with care for people with complex characteristics and problems.

The stressful workplace

Often, prison is a stressful and hazardous place to work, and the need for staff to be aware of and to maintain
their health is, therefore, strong. Prison systems can experience increasing absence rates due to stress, burn-out and alcohol and drug use, often connected with the conditions of work. The combination of poor health and prolonged absence from work often leads to early retirement or to retirement with physical and mental problems, at significant costs to individuals, their families and the prison system.

The growing scale of penal institutions worldwide, and rising expectations from and duties imposed on them, means that urgent attention should be given to the pressure on staff. Current problems that affect staff and prisoners alike include overcrowding, intercultural conflicts, violence and gang crime, language problems, drug use, ageing buildings in poor repair and, frequently, insufficient staff levels with poor training to support them.

The experience of working in prisons has not been widely studied but it is clear that, while there is a need for safe systems in all workplaces, there is a particular requirement for these in prisons. Studies have drawn attention to the paradox of high levels of discontent not due primarily to stress from working with prisoners, but to organizational conditions and relationships between authorities and staff.

**Risk factors and stress among prison employees**

Studies of the health of prison staff have outlined problems arising from stress, particularly reflecting on the interaction between work and distinct factors in the prison setting. Goffman (3) recognized that prison staff work in a closed and “total” system, with a high degree of professional isolation. Strict routines and regimes, hierarchy, depersonalized relationships and bureaucracy serve to remove some amount of control for staff over their work circumstances. Communication between authorities and staff in prisons and old methods of personnel management compound these problems. Staff members need support to define their roles and identities with respect to the prisoners and to work through the divide between the necessary activities of security and basic services and growing expectations for their involvement in the care and rehabilitation process.

Prison staff have to reconcile their roles between care and control, between being a guard and a helper. This challenge is greater in countries that lack respect and esteem for the contribution of prisons in society and where the media popularly focus on the withdrawal of liberty and punishment.

There should be wider moves to alter public attitudes towards prison. Management methods and structures in some prison systems need to be modernized to allow staff more control and influence over the circumstances of their work and to enable them to challenge and influence management. In turn, staff may respond better to the challenge of engaging with prisoners in moving towards rehabilitation, which should engender mutual respect and better relationships between prisoner and staff, and empower staff within the controlled environment. The net effect of these improvements would have a direct effect on staff health and well-being.

**Health risk factors for prison staff**

Prisons can be hazardous locations. Large and sometimes old buildings, they are crowded and can be inadequately staffed while holding the most dangerous individuals in the community who are capable of harm to others, including other prisoners and members of staff. The net effect of prisons that do not address these realities shows in stress that affects people mentally, physically and cognitively. Adverse events and long-term poor working environments can result in post-traumatic stress disorder and similar conditions. While absence levels, vacancy rates and staff turnover may rise or remain high, other matters (such as misuse of coffee, cigarettes and alcohol, poor eating habits and use of medication) are also indicators of a poorly functioning workplace.

Successful prison systems rely on managing these factors through modern and enlightened employment practices. Reward and recognition schemes, opportunities for career progression and occupational health services are necessary components in strategies to address stress and poor working conditions. Good employers ensure that a good team spirit and productive work is encouraged and recognized, and that there is peer support. Mentoring schemes are modern and cost-effective developments. Prisons need to go to extra lengths to be seen as healthy workplaces and to attract and retain a healthy and committed workforce.

The healthy workplace should be a realistic goal for all employers, and most countries require prison systems to comply with health and safety laws, regulations and conventions. It is fundamental that prison systems have safe systems of work and that they recognize hazards and mitigate risks. If adverse and critical events occur, there should be contingency plans to manage them well and to support staff who are harmed or witness harm occurring. The wider environment of the good workplace is that the employer rewards the staff reliably, puts in place welfare schemes for necessary absences and following retirement, and ensures support in adversity, not only for sickness and injury at work but also for those who witness traumatic incidents.
Good employers in the prison system plan for contingencies and train staff to cope. They will also offer a range of opportunities for assisting staff in the event of personal trouble, whether related to work or personal circumstances. This will ensure that the workforce remains committed to its task and less vulnerable to corruption or compromise with prisoners, and will underpin the performance of the workforce as a coherent team.

For prisons to be successful as institutions that employ staff and detain prisoners, they need:
- workforce policies, applied consistently;
- capable management that is firm and fair to staff and prisoners;
- enforcement and monitoring processes that are transparent and reasonable for staff who are unable to comply with the policies or who are found not to;
- an occupational health system that underpins these policies and practices.

A member of staff who sustains an injury as a result of his or her work should have access to prompt and expert treatment, suitable rehabilitation and a programme for return to work that suits his or her abilities or takes residual health problems into account.

Staff who have drug and alcohol problems or bloodborne virus infections resulting from risky lifestyles require approaches that support and motivate them to recover and contribute effectively to their work. For those whose work is persistently affected by problems of misuse, proper sanctions should be available.

Many prisons have smoking control policies for staff, not only in the interests of safety and security in the workplace but also for the general health of staff and prisoners alike. Smoking restrictions should be consistent and complementary with policies and entitlements for prisoners.

Staff have a very important part to play as role models in the rehabilitation of those in their care, engendering a culture of positive health that is an important contributor to a healthy workplace for everyone in the prison.

**Health promotion programmes to support employees**

Several countries operate programmes that promote good health in the workplace. WHO supports such programmes globally and regionally.

In the United Kingdom (Scotland), all prisons and the Prison Service headquarters subscribe to the Healthy Working Lives Award scheme that supports employers and employees in developing practical health promotion and safety themes in the workplace. The scheme encourages development of programmes, staff involvement and workplace engagement with the wider community. It is suitable for all settings, including prisons.

In Germany, a progressive scheme of prison-based health promotion began in 1997 in association with the WHO Health in Prisons project and has spread widely across the country. It has attracted support from politicians and ministries, who now realize the meaning and practical use of health promotion strategies and actively support their implementation.

The WHO publication *Health in prisons* contains a checklist for action and initiatives for self-help in prisons, as follows:
- set up a health promotion group (quality circle);
- conduct internal public relations work in penal institutions;
- set up health information centres;
- provide assistance in health target and service agreements;
- initiate service agreements concerning drug abuse;
- raise money for work;
- prepare and carry out an interview survey for staff about their health status;
- prepare and carry out health days;
- prepare and carry out information days on such topics as drugs, bullying and stress;
- prepare stress management seminars;
- organize consultations on nutrition;
- organize fitness and sports;
- organize fitness offers;
- offer supervision for team consultations;
- promote get-together activities (such as team parties or hiking);
- improve nutrition during work, such as fruit in the canteen and a water cooler;
- encourage problem and crisis consultations with colleagues;
- mediate drug, crisis or debt consultations;
- set up regional working groups for exchanging experience;
- offer support to stop smoking.

**Health awareness**

The positive features of health awareness among staff are that it will aid their own basic training, support their own well-being, support and influence those they supervise while acting as role models and develop a framework for staff training.

The foundation of health awareness is the culture in prisons. They should be safe, secure and those within
its walls should feel an individual benefit from health awareness measures. Safe custody and good order in prisons, as well as an atmosphere of respect and decency in adequate surroundings, are fundamental to good health.

**Prison staff training in health**

Prison staff require training in health matters if they are to achieve adequate levels of health, starting with basic measures to create a safe working and living environment. This chapter does not set out to prescribe the requirements for health professionals working in prison, but focuses on staff whose prime responsibilities lie elsewhere.

All staff working in prisons need a basic level of knowledge and understanding of health issues.

They need to be aware of the impact of the overall prison environment on health and of how their working methods and attitudes can enhance rather than hinder the well-being of vulnerable people in their care. The public health importance of their work should be underlined. Such awareness and knowledge about health should be built into induction training programmes as well as into basic training, and there should be regular updates in specific subject areas. The relationship between the health of staff and of prisoners should be linked to matters such as standards of conduct, management of risks such as self-harm and suicide, and their role in detecting those who need further care, help in coping and in the prevention of serious harm such as suicide and injury to others. First aid training should be included, including recent developments in mental health first aid.

**Managers, leaders and decision-making**

The principles of health and disease and the organization and objectives of health care should be core subjects in induction programmes for senior and middle managers. Continuing professional education should include updates on more recent thinking on health protection, health promotion and quality and governance in health care. Simple facts regarding the health status of the offender population, such as about clinical diseases and the organization and objectives of health care should be core subjects in induction programmes for senior and middle managers. Continuing professional education should include updates on more recent thinking on health protection, health promotion and quality and governance in health care. Simple facts regarding the health status of the offender population, such as about clinical diseases and mental health crises and suicide attempts. They also need further training, as appropriate, relating to the types of prisoner held in particular institutions, such as young people, women and foreign nationals.

**Health care professionals**

The basic professional training of health staff should be the same as for doctors and nurses working in the community health services in the country. In post-qualification terms, the first essential is that health staff must be aware of prison management techniques and approaches to working safely in a secure setting, and their application within that country and in that particular prison. This would include effective prison practice, any special circumstances affecting prison management, and the overall aims and objectives of prison management. In clinical subjects, they need further training in the main health problems facing prisoners, such as poor mental health, addictions and clinical disease including TB, HIV/AIDS and hepatitis. They also need further training, as appropriate, relating to the types of prisoner held in particular institutions, such as young people, women and foreign nationals.

**Maintaining professional standards**

Professional isolation in prison work is a risk as regards maintaining clinical standards. All health professionals working in prisons should have active and meaningful links to the health professional organizations within their countries. Such links may need to be especially strong in specific cases and sometimes in the setting of their work (addiction, mental health, women’s health and so on). Ideally, professionals should hold some clinical responsibilities outside prisons. Aside from maintaining the quality of clinical practice, this extra perspective can be important for the image of their work in the eyes of fellow professionals and may enhance respect between the prisoner as a patient and the doctor concerned.

**Clinical governance and performance monitoring**

Clear arrangements should be made for the management of prison staff and their employment, well-being and health. Training and learning should be shared with other staff who are in direct contact with prisoners with respect to the vital functions of prisons where responsibilities are shared, such as support for people with addictions, mental health crises and suicide attempts.

Facilities and arrangements should be available for staff training, associated with a public health system in the case of health care staff. Continuing training should be recognized and accepted as a priority for both staff and management. Part of the ethos of any training framework should include a discussion of simple ethical decision-
Staff health and well-being in prisons: leadership and training

making steps and opportunities for discussion of case studies and challenging or critical situations in operations and practice.

Health and equality is an important part of training. Some prison systems go further to meet their duties of care and compliance with the law regarding, for instance, equality in mental health matters or learning disabilities. Physical disability is an emerging issue as prison populations rise in number and groups with particular health needs (such as women and older people) grow more rapidly. Specific training should be available for staff who care for prisoners with particular needs and wider considerations.

Conclusion
Staff well-being, training and effectiveness, not only in ensuring secure custody but also in delivering care for prisoners, are interlinked and are important elements of a successful prison system. Staff have an interest in their own health as well as the health of those for whom they have responsibility. The workplace should ensure that health, safety and security for staff and ways of recognizing and dealing with stressful situations are well-founded through leadership and good training. Staff should understand their roles in the protection and creation of good health as well as facts relating to ill health and disease. A good employment environment as well as physical surroundings and cultural norms that promote health and positive role models are integral to successful prison work, rehabilitation for offenders and improving levels of public health which will all benefit prison staff, prisoners, their families and the wider community.

References

Further reading


